

CDM-MOC-FORM Form: ANNEX 2

Date of submission		11/05/2010
Section 1: Project Details		
1. Title of the CDM project activity	India - Vertical Shaft Brick Kiln Cluster Project	
2. Please state project ID Number if available	0582	
Section 4: Change of contact details (project participants or focal point entities)		
The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:		
Name of the entity: International Bank for Reconstruction and Development (IBRD) as Trustee for the Community Development Carbon Fund (CDCF)		
Party (country that authorised participation):		
Contact details (primary authorized signatory):		Ms.
Last name: Chassard	Telephone:	
First name: Joelle	Fax:	
Email: Ms.	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):		Mr.
Last name: Prasad	Telephone:	
First name: Neeraj	Fax:	
Email: Mr.	Address:	
Specimen signature:		
Signature(s) of designated focal point for addition of project participant and communication of voluntary withdrawal of project participants:		