CDM-MOC-FORM Form: ANNEX 2

Date of submission	23/10/2009
Section 1: Project Details	
1. Title of the CDM project activity	SML WHRB CPP
2. Please state project ID Number if available	1708
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:	
Name of the entity: Sree Metaliks Limited	
Party (country that authorised participation): India	
Contact details (primary authorized signatory):	Mr.
Last name: Agarwal	Telephone:
First name: Mahesh	Fax:
Email: Mr.	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	
Last name:	Telephone:
First name:	Fax:
Email:	Address:
Specimen signature:	
Signature(s) of designated focal point for addition of project participant and communication of voluntary withdrawal of project participants:	