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	Cañada Honda 1, 2 and 3 Solar Photovoltaic power plants
Project / programme of activities reference number: *(if available)*	9357

SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES		
Name of entity: Energías Sustentables S.A.		
Address: Suipacha 782, Piso 7, Ciudad Autonoma de Buenos Aires Argentina		
Party (country authorizing participation): Argentina		
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐
Last name: Rodriguez		Telephone 1:
First name: Daniel		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):		Mr. ☒ Ms. ☐
Last name: Ocampo		Telephone 1:
First name: Francisco		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Name of entity: INESA Solar S.A.		
Address: Talcahuano 778 Piso 1, Ciudad Autonoma de Buenos Aires Argentina		
Party (country authorizing participation): Argentina		
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐
Last name: Rodriguez		Telephone 1:
First name: Daniel		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):		Mr. ☒ Ms. ☐
Last name: Ocampo		Telephone 1:
First name: Francisco		Telephone 2 (optional):
Email:		Fax (optional):

Specimen signature:	Date (dd/mm/yyyy):
Name of entity: Mercuria Energy Trading SA	
Address: 50 Rue du Rhone, 1204 Geneva Switzerland	
Party (country authorizing participation): Switzerland	
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Steels	Telephone 1:
First name: Jean Francois	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Fernandez de Mello e Souza	Telephone 1:
First name: Pablo	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):