CDM-MOC-FORM: ANNEX 2

This annex is to be used by the focal point(s) for scope of authority (b) or by the submitting project participant when applicable, to request changes to project participant status and contact details of focal points following project/programme registration.

Date of submission:		20/08/2014		
SECTION 1: CD	M PROJECT/PROG	RAMME OF ACTIVITIES DETAILS		
Title of the project / programme of activities:		Montevideo Landfill Gas Capture and Flare Project		
Project / programme of activities reference number:		1349		
SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES				
Add project participant entity Change legal name of project participant entity (<i>if selected, indicate former name below</i>) The following entity is hereby added as a project participant or is newly named in respect of the above CDM project / programme of activities. By providing a specimen signature below, the project participant confirms its acceptance of the current modalities of communication.				
Name of entity: International Bank of Reconstruction and Development as the Trustee for the Umbrella Carbon Fund Tranche 2				
Address: 1818 H Street, N.W, Washington D.C, 20433, USA. 20433 Washington D.C United States of America				
Party (country authorizing participation): Sweden				
End-date of participation:	N/A (participation i	is not limited in time) dd/mm/yyyy		
Contact details (primary authoriz	ed signatory):	Mr. 🛛 Ms.		
Last name: Whitehouse		Telephone 1:		
First name: Simon		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Contact details (alternate authorized signatory):		Mr. 🛛 Ms.		
Last name: Andreu		Telephone 1:		
First name: Jose		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Add project participant entity Change legal name of project participant entity (<i>if selected, indicate former name below</i>) The following entity is hereby added as a project participant or is newly named in respect of the above CDM project / programme of activities. By providing a specimen signature below, the project participant confirms its acceptance of the current modalities of communication.				
Name of entity: Swedish Energy Agency				
Address: Kungsgatan 43, 63104 Eskilstuna 63104 Eskilstuna Sweden				
Party (country authorizing participation): Sweden				
End-date of participation:	⊠ N/A (participation i	is not limited in time) \Box dd/mm/yyyy		

CDM-MOC-FORM

Contact details (primary authorized signatory):		Mr. 🛛 Ms.		
Last name: Hansen		Telephone 1:		
First name: Ola		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature: Date (dd/mm/yyyy):				
Contact details (alternate authorized signatory):		Mr. Ms.		
Last name: Raab		Telephone 1:		
First name: Ulrika		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Add project participant entity Change legal name of project participant entity (<i>if selected, indicate former name below</i>) The following entity is hereby added as a project participant or is newly named in respect of the above CDM project / programme of activities. By providing a specimen signature below, the project participant confirms its acceptance of the current modalities of communication.				
Name of entity: Statkraft Markets GmbH				
Address: Derendorfer Allee 2a, 40476 Dusseldorf, Germany 40476 Dusseldorf Germany				
Party (country authorizing participation): Germany				
End-date of participation:	■ N/A (participation	is not limited in time) dd/mm/yyyy		
Contact details (primary authoriz	ed signatory):	Mr. 🛛 Ms.		
Last name: Peters		Telephone 1:		
First name: Stef		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Contact details (alternate authoriz	zed signatory):	Mr. 🛛 Ms.		
Last name: Karreman	· · · · · · · · · · · · · · · · · · ·	Telephone 1:		
First name: Arjan		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
speemen signature.				
☑ Add project participant entity ☐ Change legal name of project participant entity (if selected, indicate former name below) The following entity is hereby added as a project participant or is newly named in respect of the above CDM project / programme of activities. By providing a specimen signature below, the project participant confirms its acceptance of the current modalities of communication. Name of ontity:				
Name of entity: Enel Trade SpA				

Address: Viale Regina Margherita 125, 00198 Rome, Italy 00198 Rome Italy						
Party (country authorizing participation): Italy						
End-date of participation:	N/A (participati	⊠ N/A (participation is not limited in time) □ dd/mm/yyyy				
Contact details (primary author	rized signatory):	Mr. 🛛 Ms.				
Last name: Cuenca Candel		Telephone 1:	Telephone 1:			
First name: Norberto		Telephone 2 (optional):				
Email:		Fax (optional):	Fax (optional):			
Specimen signature:		Date (dd/mm/yyyy):	Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):		Mr. 🗖 Ms. 🛛	Mr. 🔲 Ms. 🛛			
Last name: Vitto		Telephone 1:	Telephone 1:			
First name: Viviana		Telephone 2 (optional):				
Email:		Fax (optional):				
Specimen signature:		Date (dd/mm/yyyy):	Date (dd/mm/yyyy):			
Signature(s) of the food point f	or soone of outhority	b)				
Signature(s) of the focal point for scope of authority (b) Name of authorized signatory:		Signature	Date: dd/mm/yyyy			
(Add lines for signatories as necessary. Only one signatory per focal point is required.)						