## **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:		13/02/2018
SECTION 1: PROJECT/PROGRAMME DETAILS		
Title of the project/programme of activities:	Santa Rosa	
Project/programme of activities reference number:	0088	
SECTION 3: WITHDRAWAL OF PROJECT PARTICIPANTS ENTITY/IES		
☑ Voluntary withdrawal ☐ Administrative withdrawal		
The following entity is registered as a project participant in the above CDM project / programme of activities and hereby confirms its voluntary consent to be withdrawn.		
Name of entity: Kommunalkredit Public Consulting GmbH		
Party (country authorizing participation): Austria		
Name of authorized signatory: Alexandra Amerstorfer		
Signature:	Date (dd/mm/yyyy):	
Signature(s) of the focal point for scope of authority (b) of Name of authorized signatory:	or the project participant reques Signature	Date: dd/mm/yyyy
(Add lines for signatories as necessary. Only 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)		