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:	22/01/2014	
CDM PROJECT/PROGRA	MME OF ACTIVITIES DETAILS	
Title of the project/programme of activities:	Wugang Waste Gas Recovery and Power Generation Project	
Project/programme of activities reference number:	3328	
SECTION 4: CHANGE OF CONTACT DETAILS OF ENTITY/IES (PROJECT PARTICIPANTS AND FOCAL POINTS)		
The following entity is an existing project participant/focal point entity in respect of the above CDM project / programme of activities and hereby requests the following changes to its contact details:		
 ☑ Project Participant 	Focal Point	
Name of entity: Enel Trade SpA		
Address:		
Viale Regina Margherita 125 00198 Rome		
Italy		
Party (country authorizing participation): Italy		
Contact details (primary authorized signatory):	Mr. ☑ Ms. ☐	
Last name: Garofalo	Telephone 1:	
First name: Dario	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
The following entity is an existing project participant/programme of activities and hereby requests the following Project Participant	focal point entity in respect of the above CDM project / wing changes to its contact details: ⊠ Focal Point	
Name of entity: Enel Trade SpA		
Address:		
Viale Regina Margherita 125 00198 Rome		
Italy		
Party (country authorizing participation): Italy		
Contact details (primary authorized signatory):	Mr. ☐ Ms. 🗖	
Last name: Vitto	Telephone 1:	
First name: Viviana	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):	Mr. ⋈ Ms.	
Last name: Argentieri	Telephone 1:	
First name: Vincenzo	Telephone 2 (optional):	
Email:	Fax (optional):	

Specimen signature:	Date (dd/mm/yyyy):
The following entity is an existing project participant programme of activities and hereby requests the following Project Participant	/focal point entity in respect of the above CDM project / owing changes to its contact details: Focal Point
Name of entity: Wuhan Iron and Steel (Group) Co.	
Address: The Plan and Development Department, Wugang Buildin Province 430063 Wuhan City China	ng, No. T999 Friendship Road, Qingshan District Hubei
Party (country authorizing participation): China	
Contact details (primary authorized signatory):	Mr. ⋈ Ms. □
Last name: Zhou	Telephone 1:
First name: Xulin	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ☑ Ms. □
Last name: Wang	Telephone 1:
First name: Xibin	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Signature(s) of the focal point for scope of authority ((b) or the project participant to whom the changes apply (*)
Name of authorized signatory:	Signature Date: dd/mm/yyyy
(Add lines for signatories as necessary. Only one signator	ory per entity is required.)
(*) In the case of programme of activities, this section sh	nall be signed by the focal point(s) for scope (b)
DISCLAIMER: Any new representative for a focal p designated to him/her by the entity as that held by the	
If a change to a project participant requested in this sunderstood that the project participant and the focal registration in the respective jurisdiction.	