

CDM-MOC-FORM Form: ANNEX 2

Date of submission	27/08/2010
SECTION 1: PROJECT DETAILS	
1. Title of the CDM project activity	Allain Duhangan Hydroelectric Project (ADHP)
2. Please state reference Number if available	0862
SECTION 2: <u>ADDITION/CHANGE OF NAME</u> OF PROJECT PARTICIPANT	
<input checked="" type="checkbox"/> Add project participant <input type="checkbox"/> 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 <u>Statement of Agreement</u> of the current modalities of communication.	
Name of the entity: ITALCEMENTI S.p.A.	
Party (country that authorised participation): Italy	
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: FERRARIO	Telephone:
First name: GIOVANNI	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>
Last name: OJAN	Telephone:
First name: MANUELA	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:

CEMENTERIE ALDO BARBETTI S.P.A.

Party (country that authorised participation):

Italy

Contact details (primary authorized signatory):

Mr. ☐ Ms. ☒

Last name: Barbetti

Telephone:

First name: Maria Antonella

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):

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:

IRIDE MERCATO S.P.A.

Party (country that authorised participation):

Italy

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: Bazzano

Telephone:

First name: Roberto

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):

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:

ENEL TRADE S.P.A.

Party (country that authorised participation):

Italy

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: Deodati

Telephone:

First name: Giuseppe

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):

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:

ERG S.P.A.

Party (country that authorised participation):

Italy

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: GARRONE

Telephone:

First name: ALESSANDRO

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):

Date:

Name:

Signature:

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