

Form: ANNEX 2

Date of submission		20/06/2012
Section 1: Project Details		
1. Title of the CDM project activity	42.5 MW Wind Power Project by VRL Logistics Ltd in Karnataka State (India)	
2. Please state reference number if available	2265	
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: Asian Development Bank, as trustee of the Asia Pacific Carbon Fund		
Party (country that authorised participation): Spain		
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Chander	Telephone:	
First name: Seethapathy	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
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.		

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:

Asian Development Bank, as trustee of the Asia Pacific Carbon Fund

Party (country that authorised participation):

Sweden

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: Chander

Telephone:

First name: Seethapathy

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.

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:

Kingdom of Spain

Party (country that authorised participation):

Spain

Contact details (primary authorized signatory):

Mr. ☐ Ms. ☒

Last name: Magro Andrade

Telephone:

First name: Susana

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. ☒ Ms. ☐

Last name: Soler Vera

Telephone:

First name: Alberto

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.