

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	Dak Doa Hydropower Project
Project / programme of activities reference number: <i>(if available)</i>	4384
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES	
Name of entity: Dak Doa Hydropower JSC	
Address: Ton Duc Thang Street Pleiku City, Gia Lai Province Viet Nam	
Party (country authorizing participation): Viet Nam	
End-date of participation:	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Pham	Telephone 1:
First name: Van Hung	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Name of entity: Vitol S.A.	
Address: Boulevard du Pont d'Arve 28, P.O. Box 384, CH 1205 1211 Geneva 4 Switzerland	
Party (country authorizing participation): Switzerland	
End-date of participation:	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Kaul	Telephone 1:
First name: Sudhir	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Fransen	Telephone 1:
First name: David	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):