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		City of Cape Town Landfill Gas Extraction and Utilisation Programme
Project / programme of activities reference number:		10004
(if available)		
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES		
Name of entity: City of Cape Town		
Address:		
P.O. Box 298 Western Cape		
8000 Cape Town		
South Africa		
Party (country authorizing participation): South Africa		
End-date of participation:	\square N/A (participation is not limited in time) \square dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. 🛛 Ms.
Last name: Coetzee		Telephone 1:
First name: Barry		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):		Mr. 🛛 Ms.
Last name: Keraan		Telephone 1:
First name: Rustim		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):