CDM-MOC-FORM Form: ANNEX 2

Date of submission	12/07/2011	
SECTION 1: PROJECT DETAILS		
1. Title of the CDM project activity	Chacabuquito Hydroelectric Power Project	
2. Please state reference Number if available	1052	
SECTION 2: <u>ADDITION/CHANGE OF NAME</u> OF PROJECT PARTICIPANT		
Add project participant Change name of project participant The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.		
Name of the entity: Chubu Electric Power Company, Incorporated		
Party (country that authorised participation): Japan		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Sakurai	Telephone:	
First name: Tokuya	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. Ms.	
Last name:	Telephone:	
First name:	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Date:	
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		

Add project participant Change name of project participant The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.	
Name of the entity: The Chugoku Electric Power Company, Inc.	
Party (country that authorised participation): Japan	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: Ikeda	Telephone:
First name: Koji	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr. ☐ Ms. ☐
Last name:	Telephone:
First name:	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for scope (b):	Date:
Name:	Signature:
Only one primary or alternate signatory per focal point entity is required.	

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Japan International Cooperation Agency (JICA)	
Party (country that authorised participation): Japan	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: SHIGIYA	Telephone:
First name: Satoshi	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.⊠ Ms.□
Last name: MURAOKA	Telephone:
First name: Hiromichi	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for scope (b):	Date:
Name:	Signature:
Only one primary or alternate signatory per focal point entity is required.	

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Name of the entity: Kyushu Electric Power Company, Incorporated	
Party (country that authorised participation): Japan	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: Nishimura	Telephone:
First name: Masayuki	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.⊠ Ms.□
Last name: Senda	Telephone:
First name: Yoshiharu	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for scope (b):	Date:
Name:	Signature:
Only one primary or alternate signatory per focal point entity is required.	

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Name of the entity: MIT Carbon Fund Co., Ltd. [MIT]	
Party (country that authorised participation): Japan	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: Hokari	Telephone:
First name: Takeshi	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.⊠ Ms.□
Last name: Ito	Telephone:
First name: Miho	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for scope (b):	Date:
Name:	Signature:
Only one primary or alternate signatory per focal point entity is required.	

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Name of the entity: Mitsubishi Corporation	
Party (country that authorised participation): Japan	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: Nakamura	Telephone:
First name: Tsuyoshi	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr. Ms. Ms.
Last name: Otani	Telephone:
First name: Satoko	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for scope (b):	Date:
Name:	Signature:
Only one primary or alternate signatory per focal point entity is required.	

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Name of the entity: Shikoku Electric Power Company, Incorporated	
Party (country that authorised participation): Japan	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: Sawada	Telephone:
First name: Yoshitaka	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.⊠ Ms. □
Last name: Yamagata	Telephone:
First name: Hiromichi	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for scope (b):	Date:
Name:	Signature:
Only one primary or alternate signatory per focal point entity is required.	

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Tohoku Electric Power Co., Inc.	
Party (country that authorised participation): Japan	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: Okanobu	Telephone:
First name: Shinichi	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.⊠ Ms.□
Last name: Ogasawara	Telephone:
First name: Shuichi	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for scope (b):	Date:
Name:	Signature:
Only one primary or alternate signatory per focal point entity is required.	

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Name of the entity: The Tokyo Electric Power Co., Inc.	
Party (country that authorised participation): Japan	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: Kageyama	Telephone:
First name: Yoshihiro	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.⊠ Ms. □
Last name: Kimura	Telephone:
First name: Atsushi	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for scope (b):	Date:
Name:	Signature:
Only one primary or alternate signatory per focal point entity is required.	