

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:		17/10/2025
CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS		
Title of the project/programme of activities:		Providencia I: 1.8MW Small Hydro Power Generation Plant
Project/programme of activities reference number:		8756
SECTION 4: CHANGE OF CONTACT DETAILS OF ENTITY/IES (PROJECT PARTICIPANTS AND FOCAL POINTS)		
The following entity is an existing project participant/focal point entity in respect of the above CDM project / programme of activities and hereby requests the following changes to its contact details:		
<input checked="" type="checkbox"/> Project Participant		<input checked="" type="checkbox"/> Focal Point
<p>Name of entity: Mineros Aluvial SAS BIC</p>		
<p>Address: Carrera 43 A No. 14-109 Medellin, Colombia 050022 Medellin Colombia</p>		
<p>Party (country authorizing participation): Colombia</p>		
Contact details (primary authorized signatory):		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Cardona - Munera		Telephone 1:
First name: Santiago		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
<p>Contact details (alternate authorized signatory): Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/></p>		
Last name: Duque - Viana		Telephone 1:
First name: Maria Victoria		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
The following entity is an existing project participant/focal point entity in respect of the above CDM project / programme of activities and hereby requests the following changes to its contact details:		
<input checked="" type="checkbox"/> Project Participant		<input checked="" type="checkbox"/> Focal Point
<p>Name of entity: The Andean Center for Economics in the Environment – CAEMA – ACEE</p>		
<p>Address: Carrera 3 # 11-55 Apt 201 111711 Bogota Colombia</p>		
<p>Party (country authorizing participation): Colombia</p>		
Contact details (primary authorized signatory):		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Black		Telephone 1:
First name: Thomas		Telephone 2 (optional):

Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Signature(s) of the focal point for scope of authority (b) or the project participant to whom the changes apply (*)	
Name of authorized signatory:	Signature
Date: dd/mm/yyyy	
(Add lines for signatories as necessary. Only one signatory per entity is required.)	
(*) In the case of programme of activities, this section shall be signed by the focal point(s) for scope (b)	
DISCLAIMER: Any new representative for a focal point entity is understood to hold the same authority designated to him/her by the entity as that held by the previous signatory.	
If a change to a project participant requested in this section is also applicable to a focal point entity, it is understood that the project participant and the focal point are the same legal entity, with the same legal registration in the respective jurisdiction.	