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	Guizhou Kaiyang Zijiang Hydropower Station Project
Project / programme of activities reference number: *(if available)*	2574

SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES		
Name of entity: Guizhou Kaiyang Xinglong Hydropower Co., Ltd.		
Address: C Building, A-zone of Zijiang garden at Kaiyang county of Guizhou province 550300 Guizhou province China		
Party (country authorizing participation): China		
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐
Last name: Jiang		Telephone 1:
First name: Dongcai		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Name of entity: International Finance Corporation as Trustee of the IFC-Netherlands Carbon Facility (INCaF)		
Address: 2121 Pennsylvania Avenue, NW, f 3K-300 20433 Washington DC United States of America		
Party (country authorizing participation): Netherlands		
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐
Last name: Widge		Telephone 1:
First name: Vikram		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Name of entity: The State of the Netherlands, ac ting through its Ministry of Housing, Spatial Planning and the Environment (VROM)		
Address: Rijnstraat 8 / P.O. Box 30945 2595 XP The Hague Netherlands		
Party (country authorizing participation): Netherlands		
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐

Last name: von Meijenfeldt	Telephone 1:
First name: Hugo	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):