

## CDM-MOC-FORM Form: ANNEX 2

<b>Date of submission</b>		02/09/2010
<b>Section 1: Project Details</b>		
<b>1. Title of the CDM project activity</b>	JCT Hoshiarpur Small Scale Biomass Project	
<b>2. Please state project ID Number if available</b>	0333	
<b>Section 4: Change of contact details (project participants or focal point entities)</b>		
<b>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:</b>		
<b>Name of the entity:</b> Kommunalkredit Public Consulting GmbH		
<b>Party (country that authorised participation):</b> Austria		
<b>Contact details (primary authorized signatory):</b>	Mr.	
Last name: Diernhofer	Telephone:	
First name: Wolfgang	Fax:	
Email: Mr.	Address:	
Specimen signature:		
<b>Contact details (alternate authorized signatory):</b>	Ms.	
Last name: Stockinger	Telephone:	
First name: Andrea	Fax:	
Email: Ms.	Address:	
Specimen signature:		
Signature(s) of designated focal point for addition of project participant and communication of voluntary withdrawal of project participants:		