## **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:	30/05/2017			
CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS				
Title of the project/programme of activities:	Olkaria II Geothermal Expansion Project			
Project/programme of activities reference number:	3773			
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				
Name of entity: BASF SE				
Address: Carl-Bosch-Str. 38 67056 Ludwigshafen am Rhein Germany				
<b>Party (country authorizing participation):</b> Germany				
Contact details (primary authorized signatory):	Mr. 🛛 Ms.			
Last name: Dimmler	Telephone 1:			
First name: Markus	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:	Date (dd/mm/yyyy):			
The following entity is an existing project participant/foca programme of activities and hereby requests the following Project Participant				
Name of entity: KfW				
Address: Palmengartenstrasse 5-9 60325 Frankfurt am Main Germany				
Party (country authorizing participation): Germany				
Contact details (primary authorized signatory):	Mr. 🛛 Ms.			
Last name: Harnisch	Telephone 1:			
First name: Jochen	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:	Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):	Mr. 🛛 Ms.			
Last name: Boerner	Telephone 1:			
First name: Matthias	Telephone 2 (optional):			
Email:	Fax (optional):			

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Specimen signature:	Date (dd/mm/yyyy):	
The following entity is an existing project participant/for programme of activities and hereby requests the follow ☐ Project Participant		
Name of entity: Ruukki Metals Oy		
Address: Harvialantie 420 13300 Hameenlinna Finland		
<b>Party (country authorizing participation):</b> Finland		
Contact details (primary authorized signatory):	Mr. 🛛 Ms.	
Last name: Huhtala	Telephone 1:	
First name: Olavi	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
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		
Name of entity: Statkraft Carbon Invest AS		
Address: Lilleakerveien 6 0283 Oslo Norway		
<b>Party (country authorizing participation):</b> Norway		
Contact details (primary authorized signatory):	Mr. 🛛 Ms.	
Last name: Wist	Telephone 1:	
First name: Arne	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
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:   Image: Comparison of the project of the above CDM project / project Participant   Image: Comparison of the project participant of the particip		
Name of entity: Statoil ASA		
Address: Forusbeen 50 4033 Stavanger Norway		
Party (country authorizing participation): Norway		
Contact details (primary authorized signatory):	Mr. 🔲 Ms. 🛛	
Last name: Bech	Telephone 1:	
First name: Gjertrud Groven	Telephone 2 (optional):	

Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
The following entity is an existing project participant/foc	al point entity in respect of the above CDM project /		
programme of activities and hereby requests the followin	0 0		
Project Participant	☐ Focal Point		
Name of entity: Schweizerische Ruckversicherungsgesellschaft AG (Swiss R	e)		
Address:			
Mythenquai 50/60 8022 Zurich			
Switzerland			
Party (country authorizing participation):			
Switzerland			
Contact details (primary authorized signatory):	Mr. 🛛 Ms.		
Last name: ECKERT	Telephone 1:		
First name: Vincent	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
The following entity is an existing project participant/foc	al point entity in respect of the above CDM project /		
<b>programme of activities and hereby requests the followin</b> Project Participant	<b>g changes to its contact details:</b> Focal Point		
Name of entity: Ministry of Infrastructure and the Environment (IenM)			
Address:			
Plesmanweg 1-6 2597 JG The Hague			
Netherlands			
<b>Party (country authorizing participation):</b> Netherlands			
Contact details (primary authorized signatory):	Mr. 🛛 Ms.		
Last name: Havinga	Telephone 1:		
First name: Johannes	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
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			
Name of entity: Daiwa Securities Co.Ltd.			
Address:			
1-9-1 Marunouchi,Chiyoda-ku 100-6752 Tokyo			
Japan			
Party (country authorizing participation): Japan			
Contact details (primary authorized signatory):	Mr. 🛛 Ms.		
Last name: Ando	Telephone 1:		

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First name: Masatsugu	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
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:   Image: Comparison of the compari			
Name of entity: Idemitsu Kosan Co.,Ltd.			
Address: 1-1, Marunouchi 3-Chome, Chiyoda-Ku 100-8321 Tokyo Japan			
<b>Party (country authorizing participation):</b> Japan			
Contact details (primary authorized signatory):	Mr. 🛛 Ms.		
Last name: Sono	Telephone 1:		
First name: Naoya	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
Contact details (alternate authorized signatory):	Mr. 🛛 Ms.		
Last name: Uesugi	Telephone 1:		
First name: Kenji	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
The following entity is an existing project participant/fo programme of activities and hereby requests the follow ☑ Project Participant Name of entity:			
The Okinawa Electric Power Co., Inc.			
Address: 5-2-1, Makiminato, Urasoe 901-2602 Okinawa Japan			
<b>Party (country authorizing participation):</b> Japan			
Contact details (primary authorized signatory):	Mr. 🛛 Ms.		
Last name: Ikehara	Telephone 1:		
First name: Akira	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
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:   Image: Second			

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Name of entity: Endesa Generacion, S.A.		
Address: Avda.de la Borbolla 5 41004 Sevilla Spain		
<b>Party (country authorizing participation):</b> Spain		
Contact details (primary authorized signatory):	Mr. 🛛 Ms.	
Last name: Corregidor Sanz	Telephone 1:	
First name: David	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
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:   Image: Comparison of the project participant   Image: Comparison of the project participant		
Name of entity: GAS NATURAL SDG, SA		
Address: Avenida San Luis, 77, 2A. 28033 Madrid Spain		
<b>Party (country authorizing participation):</b> Spain		
Contact details (primary authorized signatory):	Mr. 🔲 Ms. 🔀	
Last name: Cortes Rodrigo	Telephone 1:	
First name: Ana	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):	Mr. 🔲 Ms. 🔀	
Last name: Landeira Morillo	Telephone 1:	
First name: Alejandra	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
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:		
Name of entity:   Kingdom of Spain - Ministry of Agriculture, Food and Environment and Ministry of Economy and Competitiveness		
Address: C/Alcala 92 28009 Madrid Spain		
Party (country authorizing participation): Spain		
Contact details (primary authorized signatory):	Mr. 🔲 Ms. 🔀	

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Last name: Ulargui Aparicio	Telephone 1:		
First name: Valvanera	Telephone 2 (optional):	Telephone 2 (optional):	
Email:	Fax (optional):	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):		
<b>Signature(s) of the focal point for scope of a</b> Name of authorized signatory:	<b>uthority (b) or the project participant to</b> Signature	<b>o whom the changes apply (*)</b> Date: dd/mm/yyyy	
(Add lines for signatories as necessary. Only o	one signatory per entity is required.)		
(*) In the case of programme of activities, this section shall be signed by the focal point(s) for scope (b)			
DISCLAIMER: Any new representative for designated to him/her by the entity as that l	1 V	ld the same authority	
If a change to a project participant request understood that the project participant and			

understood that the project participant and the focal point are the same legal entity, with the same legal registration in the respective jurisdiction.