## **CDM-MOC-FORM: ANNEX 1**

This annex is required at the 'request for registration' stage only and is submitted by the validating DOE together with CDM-MOC-FORM ("Modalities of communication statement").

SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS			
Title of the project / programme of activities		Nam Hoa 2 Hydro Power Project	
Project / programme of activities reference number: (if available)		7193	
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES			
Name of entity: Perenia Pty Ltd			
Address: PO Box 627 NSW 2059 North Sydney Australia			
Party (country authorizing partic Australia	ipation):		
End-date of participation:	☑ N/A (participation is not limited in time) ☐ dd/mm/yyyy		
Contact details (primary authorize	zed signatory):	Mr. ☑ Ms. ☐	
Last name: Wiener		Telephone 1:	
First name: Michael		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):  Last name: Jauncey		Mr. ⋈ Ms. ☐ Telephone 1:	
First name: Andrew		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Name of entity: ANPHA Hydro Electric Investment Joint Stock Company  Address: No. 214, To Hieu street, group 6, To Hieu ward, Son La city Son La province Viet Nam			
Party (country authorizing participation): Viet Nam			
End-date of participation:	N/A (participation)	is not limited in time)	
Contact details (primary authorize	zed signatory):	Mr. ⊠ Ms. □	
Last name: Tran		Telephone 1:	
First name: Trong Doa		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):		Mr. ⋈ Ms. □	
Last name: Le		Telephone 1:	
First name: Duc Huong		Telephone 2 (optional):	

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Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Name of entity: EVN Finance Joint Stock Company				
Address: Level 6-7, No. 434 Tran Khat Chan street, Pho Hue Ward, Hai Ba Trung District Hanoi Viet Nam				
Party (country authorizing participation): Viet Nam				
End-date of participation:	☑ N/A (participation is not limited in time) ☐ dd/mm/yyyy			
Contact details (primary authorized signatory):		Mr. ☐ Ms.⊠		
Last name: Cao		Telephone 1:		
First name: Thi Thu Ha		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Contact details (alternate authorized signatory):		Mr. ☐ Ms. ☒		
Last name: Dang		Telephone 1:		
First name: Thi Hong Hai		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
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