

CDM-MOC-FORM Form: ANNEX 2

Date of submission		02/09/2010
Section 1: Project Details		
1. Title of the CDM project activity	JCT Hoshiarpur Small Scale Biomass Project	
2. Please state project ID Number if available	0333	
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:		
Name of the entity: Kommunalkredit Public Consulting GmbH		
Party (country that authorised participation): Austria		
Contact details (primary authorized signatory):	Mr.	
Last name: Diernhofer	Telephone:	
First name: Wolfgang	Fax:	
Email: Mr.	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Ms.	
Last name: Stockinger	Telephone:	
First name: Andrea	Fax:	
Email: Ms.	Address:	
Specimen signature:		
Signature(s) of designated focal point for addition of project participant and communication of voluntary withdrawal of project participants:		