

**CDM-MOC-FORM Form: ANNEX 1**

|   |   |            |
|---|---|------------|
| <b>Date of submission</b>   |   | 15/03/2012 |
| <b>Section 1: Project Details</b>                                     |   |            |
| <b>1. Title of the CDM project activity</b>                           | Fujian Pucheng Taipingqiao Hydropower Project |            |
| <b>2. Please state project ID Number if available</b>                 | 3273  |            |
| <b>Section 2: List of project participants</b>                        |   |            |
| <b>Name of the entity:</b><br>Marubeni Corporation                    |   |            |
| <b>Party (country that authorised participation):</b><br>Japan        |   |            |
| <b>Contact details (primary authorised signatory):</b>                | Mr.   |            |
| Last name:<br>Minezaki  | Telephone:                                    |            |
| First name:<br>Naotaka  | Fax:  |            |
| Email:  | Address:                                      |            |
| Specimen signature:   |   |            |
| <b>Contact details (alternate authorised signatory):</b>              | Mr.   |            |
| Last name:<br>Mochizuki   | Telephone:                                    |            |
| First name:<br>Yoshihiro  | Fax:  |            |
| Email:  | Address:                                      |            |
| Specimen signature:   |   |            |
| <b>Name of the entity:</b><br>Fujian Tailong Electric Power Co., Ltd. |   |            |
| <b>Party (country that authorised participation):</b><br>China        |   |            |
| <b>Contact details (primary authorised signatory):</b>                | Ms.   |            |
| Last name:<br>Tang  | Telephone:                                    |            |
| First name:<br>Chong  | Fax:  |            |
| Email:  | Address:                                      |            |
| Specimen signature:   |   |            |
| <b>Contact details (alternate authorised signatory):</b>              | Mr.   |            |
| Last name:<br>Ye  | Telephone:                                    |            |
| First name:<br>Shuren   | Fax:  |            |
| Email:  | Address:                                      |            |
| Specimen signature:   |   |            |