

# CDM-MOC-FORM Form: ANNEX 1

|                                                                                                                 |                                           |            |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------|
| <b>Date of submission</b>                                                                                       |                                           | 09/07/2012 |
| <b>Section 1: Project Details</b>                                                                               |                                           |            |
| <b>1. Title of the CDM project activity</b>                                                                     | Henan Biyang Zhongtian Wind Power Project |            |
| <b>2. Please state project ID Number if available</b>                                                           | 6015                                      |            |
| <b>Section 2: List of project participants</b>                                                                  |                                           |            |
| <b>Name of the entity:</b><br>China Resources New Energy (Biyang) Wind Power Co., Ltd.                          |                                           |            |
| <b>Party (country that authorised participation):</b><br>China                                                  |                                           |            |
| <b>Contact details (primary authorised signatory):</b>                                                          | Mr.                                       |            |
| Last name:<br>Lin                                                                                               | Telephone:                                |            |
| First name:<br>Weiping                                                                                          | Fax:                                      |            |
| Email:                                                                                                          | Address:                                  |            |
| Specimen signature:                                                                                             |                                           |            |
| <b>Contact details (alternate authorised signatory):</b>                                                        |                                           |            |
| Last name:                                                                                                      | Telephone:                                |            |
| First name:                                                                                                     | Fax:                                      |            |
| Email:                                                                                                          | Address:                                  |            |
| Specimen signature:                                                                                             |                                           |            |
| <b>Name of the entity:</b><br>Department of Climate Change, National Development and Reform Commission of China |                                           |            |
| <b>Party (country that authorised participation):</b><br>China                                                  |                                           |            |
| <b>Contact details (primary authorised signatory):</b>                                                          | Mr.                                       |            |
| Last name:<br>Sun                                                                                               | Telephone:                                |            |
| First name:<br>Cuihua                                                                                           | Fax:                                      |            |
| Email:                                                                                                          | Address:                                  |            |
| Specimen signature:                                                                                             |                                           |            |
| <b>Contact details (alternate authorised signatory):</b>                                                        |                                           |            |
| Last name:                                                                                                      | Telephone:                                |            |
| First name:                                                                                                     | Fax:                                      |            |
| Email:                                                                                                          | Address:                                  |            |
| Specimen signature:                                                                                             |                                           |            |