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:	26/09/2012

SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS

Title of the project / programme of activities:	Uganda Nile Basin Reforestation Project No 4
Project / programme of activities reference number:	4941

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:
Sumitomo Joint Electric Power Co., Ltd.

Address:
16-5 Isouracho, Niihana City, Ehime Pref, Japan
00000 Niihana City
Japan

Party (country authorizing participation):
Japan

End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr.☒ Ms.☐
Last name: Taniguchi	Telephone 1:
First name: Kyoji	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr.☒ Ms.☐
Last name: Osaki	Telephone 1:
First name: Kei	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):

☒**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:
Suntory Holdings Limited

Address:
2-3-3 Daiba, Minato-ku, Tokyo 135-8631, Japan
135-8631 Tokyo
Japan

Party (country authorizing participation):
Japan

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

Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Kenji	Telephone 1:
First name: Naiki	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):

Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Shiina	Telephone 1:
First name: Takenobu	Telephone 2 (optional):
Email:	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.)