

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:	01/11/2017
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS	
Title of the project / programme of activities:	Niger Acacia Senegal Plantation Project
Project / programme of activities reference number:	9708
SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES	
<input checked="" type="checkbox"/> Add project participant entity <input type="checkbox"/> Change legal name of project participant entity <i>(if selected, indicate former name below)</i> 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: Suntory Holdings Limited	
Address: 2-3-3 Daiba, Minato-ku, 135-8631 Tokyo Japan	
Party (country authorizing participation): Japan	
End-date of participation:	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
Contact details (primary authorized signatory):	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"/> Add project participant entity <input type="checkbox"/> Change legal name of project participant entity <i>(if selected, indicate former name below)</i> 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: Tokyo Electric Power Company Holdings, Inc	
Address: 1-1-3, Uchisaiwai-cho, Chiyoda-ku, 100-8560 Tokyo Japan	
Party (country authorizing participation): Japan	
End-date of participation:	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
Contact details (primary authorized signatory):	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):	
Contact details (alternate authorized signatory):		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"/> Add project participant entity <input type="checkbox"/> 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: Sumitomo Joint Electric Power Co., Ltd			
Address: 16-5 Isouracho, Ehime Pref, Niihana City Japan			
Party (country authorizing participation): Japan			
End-date of participation:		<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019	
Contact details (primary authorized signatory):		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):	
Contact details (alternate authorized signatory):		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"/> Add project participant entity <input type="checkbox"/> 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: The Okinawa Electric Power Co., Inc			
Address: 5-2-1, Makiminato, Urasoe, 901-2602 Okinawa Japan			
Party (country authorizing participation): Japan			

End-date of participation:	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
Contact details (primary authorized signatory):	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"/> Add project participant entity <input type="checkbox"/> 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: Japan Iron and Steel Federation (JISF)	
Address: 3-2-10, Nihonbashi-Kayabacho, Chuo-ku, 103-0025 Tokyo Japan	
Party (country authorizing participation): Japan	
End-date of participation:	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
Contact details (primary authorized signatory):	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):
Contact details (alternate authorized signatory):	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"/> Add project participant entity <input type="checkbox"/> 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: Japan Petroleum Exploration Co., Ltd	
Address: SAPIA Tower, 1-7-12, Marunouchi, Chiyoda-ku, 100-0005 Tokyo Japan	
Party (country authorizing participation): Japan	
End-date of participation:	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
Contact details (primary authorized signatory):	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"/> Add project participant entity <input type="checkbox"/> 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: Idemitsu Kosan Co., Ltd	
Address: 1-1, Marunouchi 3-Chome, Chiyoda-Ku 100-8321 Tokyo Japan	
Party (country authorizing participation): Japan	
End-date of participation:	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
Contact details (primary authorized signatory):	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):
Contact details (alternate authorized signatory):	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"/> Add project participant entity <input type="checkbox"/> 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: Sumitomo Chemical Company, Limited	
Address: 27-1, Shinkawa 2-chome, Chuo-ku 104-8260 Tokyo Japan	
Party (country authorizing participation): Japan	
End-date of participation:	<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019
Contact details (primary authorized signatory):	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):	
Contact details (alternate authorized signatory):		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"/> Add project participant entity <input type="checkbox"/> Change legal name of project participant entity (<i>if selected, indicate former name below</i>) 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: Ministry of Sustainable Development and Infrastructure			
Address: 4, Place de l'Europe L-2918 Luxembourg Luxembourg			
Party (country authorizing participation): Luxembourg			
End-date of participation:		<input type="checkbox"/> N/A (participation is not limited in time) <input checked="" type="checkbox"/> 31/12/2019	
Contact details (primary authorized signatory):		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):	
Signature(s) of the focal point for scope of authority (b)			
Name of authorized signatory:		Signature	Date: dd/mm/yyyy
(Add lines for signatories as necessary. Only one signatory per focal point is required.)			