

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	Methane Recovery Project of Lianyungang Jinchanglin Alcohol Co., Ltd.
Project / programme of activities reference number: (if available)	4032
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES	
Name of entity: Lianyungang Jinchanglin Alcohol Co. Ltd.	
Address: Guannan County Economic Development Zone B,Lianyungang City,Jiangsu Province,222500 China	
Party (country authorizing participation): China	
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: Sang	Telephone 1:
First name: Shengbin	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Name of entity: Energy Initiative Japan Inc.	
Address: Nozawa Bldg., 6th Floor, 9-8 Ichiban-cho,Chiyoda-ku,Tokyo 102-0082 Japan	
Party (country authorizing participation): Japan	
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: Kanamori	Telephone 1:
First name: Takehisa	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Nakamura	Telephone 1:
First name: Takehiro	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):