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:	14/12/2020
CDM PROJECT/PROGRA	MME OF ACTIVITIES DETAILS
Title of the project/programme of activities:	N2O Emission Reduction in nitric acid plant Paulínia, SP, Brazil
Project/programme of activities reference number:	1011
SECTION 4: CHANGE OF CONTACT DETAILS OF ENTITY/IES (PROJECT PARTICIPANTS AND FOCAL POINTS)	
The following entity is an existing project participant/ programme of activities and hereby requests the follow ☑ Project Participant	focal point entity in respect of the above CDM project / wing changes to its contact details: ☑ Focal Point
Name of entity: Rhodia Energy GHG	
Address: 25 Rue de Clichy 75009 Paris France	
Party (country authorizing participation): France	
Contact details (primary authorized signatory):	Mr. ⋈ Ms.
Last name: Toledo	Telephone 1:
First name: Alexandre	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ⋈ Ms.
Last name: Gouveia	Telephone 1:
First name: Daniel	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:	
N Project Participant	☐ Focal Point
Name of entity: Rhodia Energy GHG SAS	
Address: 25 Rue de Clichy 75009 Paris France	
Party (country authorizing participation): Switzerland	
Contact details (primary authorized signatory):	Mr.⊠ Ms.□
Last name: Toledo	Telephone 1:
First name: Alexandre	Telephone 2 (optional):
Email:	Fax (ontional):

Specimen signature:	Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):	Mr.⊠ Ms.□	
Last name: Gouveia	Telephone 1:	
First name: Daniel	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	☐ Focal Point	
Name of entity: Rhodia Energy Brazil Ltda		
Address:		
Avenida Dr. Roberto Moreira, 5005 13148-914 Paulínia		
Brazil		
Party (country authorizing participation): Brazil		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Toledo	Telephone 1:	
First name: Alexandre	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):	Mr. ⋈ Ms.□	
Last name: Gouveia	Telephone 1:	
First name: Daniel	Telephone 2 (optional):	
Email:	Fax (optional):	
Specimen signature:	Date (dd/mm/yyyy):	
Signature(s) of the focal point for scope of authority (b) or the project participant to whom the changes apply (*)		
Name of authorized signatory: 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)		
DISCLAIMER: Any new representative for a focal point entity is understood to hold the same authority		
designated to him/her by the entity as that held by the previous signatory.		
If a change to a project participant requested in this section is also applicable to a focal point entity, it is		
understood that the project participant and the focal point are the same legal entity, with the same legal registration in the respective jurisdiction.		

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