

## 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>	08/09/2016
<b>SECTION 1: PROJECT/PROGRAMME DETAILS</b>	
<b>Title of the project/programme of activities:</b>	Municipal Solid Waste (MSW) Composting Project in Ikorodu, Lagos State
<b>Project/programme of activities reference number:</b>	3841
<b>SECTION 3: WITHDRAWAL OF PROJECT PARTICIPANTS ENTITY/IES</b>	
<input type="checkbox"/> Voluntary withdrawal <input checked="" type="checkbox"/> Administrative withdrawal	
<b>Name of entity:</b> Vlaamse Gewest	
<b>Party (country authorizing participation):</b> Belgium	
<input type="checkbox"/> Voluntary withdrawal <input checked="" type="checkbox"/> Administrative withdrawal	
<b>Name of entity:</b> Statkraft Carbon Invest AS	
<b>Party (country authorizing participation):</b> Norway	
<input type="checkbox"/> Voluntary withdrawal <input checked="" type="checkbox"/> Administrative withdrawal	
<b>Name of entity:</b> Portuguese Carbon Fund	
<b>Party (country authorizing participation):</b> Portugal	
<input type="checkbox"/> Voluntary withdrawal <input checked="" type="checkbox"/> Administrative withdrawal	
<b>Name of entity:</b> Ministry of Sustainable Development and Infrastructure	
<b>Party (country authorizing participation):</b> Luxembourg	
<input type="checkbox"/> Voluntary withdrawal <input checked="" type="checkbox"/> Administrative withdrawal	
<b>Name of entity:</b> Department of the Environment, Community and Local Government	
<b>Party (country authorizing participation):</b> Ireland	
<input type="checkbox"/> Voluntary withdrawal <input checked="" type="checkbox"/> Administrative withdrawal	
<b>Name of entity:</b> International Bank for Reconstruction and Development (IBRD) as the trustee of the Carbon Fund for Europe (CFE)	
<b>Party (country authorizing participation):</b> Portugal	
<b>Signature(s) of the focal point for scope of authority (b) or the project participant requesting the withdrawal (*)</b>	
Name of authorized signatory:	Signature <span style="float: right;">Date: dd/mm/yyyy</span>
(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)