

## 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>		01/11/2017
<b>SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS</b>		
<b>Title of the project / programme of activities:</b>		Niger Acacia Senegal Plantation Project
<b>Project / programme of activities reference number:</b>		9708
<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> Suntory Holdings Limited		
<b>Address:</b> 2-3-3 Daiba, Minato-ku, 135-8631 Tokyo Japan		
<b>Party (country authorizing participation):</b> Japan		
<b>End-date of participation:</b>		<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
<b>Contact details (primary authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Oya		Telephone 1:
First name: Tomoyuki		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> Tokyo Electric Power Company Holdings, Inc		
<b>Address:</b> 1-1-3, Uchisaiwai-cho, Chiyoda-ku, 100-8560 Tokyo Japan		
<b>Party (country authorizing participation):</b> Japan		
<b>End-date of participation:</b>		<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
<b>Contact details (primary authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Nakai		Telephone 1:
First name: Yasutaka		Telephone 2 (optional):
Email:		Fax (optional):

Specimen signature:		Date (dd/mm/yyyy):	
<b>Contact details (alternate authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Tawara		Telephone 1:	
First name: Youichi		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> Sumitomo Joint Electric Power Co., Ltd			
<b>Address:</b> 16-5 Isouracho, Ehime Pref, Niihana City Japan			
<b>Party (country authorizing participation):</b> Japan			
<b>End-date of participation:</b>		<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019	
<b>Contact details (primary authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Onishi		Telephone 1:	
First name: Takao		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
<b>Contact details (alternate authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Hamada		Telephone 1:	
First name: Hideki		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> The Okinawa Electric Power Co., Inc			
<b>Address:</b> 5-2-1, Makiminato, Urasoe, 901-2602 Okinawa Japan			
<b>Party (country authorizing participation):</b> Japan			

<b>End-date of participation:</b>	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Yagi	Telephone 1:
First name: Makoto	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> Japan Iron and Steel Federation (JISF)	
<b>Address:</b> 3-2-10, Nihonbashi-Kayabacho, Chuo-ku, 103-0025 Tokyo Japan	
<b>Party (country authorizing participation):</b> Japan	
<b>End-date of participation:</b>	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Takanao	Telephone 1:
First name: Ibuki	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<b>Contact details (alternate authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Junichi	Telephone 1:
First name: Tamura	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> Japan Petroleum Exploration Co., Ltd	
<b>Address:</b> SAPIA Tower, 1-7-12, Marunouchi, Chiyoda-ku, 100-0005 Tokyo Japan	
<b>Party (country authorizing participation):</b> Japan	
<b>End-date of participation:</b>	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>

Last name: Nakamura	Telephone 1:
First name: Mitsuyoshi	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> Idemitsu Kosan Co., Ltd	
<b>Address:</b> 1-1, Marunouchi 3-Chome, Chiyoda-Ku 100-8321 Tokyo Japan	
<b>Party (country authorizing participation):</b> Japan	
<b>End-date of participation:</b>	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Sono	Telephone 1:
First name: Naoya	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<b>Contact details (alternate authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Uesugi	Telephone 1:
First name: Kenji	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> Sumitomo Chemical Company, Limited	
<b>Address:</b> 27-1, Shinkawa 2-chome, Chuo-ku 104-8260 Tokyo Japan	
<b>Party (country authorizing participation):</b> Japan	
<b>End-date of participation:</b>	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Komoto	Telephone 1:
First name: Mitsuaki	Telephone 2 (optional):
Email:	Fax (optional):

Specimen signature:		Date (dd/mm/yyyy):	
<b>Contact details (alternate authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Takasaki		Telephone 1:	
First name: Yoshihisa		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> Ministry of Sustainable Development and Infrastructure			
<b>Address:</b> 4, Place de l'Europe L-2918 Luxembourg Luxembourg			
<b>Party (country authorizing participation):</b> Luxembourg			
<b>End-date of participation:</b>		<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019	
<b>Contact details (primary authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Haine		Telephone 1:	
First name: Henri		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.)			