CDM-MOC-FORM: ANNEX 2

This annex is to be used by the focal point(s) for scope of authority (b) or by the submitting project participant when applicable, to request changes to project participant status and contact details of focal points following project/programme registration.

Date of submission:	03/08/2012
CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS	
Title of the project/programme of activities:	Landfill Gas utilization at Seelong Sanitary Landfill, Malaysia
Project/programme of activities reference number:	0927

SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES

☐ **Add project participant entity**
☒ **Change legal name of project participant entity** *(if selected, indicate former name below)*
The following entity is hereby added as a project participant or is newly named in respect of the above CDM project / programme of activities. By providing a specimen signature below, the project participant confirms its acceptance of the current modalities of communication.

Name of entity:
SWM Enviro Sdn. Bhd.

Address:
20, Jalan Wan Kadir 1, Taman Tun Dr. Ismail
60000 Kuala Lumpur
Malaysia

Former name of project participant entity (if applicable):
Southern Waste Management Sdn. Bhd.

Party (country authorizing participation):
Malaysia

End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Ho	Telephone 1:
First name: De Leong	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):

Signature(s) of the focal point for scope of authority (b)
Name of authorized signatory: Signature Date: dd/mm/yyyy

(Add lines for signatories as necessary. Only one signatory per focal point is required.)

SECTION 4: CHANGE OF CONTACT DETAILS OF ENTITY/IES (PROJECT PARTICIPANTS AND FOCAL POINTS)

The following entity is an existing project participant/focal point entity in respect of the above CDM project / programme of activities and hereby requests the following changes to its contact details:
☒ Project Participant ☐ Focal Point

Name of entity:
Ministry of Climate and Energy, Danish Energy Agency

Address: Danish Energy Agency Climate and Energy Economics 44, Amaliegade DK-1256 Copenhagen K Denmark	
Party (country authorizing participation): Denmark	
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Emmik Sorensen	Telephone 1:
First name: Ole	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Pedersen	Telephone 1:
First name: Bo Riisgaard	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):

Signature(s) of the focal point for scope of authority (b) or the project participant to whom the changes apply (*)

Name of authorized signatory:	Signature	Date: dd/mm/yyyy

(Add lines for signatories as necessary. Only one signatory per entity is required.)

(*) In the case of programme of activities, this section shall be signed by the focal point(s) for scope (b)

DISCLAIMER: Any new representative for a focal point entity is understood to hold the same authority designated to him/her by the entity as that held by the previous signatory.

If a change to a project participant requested in this section is also applicable to a focal point entity, it is understood that the project participant and the focal point are the same legal entity, with the same legal registration in the respective jurisdiction.