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:			04/12/2013		
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS					
Title of the project / programme of activities:		Inner Mongolia North Long Yuan 100 MW Huitengxile Wind Farm			
Project / programme of activities reference number:		5029			
SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES					
Name of entity: Japan International Cooperation Agency					
Address: Nibancho Center Building, 5-25, Niban-cho, Chiyoda-ku, Tokyo 102-8012, JAPAN 102-8012 Tokyo Japan					
Party (country authorizing partic Japan	ipation):				
End-date of participation:	N/A (participation i	is not limited in time) dd/mr	n/yyyy		
Contact details (primary authoriz	zed signatory):	Mr.⊠ Ms.□			
Last name: Takahashi		Telephone 1:			
First name: hironobu		Telephone 2 (optional):			
Email:		Fax (optional):			
Specimen signature:		Date (dd/mm/yyyy):			
Contact details (alternate authori	zed signatory):	Mr. ⋈ Ms. □			
Last name: Nabeshima		Telephone 1:			
First name: Mitsuhiro		Telephone 2 (optional):			
Email:		Fax (optional):			
Specimen signature:		Date (dd/mm/yyyy):			
Name of entity: Kyushu Electric Power Co., Inc.					
Address: 1-82, Watanabe-dori 2-Chome, Chuo-ku, Fukuoka, 810-8720, Japan 810-8720 Fukuoka Japan Party (country authorizing participation):					
Japan	ipauviij.				

End-date of participation:	N/A (participation	is not limited in time) dd/mm/yyyy			
Contact details (primary authoriz	ed signatory):	Mr. ⊠ Ms. □			
Last name: Akiyama		Telephone 1:			
First name: Yasuji		Telephone 2 (optional):			
Email:		Fax (optional):			
Specimen signature:		Date (dd/mm/yyyy):			
Contact details (alternate authori	zed signatory):	Mr. ⋈ Ms. □			
Last name: Senda		Telephone 1:			
First name: Yoshiharu		Telephone 2 (optional):			
Email:		Fax (optional):			
Specimen signature:		Date (dd/mm/yyyy):			
Change legal name of project participant entity (if selected, indicate former name below) 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. Name of entity:					
Chubu Electric Power Co., Inc.					
Address: 1, Higashi-shincho, Higashi-ku, Nag 461-8680 Nagoya Japan	goya 461-8680, Japan				
Party (country authorizing partic Japan	ipation):				
End-date of participation:	■ N/A (participation	is not limited in time) dd/mm/yyyy			
Contact details (primary authoriz	ed signatory):	Mr.⊠ Ms.□			
Last name: Tanaka		Telephone 1:			
First name: Yasuhisa		Telephone 2 (optional):			
Email:		Fax (optional):			
Specimen signature:		Date (dd/mm/yyyy):			
Name of entity: Mitsubishi Corporation					
Address: 3-1, Marunouchi 2-Chome, Chiyoda 100-8086 Tokyo	a-ku, Tokyo 100-8086, Ja	apan			
Japan					
ž	ipation):				
Japan Party (country authorizing partic	,	is not limited in time)			
Japan Party (country authorizing partic Japan	N/A (participation	is not limited in time) □ dd/mm/yyyy Mr. ☑ Ms.□			

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First name: Kazuo	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):	Mr. ☑ Ms. □	
Last name: Norio	Telephone 1:	
First name: Matsunaga	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	Doto: dd/mm/ruuu
	8	Date: dd/mm/yyyy
	. 8	Date. dd/mm/yyyy
	. 3	Date. dd/mm/yyyy
		Date. dd/mm/yyyy
(Add lines for signatories as necessary. Only one signatory		Date. dd/mm/yyyy