## **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		Biogas Technology Group Ras Al-Khaimah Landfill Gas to Energy Project	
Project / programme of activities reference number: (if available)		2496	
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES			
Name of entity: Biogas Technology Group Limited			
Address: PO Box 119, Martello Court, Admir GY1 3HB Channel Islands United Kingdom of Great Britain ar	,	uernsey	
Party (country authorizing participation): United Kingdom of Great Britain and Northern Ireland			
End-date of participation:	N/A (participation	is not limited in time)	
Contact details (primary authoriz	zed signatory):	Mr. ☐ Ms. ☒	
Last name: Highton		Telephone 1:	
First name: Bridget		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Name of entity: Public Works and Services Departm  Address: PO Box 1661 Ras Al-Khaimah United Arab Emirates	nent, Government of Ras	Al-Khaimah	
Party (country authorizing participation): United Arab Emirates			
End-date of participation:	N/A (participation)	is not limited in time)  dd/mm/yyyy	
Contact details (primary authoriz	zed signatory):	Mr. ☑ Ms. □	
Last name: Sakkal		Telephone 1:	
First name: Michel		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Name of entity: Biogas Technology Limited			
Address: 6 Brookside Industrial Estate, Glatton Road, Sawtry PE28 5SB Cambridgeshire United Kingdom of Great Britain and Northern Ireland			
Party (country authorizing participation): United Kingdom of Great Britain and Northern Ireland			
End-date of participation:   ✓ N/A (participation is not limited in time)  ✓ dd/mm/yyyy			
Contact details (primary authorized signatory): Mr. ⋈ Ms. □			

## CDM-MOC-FORM

Last name: Gadsby		Telephone 1:		
First name: Ian		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Name of entity: EcoSecurities Group PLC.				
Address: 40 Dawson Street Dublin 2 Ireland				
Party (country authorizing participation): United Kingdom of Great Britain and Northern Ireland				
End-date of participation:	of participation:   ☑ N/A (participation is not limited in time) ☐ dd/mm/yyyy			
Contact details (primary authorized signatory):		Mr.⊠ Ms.□		
Last name: Meegan		Telephone 1:		
First name: Conor		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		