CDM-MOC-FORM Form: ANNEX 2

Date of submission	10/08/2011
SECTION 1: PROJECT DETAILS	
1. Title of the CDM project activity	Jincheng Sihe Coal Mine CMM Generation Project
2. Please state reference Number if available	1896
SECTION 2: <u>ADDITION/CHANGE OF</u>	NAME OF PROJECT PARTICIPANT
Add project participant Change name of project participant The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.	
Name of the entity: MIT Carbon Fund Co., Ltd. [MIT]	
Party (country that authorised participation): Japan	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: Hokari	Telephone:
First name: Takeshi	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.⊠ Ms.□
Last name: Ito	Telephone:
First name: Miho	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for scope (b):	Date:
Name:	Signature:
Only one primary or alternate signatory per focal point entity is required.	

Add project participant Change name of project participant The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.		
Name of the entity: Shikoku Electric Power Company, Incorporated		
Party (country that authorised participation): Japan		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Sawada	Telephone:	
First name: Yoshitaka	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr.⊠ Ms. □	
Last name: Yamagata	Telephone:	
First name: Hiromichi	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Date:	
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		

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Name of the entity: Tohoku Electric Power Co., Inc.		
Party (country that authorised participation): Japan		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Okanobu	Telephone:	
First name: Shinichi	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr.⊠ Ms. □	
Last name: Ogasawara	Telephone:	
First name: Shuichi	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Date:	
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		

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Name of the entity: The Tokyo Electric Power Co., Inc.		
Party (country that authorised participation): Japan		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Kageyama	Telephone:	
First name: Yoshihiro	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr.⊠ Ms. □	
Last name: Kimura	Telephone:	
First name: Atsushi	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Date:	
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		

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Name of the entity: Deutsche Bank AG		
Party (country that authorised participation): United Kingdom of Great Britain and Northern Ireland		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Costa-D'sa	Telephone:	
First name: David	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr.⊠ Ms.□	
Last name: Lawless	Telephone:	
First name: Martin	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Date:	
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		

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Name of the entity: Electrabel S.A		
Party (country that authorised participation): Netherlands		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Van Twembeke	Telephone:	
First name: Willem	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr.⊠ Ms.□	
Last name: Sirat	Telephone:	
First name: Michel	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Date:	
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		

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	pant or is newly named in respect of the above CDM roject participant confirms its acceptance of the Statement	
of Agreement of the current modalities of communicatio		
Name of the entity:		
Norsk Hydro ASA		
Party (country that authorised participation):		
Norway		
Contact details (primary authorized signatory):	Mr.□ Ms.⊠	
Last name: Rathe	Telephone:	
First name: Liv	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr — Mc —	
· · · · · · · · · · · · · · · · · · ·	Mr.⊠ Ms. □	
Last name: Plikk	Telephone:	
First name: Martin	Fax:	
Email:	Address:	
Specimen signature:		
	D. (
Signature(s) of designated focal point for scope (b):	Date:	
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		