## **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		Song Mien 5 Hydropower Project	
<b>Project</b> / <b>programme of activities reference number:</b> <i>(if available)</i>		6203	
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES			
Name of entity: Nordic Environment Finance Corpo	pration (NEFCO) in its ca	pacity as Fund Manager to the NEFCO Carbon Fund	
Address: Fabianinkatu 34 P. O. Box 249 FI 00171 Helsinki Finland			
<b>Party (country authorizing partic</b> Sweden	ipation):		
End-date of participation:	N/A (participation i	s not limited in time) 🔲 dd/mm/yyyy	
Contact details (primary authoriz	ed signatory):	Mr. 🛛 Ms.	
Last name: Sharma		Telephone 1:	
First name: Ash		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):		Mr. 🔲 Ms. 🛛	
Last name: Nyberg		Telephone 1:	
First name: Tina		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Name of entity: Song Mien 5 Hydro Power Joint Sto	ock Company		
Address: No. 479, Group 9, Nguyen Trai Wa Ha Giang Town, Viet Nam	rd,		
<b>Party (country authorizing partic</b> Viet Nam	ipation):		
End-date of participation:	N/A (participation i	s not limited in time) dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. 🛛 Ms. 🗆	
Last name: Chu Van		Telephone 1:	
First name: Ly		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature: Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):		Mr. 🛛 Ms.	
Last name: Do Van		Telephone 1:	

## **CDM-MOC-FORM**

		CDM-MOC-FORM
First name: Minh		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Name of entity: Energy and Environment Consu	Itancy Joint Stock Compa	any
Address: Floor 6, Lac Hong Building, All Le Van Luong Street, Hanoi Viet Nam	ey 85,	
<b>Party (country authorizing par</b> Viet Nam	rticipation):	
End-date of participation:	N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. 🔲 Ms. 🛛
Last name: Dang Thi Hong		Telephone 1:
First name: Hanh		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):		Mr. 🛛 Ms.
Last name: Tran		Telephone 1:
First name: Minh Tuyen		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		