

CDM-MOC-FORM Form: ANNEX 2

Date of submission		16/07/2012
SECTION 1: PROJECT DETAILS		
1. Title of the CDM project activity		
2. Please state reference Number if available		2956
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: Goteborg Energi AB		
Party (country that authorised participation): Sweden		
Contact details (primary authorized signatory):		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Dalman		Telephone:
First name: Bengt Goran		Fax:
Email:		Address:
Specimen signature:		
Contact details (alternate authorized signatory):		Mr. <input type="checkbox"/> Ms. <input type="checkbox"/>
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:

Schweizerische Rückversicherungsgesellschafts AG (Swiss RE)

Party (country that authorised participation):

Switzerland

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: ECKERT

Telephone:

First name: Vincent

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. ☒ Ms. ☐

Last name: SPIEGEL

Telephone:

First name: Andreas

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:

Government of Italy -Ministry for the Environment, Land and Sea

Party (country that authorised participation):

Italy

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: Clini

Telephone:

First name: Corrado

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:

Ministry of Sustainable Development and Infrastructure

Party (country that authorised participation):

Luxembourg

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: WIRTZ

Telephone:

First name: Raoul

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:

Statkraft Carbon Invest AS

Party (country that authorised participation):

Norway

Contact details (primary authorized signatory):

Mr. ☐ Ms. ☒

Last name: Bolle

Telephone:

First name: Anne

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. ☐ Ms. ☒

Last name: Viddal

Telephone:

First name: Mari Grooss

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:

Statoil ASA

Party (country that authorised participation):

Norway

Contact details (primary authorized signatory):

Mr. ☒ Ms. ☐

Last name: Egeland

Telephone:

First name: Thomas B

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. ☒ Ms. ☐

Last name: Gautesen

Telephone:

First name: Kristian L

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.