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.

Title of the project/programme of activities: Mokpo Landfill Gas Recovery Project for Edgeneration		
Project/programme of activities reference number: 2834 SECTION 4: CHANGE OF CONTACT DETAILS OF ENTITY/IES (PROJECT PARTIAND FOCAL POINTS) The following entity is an existing project participant/focal point entity in respect of the above CDM programme of activities and hereby requests the following changes to its contact details: Project Participant	CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS	
SECTION 4: CHANGE OF CONTACT DETAILS OF ENTITY/IES (PROJECT PARTIAND FOCAL POINTS) The following entity is an existing project participant/focal point entity in respect of the above CDM programme of activities and hereby requests the following changes to its contact details: Project Participant Name of entity:	lectricity	
AND FOCAL POINTS) The following entity is an existing project participant/focal point entity in respect of the above CDM programme of activities and hereby requests the following changes to its contact details: ☑ Project Participant ☑ Focal Point Name of entity:		
programme of activities and hereby requests the following changes to its contact details: ☑ Project Participant ☑ Focal Point Name of entity:	SECTION 4: CHANGE OF CONTACT DETAILS OF ENTITY/IES (PROJECT PARTICIPANTS AND FOCAL POINTS)	
	project /	
Address: 86 Cheonggyecheonro, Junggu 04541 Seoul Republic of Korea		
Party (country authorizing participation): Republic of Korea		
Contact details (primary authorized signatory): Mr. ☐ Ms. ☒		
Last name: Park Telephone 1:		
First name: Jihyun 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.		