

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	Small Hydro Power Plants in Braço do Norte River Bundled Project Activities (hereafter referred to simply as "SHPPs in Braço do Norte River")
Project / programme of activities reference number: (if available)	8336
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES	
Name of entity: Geradora de Energia Nova Fátima S.A.	
Address: Av. Felipe Schmidt, nº 1684 – Centro, Braço do Norte 88750-000 Santa Catarina Brazil	
Party (country authorizing participation): Brazil	
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Back	Telephone 1:
First name: Woimer	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Diegoli	Telephone 1:
First name: Edson	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Name of entity: Geradora de Energia São Maurício S.A.	
Address: Rod. Antônio Heil, no. 181 - Centro, Brusque 88350-000 Santa Catarina Brazil	
Party (country authorizing participation): Brazil	
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Diegoli	Telephone 1:
First name: Edson	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐

Last name: Back		Telephone 1:	
First name: Woimer		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Name of entity: Geradora de Energia Rio Fortuna S.A.			
Address: Rod. Antônio Heil, no. 181 - Centro, Brusque 88350-000 Santa Catarina Brazil			
Party (country authorizing participation): Brazil			
End-date of participation:		☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐	
Last name: Diegoli		Telephone 1:	
First name: Edson		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):		Mr. ☒ Ms. ☐	
Last name: Back		Telephone 1:	
First name: Woimer		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Name of entity: Ecopart Assessoria em Negócios Empresariais Ltda.			
Address: Rua Padre João Manoel 222 01411-000 São Paulo Brazil			
Party (country authorizing participation): Brazil			
End-date of participation:		☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☐ Ms. ☒	
Last name: Hirschheimer		Telephone 1:	
First name: Melissa		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):		Mr. ☒ Ms. ☐	
Last name: Mazaferro		Telephone 1:	
First name: Marco		Telephone 2 (optional):	
Email:		Fax (optional):	

Specimen signature:

Date (dd/mm/yyyy):