

## 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                                    |  |
|---|--|
| <b>Title of the project / programme of activities</b>                                     | FIRA Wastewater Treatment System, Methane Capture and Utilisation Programme in Mexico                              |
| <b>Project / programme of activities reference number:</b><br>(if available)              | 8132   |
| SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES   |  |
| <b>Name of entity:</b><br>Fideicomisos Instituidos en Relación con la Agricultura         |  |
| <b>Address:</b><br>Antigua Carretera a Patzcuaro 8555, Morelia, Michoacan 58342<br>Mexico |  |
| <b>Party (country authorizing participation):</b><br>Mexico                               |  |
| <b>End-date of participation:</b>   | <input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy |
| <b>Contact details (primary authorized signatory):</b>                                    | Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>   |
| Last name: Soto Guerra  | Telephone 1:   |
| First name: Enrique   | Telephone 2 (optional):  |
| Email:  | Fax (optional):  |
| Specimen signature:   | Date (dd/mm/yyyy):   |
| <b>Contact details (alternate authorized signatory):</b>                                  | Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>   |
| Last name: Marin Castillo   | Telephone 1:   |
| First name: Ana   | Telephone 2 (optional):  |
| Email:  | Fax (optional):  |
| Specimen signature:   | Date (dd/mm/yyyy):   |