Form: ANNEX 2

Date of submission		17/01/2012
Section 1: Project Details		
1. Title of the CDM project activity	Gianyar Waste Recovery Project	
2. Please state reference number if available	1885	
Section 4: Change of contact details (project participants or focal point entities)		
The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:    Project Participant   Focal Point		
Name of the entity: myclimate	X · · · · · · · · · · · · · · · · · · ·	
Party (country that authorised participation): Switzerland		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Estermann	Telephone:	
First name: Rene	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr.   Ms.    Ms.	
Last name: Heidenreich	Telephone:	
First name: Franziska	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Da	ate:
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		