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:			09/10/2013	
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS				
Title of the project / programme	of activities:	Exploitation of the biogas from Controlled Landfill in Solid Waste Management Central – CTRS / BR.040		
Project / programme of activities	reference number:	3464		
SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES				
Name of entity: Consórcio Horizonte Asja				
Address: Rod. BR.040, 1200, Bairro Califórnia 30855-500 Belo Horizonte Brazil				
Party (country authorizing participation): Switzerland				
End-date of participation:	■ N/A (participation	A (participation is not limited in time) dd/mm/yyyy		
Contact details (primary authorized signatory):		Mr. ⊠ Ms.□		
Last name: Roveda		Telephone 1:		
First name: Enrico Maria		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				
ivalie of audiorized signatory.		Signature	Date. dd/IIIII/ y y y y	
(Add lines for signatories as necessary. Only one signatory per focal point is required.)				