CDM-MOC-FORM Form: ANNEX 2

Date of submission	25/06/2010
SECTION 1: PROJECT DETAILS	
1. Title of the CDM project activity	Yunnan Whitewaters Hydropower Development Project
2. Please state reference Number if available	0841

SECTION 2: ADDITION/CHANGE OF NAME OF PROJECT PARTICIPANT

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: CEMENTERIE ALDO BARBETTI S.P.A.	
Party (country that authorised participation): Italy	
Contact details (primary authorized signatory):	Mr.☐ Ms.☒
Last name: Barbetti	Telephone:
First name: Maria Antonella	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.☐ Ms.☐
Last name:	Telephone:
First name:	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.

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: ENEL TRADE S.P.A.	
Party (country that authorised participation): Italy	
Contact details (primary authorized signatory):	Mr.☒ Ms.☐
Last name: Deodati	Telephone:
First name: Giuseppe	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.☐ Ms.☐
Last name:	Telephone:
First name:	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.

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: ERG S.P.A.	
Party (country that authorised participation): Italy	
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: GARRONE	Telephone:
First name: ALESSANDRO	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr. ☐ Ms. ☐
Last name:	Telephone:
First name:	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.	

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: ITALCEMENTI S.p.A.	
Party (country that authorised participation): Italy	
Contact details (primary authorized signatory):	Mr.☒ Ms.☐
Last name: FERRARIO	Telephone:
First name: GIOVANNI	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.☐ Ms.☒
Last name: OJAN	Telephone:
First name: MANUELA	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.

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: IRIDE MERCATO S.P.A.	
Party (country that authorised participation): Italy	
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Bazzano	Telephone:
First name: Roberto	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr. ☐ Ms. ☐
Last name:	Telephone:
First name:	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.