

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 | |
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| Title of the project / programme of activities | Cosmito landfill gas project (Improvement of Gas Extraction System in Old Cosmito Dump) |
| Project / programme of activities reference number: (if available) | 0097 |
| SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES | |
| Name of entity: Empresa de Tratamiento de Residuos Copiulemu S.A. | |
| Address: Calle B No 1170, Lomas de San Sebastian, Concepcion Region del Bio Bio Chile | |
| Party (country authorizing participation): Chile | |
| 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: Kother Feest | Telephone 1: |
| First name: Alfredo | Telephone 2 (optional): |
| Email: | Fax (optional): |
| Specimen signature: | Date (dd/mm/yyyy): |
| Name of entity: Tracerco S.A. | |
| Address: Rue Saint- Leger 8 (B.P. 24), 1211 Geneva 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: Poesen | Telephone 1: |
| First name: Marc | Telephone 2 (optional): |
| Email: | Fax (optional): |
| Specimen signature: | Date (dd/mm/yyyy): |