# 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** | Reducing gas leakages within 'Tiraspoltransgaz-Pridnestrivie' LLC gas distribution network, Transnistria/Republic of Moldova |
| **Project / programme of activities reference number:** *(if available)* | 9397 |

| SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES | | |
|---|---|---|
| **Name of entity:** Danish Carbon Assets ApS | | |
| **Address:** Solsbaekvej 80, 9300 Saeby Denmark | | |
| **Party (country authorizing participation):** Denmark | | |
| **End-date of participation:** | ☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy | |
| **Contact details (primary authorized signatory):** | | Mr. ☒ Ms. ☐ |
| Last name: Larsen | | Telephone 1: |
| First name: Jess | | Telephone 2 (optional): |
| Email: | | Fax (optional): |
| Specimen signature: | | Date (dd/mm/yyyy): |
| **Name of entity:** Tiraspoltransgaz-Pridnestrivie LLC | | |
| **Address:** Sverdlova Street 49, 3300 Tiraspol Republic of Moldova | | |
| **Party (country authorizing participation):** Republic of Moldova | | |
| **End-date of participation:** | ☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy | |
| **Contact details (primary authorized signatory):** | | Mr. ☒ Ms. ☐ |
| Last name: Mitsinsky | | Telephone 1: |
| First name: Nikolay | | Telephone 2 (optional): |
| Email: | | Fax (optional): |
| Specimen signature: | | Date (dd/mm/yyyy): |