

## CDM-MOC-FORM Form: ANNEX 2

<b>Date of submission</b>	23/04/2010
<b>Section 1: Project Details</b>	
<b>1. Title of the CDM project activity</b>	Quitaracsa I (“the project”).
<b>2. Please state project ID Number if available</b>	0874
<b>Section 4: Change of contact details (project participants or focal point entities)</b>	
<b>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:</b>	
<b>Name of the entity:</b> Quitaracsa S.A. Empresa de Generación Eléctrica	
<b>Party (country that authorised participation):</b> Peru	
<b>Contact details (primary authorized signatory):</b>	Mr.
Last name: Leveque	Telephone:
First name: Axel	Fax:
Email: Mr.	Address:
Specimen signature:	
<b>Contact details (alternate authorized signatory):</b>	
Last name:	Telephone:
First name:	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for addition of project participant and communication of voluntary withdrawal of project participants:	