## CDM-MOC-FORM Form: ANNEX 2

| Date of submission   | 01/12/2011   |  |
|--|--|--|
| SECTION 1: PROJECT DETAILS   |  |  |
| 1. Title of the CDM project activity   | 75MW wind power project in Maharashtra by Essel<br>Mining Industries Limited |  |
| 2. Please state reference Number if available  | 1115   |  |
| 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:<br>Asian Development Bank  |  |  |
| Party (country that authorised participation): Sweden  |  |  |
| Contact details (primary authorized signatory):  | Mr.⊠ Ms.□  |  |
| Last name: Yao   | Telephone:   |  |
| First name: Xianbin  | Fax:   |  |
| Email:   | Address:   |  |
| Specimen signature:  |  |  |
| Contact details (alternate authorized signatory):  | Mr.⊠ Ms.□  |  |
| Last name: Um  | Telephone:   |  |
| First name: Woochong   | 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.  |  |  |

| 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:<br>Asian Development Bank  |            |  |
| Party (country that authorised participation): Spain   |            |  |
| Contact details (primary authorized signatory):  | Mr.⊠ Ms. □ |  |
| Last name: Yao   | Telephone: |  |
| First name: Xianbin  | Fax:       |  |
| Email:   | Address:   |  |
| Specimen signature:  |            |  |
| Contact details (alternate authorized signatory):  | Mr.⊠ Ms. □ |  |
| Last name: Um  | Telephone: |  |
| First name: Woochong   | 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.  |            |  |

| <b>⊠</b> 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: Swedish Energy Agency   |            |  |
| Party (country that authorised participation): Sweden   |            |  |
| Contact details (primary authorized signatory):   | Mr.⊠ Ms.□  |  |
| Last name: Bostrom  | Telephone: |  |
| First name: Bengt   | Fax:       |  |
| Email:  | Address:   |  |
| Specimen signature:   |            |  |
|   |            |  |
| Contact details (alternate authorized signatory):   | Mr.□ Ms.⊠  |  |
| Last name: Myrman   | Telephone: |  |
| First name: Johanna   | 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.   |            |  |

| 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:<br>Kingdom of Spain  |            |  |
| Party (country that authorised participation): Spain   |            |  |
| Contact details (primary authorized signatory):  | Mr.□ Ms.⊠  |  |
| Last name: Montalvo  | Telephone: |  |
| First name: Alicia   | Fax:       |  |
| Email:   | Address:   |  |
| Specimen signature:  |            |  |
| Contact details (alternate authorized signatory):  | Mr.⊠ Ms.□  |  |
| Last name: Garcia  | Telephone: |  |
| First name: Gonzalo  | 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.  |            |  |