## **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:			08/10/2013	
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS				
Title of the project / programme of activities:		10.4 MW wind power project a district in the state of Rajasthar		
Project / programme of activities reference number:		7562		
SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES				
Add project participant entity □ 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: Asian Development Bank, as trustee	e of the Asia Pacific Carb	on Fund		
Address: 6 ADB Avenue 1550 Mandaluyong City, Metro Ma Philippines 1550 Mandaluyong, Metro Manila Philippines	nila			
<b>Party (country authorizing partic</b> Sweden	ipation):			
End-date of participation:	<b>d-date of participation:</b> $\square$ N/A (participation is not limited in time) $\square$ dd/mm/yyyy			
Contact details (primary authoriz	ed signatory):	Mr. 🛛 Ms. 🗖		
Last name: Um		Telephone 1:		
First name: Woochong		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Add project participant entity Change legal name of project p The following entity is hereby add project / programme of activities. acceptance of the current modalit	led as a project particip By providing a specime	ant or is newly named in respe	ct of the above CDM	
Name of entity: Asian Development Bank, as trustee	e of the Asia Pacific Carb	on Fund		
Address: 6 ADB Avenue 1550 Mandaluyong City, Metro Ma Philippines 1550 Mandaluyong, Metro Manila Philippines	nila			
<b>Party (country authorizing partic</b> Spain	ipation):			
End-date of participation: $\boxtimes$ N/A (participation is not limited in time) $\square$ dd/mm/yyyy			/уууу	
Contact details (primary authorized signatory):		Mr. 🛛 Ms.		
Last name: Um		Telephone 1:		
First name: Woochong		Telephone 2 (optional):		

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Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yy	уу):
Signature(s) of the focal point for scope of a	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.)	