CDM-MOC-FORM Form: ANNEX 2

Date of submission		14/03/2012
SECTION 1: PROJECT DETAILS		
1. Title of the CDM project activity	Municipal Solid Waste (MSW) Composting Project in Ikorodu, Lagos State	
2. Please state reference Number if available	3841	
SECTION 2: <u>ADDITION/CHANGE OF NAME</u> OF PROJECT PARTICIPANT		
Add project participant Change name of project participant The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.		
Name of the entity: Department of the Environment, Community and Local Government		
Party (country that authorised participation): Ireland		
Contact details (primary authorized signatory):	Mr.⊠ Ms. □	
Last name: Gernon	Telephone:	
First name: Pat	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. ☐ Ms. ☐	
Last name:	Telephone:	
First name:	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Da	nte:
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required		