

## 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.

<b>Date of submission:</b>		09/12/2019
<b>SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS</b>		
<b>Title of the project / programme of activities:</b>		The Project of CCC program of Activities (PoA) for Distribution of Improved Cookstoves (ICS) in Developing South and Southeast Asia Countries (Myanmar)
<b>Project / programme of activities reference number:</b>		10471
<b>SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES</b>		
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> ( <i>if selected, indicate former name below</i> ) <b>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.</b>		
<b>Name of entity:</b> SAMPYO Cement Co., Ltd		
<b>Address:</b> (Sajik-dong), 20, Dongang-gil, Samcheok-si, Gangwon-do, Republic of Korea 03152 Seoul Republic of Korea		
<b>Party (country authorizing participation):</b> Republic of Korea		
<b>End-date of participation:</b>		<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Kim		Telephone 1:
First name: Jaehong		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> ( <i>if selected, indicate former name below</i> ) <b>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.</b>		
<b>Name of entity:</b> SK Telecom		
<b>Address:</b> 65, Eulji-ro, Jung-gu, Seoul 04539 Seoul Republic of Korea		
<b>Party (country authorizing participation):</b> Republic of Korea		
<b>End-date of participation:</b>		<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Shin		Telephone 1:
First name: Sungnam		Telephone 2 (optional):
Email:		Fax (optional):

Specimen signature:		Date (dd/mm/yyyy):	
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> (if selected, indicate former name below) <b>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.</b>			
<b>Name of entity:</b> Korea Electric Power Corporation			
<b>Address:</b> 55, Jeollyeok-ro, Naju-si, Jeollanam-do, Republic of Korea 58322 Naju-si Republic of Korea			
<b>Party (country authorizing participation):</b> Republic of Korea			
<b>End-date of participation:</b>		<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy	
<b>Contact details (primary authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Lee		Telephone 1:	
First name: Woorim		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> (if selected, indicate former name below) <b>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.</b>			
<b>Name of entity:</b> Korea South-East Power Co., Ltd			
<b>Address:</b> 32, Sadeul-ro 123beon-gil, Jinju-si, Gyeongsangnam-do, Republic of Korea 52852 Jinju-si Republic of Korea			
<b>Party (country authorizing participation):</b> Republic of Korea			
<b>End-date of participation:</b>		<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy	
<b>Contact details (primary authorized signatory):</b>		Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>	
Last name: Kim		Telephone 1:	
First name: Inkyung		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> (if selected, indicate former name below) <b>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.</b>			
<b>Name of entity:</b> Climate Change Center			

<b>Address:</b> No. 701, 190, Yulgok-ro, Jongno-gu, Seoul, Republic of Korea 03127 Seoul Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>
Last name: Kwack	Telephone 1:
First name: Hyun Shin	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK Siltron Co., Ltd	
<b>Address:</b> 53, Imsu-ro, Gumi-si, Gyeongsanbuk-do, Republic of Korea 39400 Seoul Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: HWANG	Telephone 1:
First name: KYUNGSUN	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK Lubricants	
<b>Address:</b> 26, Jong-ro, Jongno-gu, Seoul, Republic of Korea 44782 Seoul Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Kim	Telephone 1:
First name: Youngcheol	Telephone 2 (optional):

Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> Add project participant entity <input type="checkbox"/> Change legal name of project participant entity (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK airgas Inc	
<b>Address:</b> 255, Yongjam-ro, Nam-gu, Ulsan, Republic of Korea 17336 Ulsan Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Jang	Telephone 1:
First name: DongHun	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> Add project participant entity <input type="checkbox"/> Change legal name of project participant entity (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK E&S Co., Ltd	
<b>Address:</b> 26, Jong-ro, Jongno-gu, Seoul, Republic of Korea 03159 Seoul Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>
Last name: LEE	Telephone 1:
First name: YOONSOOK	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> Add project participant entity <input type="checkbox"/> Change legal name of project participant entity (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK hynix Inc	

<b>Address:</b> 2019, Gyeongchung-daero, Bubal-eup, Icheon-si, Republic of Korea 17336 Incheon-si Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>
Last name: CHOI	Telephone 1:
First name: EUNKYUNG	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK materials Co., Ltd	
<b>Address:</b> 59-33, Gaheunggongdan-ro, Yeongju-si, Gyeongsanbuk-do, Republic of Korea 03159 Yeongju-si Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>
Last name: Shin	Telephone 1:
First name: Heywon	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK ENERGY CO., LTD	
<b>Address:</b> 26, Jong-ro, Jongno-gu, Seoul, Republic of Korea 44782 Seoul Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Shim	Telephone 1:
First name: Hyun Min	Telephone 2 (optional):

Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> Add project participant entity <input type="checkbox"/> Change legal name of project participant entity (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SKC CO., Ltd	
<b>Address:</b> 84 Jangan-ro, 309beongil, Jang-an-gu, Gyeonggi-do, Republic of Korea 44782 Suwon Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: JUNG	Telephone 1:
First name: UI HYUN	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> Add project participant entity <input type="checkbox"/> Change legal name of project participant entity (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK Advanced co. Ltd	
<b>Address:</b> 299, Yongyeon-ro, Nam-gu, Ulsan, Republic of Korea Ulsan Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Byeon	Telephone 1:
First name: Seunghyeok	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> Add project participant entity <input type="checkbox"/> Change legal name of project participant entity (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK global chemical Co., Ltd	

<b>Address:</b> 26, Jong-ro, Jongno-gu, Seoul, Republic of Korea Seoul Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Hwang	Telephone 1:
First name: Sang Won	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<input checked="" type="checkbox"/> <b>Add project participant entity</b> <input type="checkbox"/> <b>Change legal name of project participant entity</b> (if selected, indicate former name below) <b>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.</b>	
<b>Name of entity:</b> SK CHEMICALS CO., LTD	
<b>Address:</b> 310, Pangyo-ro, Bundang-gu, Seongnam-si, Gyeonggi-do, Republic of Korea 13494 Seongnam-si Republic of Korea	
<b>Party (country authorizing participation):</b> Republic of Korea	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Yi	Telephone 1:
First name: Joon Bum	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<b>Signature(s) of the focal point for scope of authority (b)</b>	
Name of authorized signatory:	Signature
	Date: dd/mm/yyyy
(Add lines for signatories as necessary. Only one signatory per focal point is required.)	