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: 27/04/2013

<table>
<thead>
<tr>
<th>SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title of the project / programme of activities: Coke oven gas comprehensive utilization for co-generation project in Shandong Jikuang Morningsun Thermal Power Co., Ltd</td>
</tr>
<tr>
<td>Project / programme of activities reference number: 6152</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ Add project participant entity</td>
</tr>
<tr>
<td>☐ Change legal name of project participant entity (if selected, indicate former name below)</td>
</tr>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>

Name of entity: ESB Independent Generation Trading Ltd.

Address: 27 Lower Fitzwilliam Street, Dublin 2, Ireland

Party (country authorizing participation): Ireland

End-date of participation: ☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy

Contact details (primary authorized signatory): Mr. ☒ Ms. ☐

Last name: Weinberg
First name: Edward
Email: 
Telephone 1: 
Telephone 2 (optional): 
Fax (optional): 
Specimen signature: Date (dd/mm/yyyy):

Contact details (alternate authorized signatory): Mr. ☐ Ms. ☒

Last name: Downey
First name: Eileen
Email: 
Telephone 1: 
Telephone 2 (optional): 
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.)