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:	29/08/2012
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS	
Title of the project / programme of activities:	Aberdare Range / Mt. Kenya Small Scale Reforestation Initiative Kirimara-Kithithina Small Scale A/R Project
Project / programme of activities reference number:	3207
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: ldemitsu Kosan Co.,Ltd.	
Address: 1-1 ,Marunouchi 3-Chome,Chiyoda-Ku,Tokyo, 100-8321,Japan 100-8321 Tokyo Japan	
Party (country authorizing participation): Japan	
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Idemitsu	Telephone 1:
First name: Shoichi	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Kuroki	Telephone 1:
First name: Hiroaki	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
☒ **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: Japan Iron and Steel Federation (JISF)	
Address: 3-2-10,Nihombashi-Kayabacho,Chuo-ku,Tokyo 103-0025 JAPAN 103-0025 Tokyo Japan	
Party (country authorizing participation): Japan	

End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Terashima	Telephone 1:
First name: Kiyotaka	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.)