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

| Date of submission  |  | 04/05/2012 |
|---|--|------------|
| Section 1: Project Details  |  |            |
| 1. Title of the CDM project activity  | Composting of Organic Content of Municipal Solid Waste in Lahore |            |
| 2. Please state project ID Number if available  | 2778   |            |
| Section 2: List of project participants   |  |            |
| Name of the entity:<br>Lahore Compost (Pvt) Limited   |  |            |
| Party (country that authorised participation): Pakistan   |  |            |
| Contact details (primary authorised signatory):   | Mr.  |            |
| Last name:<br>Yousafzai   | Telephone:   |            |
| First name:<br>Hoor   | Fax:   |            |
| Email:  | Address:   |            |
| Specimen signature:   |  |            |
|   |  |            |
| Contact details (alternate authorised signatory):   |  |            |
| Last name:  | Telephone:   |            |
| First name:   | Fax:   |            |
| Email:  | Address:   |            |
| Specimen signature:   |  |            |
|   |  |            |
| Name of the entity: International Bank for Reconstruction and Development (IBRD) as Trustee of the Danish Carbon Fund |  |            |
| Party (country that authorised participation):  |  |            |
| Denmark   |  |            |
| Contact details (primary authorised signatory):   | Ms.  |            |
| Last name:<br>Chassard  | Telephone:   |            |
| First name:<br>Joelle   | Fax:   |            |
| Email:  | Address:   |            |
| Specimen signature:   |  |            |
| Contact details (alternate authorised signatory).   | Mr.  |            |
| Contact details (alternate authorised signatory):   |  |            |
| Last name:<br>Wang  | Telephone:   |            |
| First name:<br>Tao  | Fax:   |            |
| Email:  | Address:   |            |
| Specimen signature:   |  |            |

| Name of the entity: Danish Ministry of Climate and Energy/Danish Energy Agency |            |  |
|--|------------|--|
| Party (country that authorised participation): Denmark                         |            |  |
| Contact details (primary authorised signatory):                                | Ms.        |  |
| Last name:<br>Ostertag   | Telephone: |  |
| First name:<br>Birgitte  | Fax:       |  |
| Email:   | Address:   |  |
| Specimen signature:  |            |  |
| Contact details (alternate authorised signatory):                              |            |  |
| Last name:   | Telephone: |  |
| First name:  | Fax:       |  |
| Email:   | Address:   |  |
| Specimen signature:  |            |  |