

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