

## 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").

<b>SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS</b>	
<b>Title of the project / programme of activities</b>	6 MW Renewable energy generation project by Varam Power Projects in India
<b>Project / programme of activities reference number:</b> <i>(if available)</i>	0697
<b>SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES</b>	
<b>Name of entity:</b> M/s Varam Power Projects Private Limited	
<b>Address:</b> No 8-4-120/3, Raja complex, G.T. Road, Srikakulam, Andhra Pradesh 532 001 India	
<b>Party (country authorizing participation):</b> India	
<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: Narasimham	Telephone 1:
First name: A.V.	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<b>Name of entity:</b> Noble Carbon Credits Limited	
<b>Address:</b> 1st Floor, Gilford Hall, 13 Gilford Road, Dublin 4 Ireland	
<b>Party (country authorizing participation):</b> United Kingdom of Great Britain and Northern Ireland	
<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: Ansorg	Telephone 1:
First name: Thorsten	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):