

Form: ANNEX 2

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| Date of submission | | 16/09/2010 |
| Section 1: Project Details | | |
| 1. Title of the CDM project activity | AIN08-W-03, Methane Recovery in Wastewater Treatment, Sumatera Utara, Indonesia | |
| 2. Please state reference number if available | 2633 | |
| Section 4: Change of contact details (project participants or focal point entities) | | |
| <p>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:</p> <p><input type="checkbox"/> Project Participant <input type="checkbox"/> Focal Point</p> | | |
| Name of the entity: AES AgriVerde Ltd. | | |
| Party (country that authorised participation): Netherlands | | |
| Contact details (primary authorized signatory): | Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> | |
| Last name: Perkowski | Telephone: | |
| First name: Leo | Fax: | |
| Email: | Address: | |
| Specimen signature: | | |
| Contact details (alternate authorized signatory): | Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> | |
| Last name: Soesanto | Telephone: | |
| First name: Christopher | Fax: | |
| Email: | Address: | |
| Specimen signature: | | |
| Signature(s) of designated focal point for scope (b): | | Date: |
| Name: | | Signature: |
| Only one primary or alternate signatory per focal point entity is required. | | |