

Form: ANNEX 2

Date of submission		05/06/2012
Section 1: Project Details		
1. Title of the CDM project activity	Sasol Nitrous Oxide Abatement Project	
2. Please state reference number if available	0961	
Section 4: Change of contact details (project participants or focal point entities)		
The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details: <input checked="" type="checkbox"/> Project Participant <input checked="" type="checkbox"/> Focal Point		
Name of the entity: Sasol Nitro		
Party (country that authorised participation): South Africa		
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Louw	Telephone:	
First name: Johannes	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Venter	Telephone:	
First name: Paul	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):		Date:
Name:		Signature:
Only one primary or alternate signatory per focal point entity is required.		

The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:

☒ Project Participant

☐ Focal Point

Name of the entity:

MGM Carbon Portfolio S.a.r.l

Party (country that authorised participation):

Switzerland

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: Fernandez de Mello e Souza

Telephone:

First name: Pablo

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. ☐ Ms. ☒

Last name: Zanzottera

Telephone:

First name: Nuria

Fax:

Email:

Address:

Specimen signature:

Signature(s) of designated focal point for scope (b):

Date:

Name:

Signature:

Only one primary or alternate signatory per focal point entity is required.

The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:

☒ Project Participant

☐ Focal Point

Name of the entity:

MGM Carbon Portfolio S.a.r.l

Party (country that authorised participation):

United Kingdom of Great Britain and Northern Ireland

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: Fernandez de Mello e Souza

Telephone:

First name: Pablo

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. ☐ Ms. ☒

Last name: Zanzottera

Telephone:

First name: Nuria

Fax:

Email:

Address:

Specimen signature:

Signature(s) of designated focal point for scope (b):

Date:

Name:

Signature:

Only one primary or alternate signatory per focal point entity is required.