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:	03/09/2015
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS	
Title of the project / programme of activities:	Improving Kiln Efficiency in the Brick Making Industry in Bangladesh (Bundle-2)
Project / programme of activities reference number:	6085
SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES	
☒ **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 entity: Kommunalkredit Public Consulting GmbH	
Address: Tuerkenstrasse 9 1092 Vienna Austria	
Party (country authorizing participation): Austria	
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Diernhofer	Telephone 1:
First name: Wolfgang	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Gauss	Telephone 1:
First name: Martin	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
☒ **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 entity: Daiwa Securities Co. Ltd.	
Address: 1-9-1 Marunouchi, Chiyoda-ku 100-6752 Tokyo Japan	
Party (country authorizing participation): Japan	

End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Ando	Telephone 1:
First name: Masatsugu	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Aramaki	Telephone 1:
First name: Koichiro	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):

☒ **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 entity:
Italian Ministry for the Environment Land and Sea

Address:
Via Cristoforo Colombo, 44
Italy

Party (country authorizing participation):
Italy

End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: La Camera	Telephone 1:
First name: Francesco	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):

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.)