## **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   |                 | Anhui Guzhen Biomass Generation Project |
| Project / programme of activities reference number: (if available)   |                 | 8008                                    |
| SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES  |                 |   |
| Name of entity: EDF Trading Limited  |                 |   |
| Address: 80 Victoria Street, Cardinal Place, 3rd Floor, SW1E 5JL London United Kingdom of Great Britain and Northern Ireland |                 |   |
| Party (country authorizing participation): France  |                 |   |
| End-date of participation:   |                 | is not limited in time)                 |
| Contact details (primary authoriz  | zed signatory): | Mr. ⋈ Ms. □                             |
| Last name: Joubert   |                 | Telephone 1:                            |
| First name: François   |                 | Telephone 2 (optional):                 |
| Email:   |                 | Fax (optional):                         |
| Specimen signature:  |                 | Date (dd/mm/yyyy):                      |
|  |                 |   |
| Name of entity:<br>National Guzhen Bio Energy Co., Ltd   |                 |   |
| Address: Old Administration Building, No. 1 Beishatan, Deshengmen Wai, Chaoyang District, Beijing China                      |                 |   |
| Party (country authorizing participation): China   |                 |   |
| End-date of participation:   |                 |   |
| Contact details (primary authorized signatory):  |                 | Mr. ⊠ Ms.□                              |
| Last name: Chunli  |                 | Telephone 1:                            |
| First name: Wang   |                 | Telephone 2 (optional):                 |
| Email:   |                 | Fax (optional):                         |
| Specimen signature:  |                 | Date (dd/mm/yyyy):                      |
|  |                 |   |
| Contact details (alternate authori   | zed signatory): | Mr. ⋈ Ms.□                              |
| Last name: Zhao  |                 | Telephone 1:                            |
| First name: Hui  |                 | Telephone 2 (optional):                 |
| Email:   |                 | Fax (optional):                         |
| Specimen signature:  |                 | Date (dd/mm/yyyy):                      |
|  |                 |   |