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	RSCL cogeneration expansion project
Project / programme of activities reference number: *(if available)*	0127

SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES	

Name of entity:
M/s Rajshree Sugars & Chemicals Ltd

Address:
338, Avanashi Road, "The Uffizi" Coimbatore, Tamil Nadu 641 004
India

Party (country authorizing participation):
India

End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):	Mr.☒ Ms.☐	
Last name: Varadaraj	Telephone 1:
First name: R.	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):

Name of entity:
Agrinergy Ltd.

Address:
Eagle Tower, Cheltenham, Montpellier Drive, GL50 1TA
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.☐	
Last name: Taylor	Telephone 1:
First name: Robert	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):

Name of entity:
Kommunalkredit Public Consulting GmbH

Address:
Turkenstrasse 9, Vienna A-1092
Austria

Party (country authorizing participation):
Austria

End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):	Mr.☐ Ms.☒	
Last name: Haberl	Telephone 1:
First name: Birgit	Telephone 2 (optional):

Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Diernhofer	Telephone 1:
First name: Wolfgang	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):