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	Tin Thanh Biomass Boiler Project No. 2
Project / programme of activities reference number: *(if available)*	7695

SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES		
Name of entity: RWE Power AG		
Address: Huyssenallee 2, 45128 Essen Germany		
Party (country authorizing participation): Germany		
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐
Last name: Kons		Telephone 1:
First name: Ludwig		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):		Mr. ☒ Ms. ☐
Last name: Aguilera Lagos		Telephone 1:
First name: Antonio		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Name of entity: Tin Thanh Industrial Electricity and Steam Company Limited		
Address: 474/1 Nguyen Tri Phuong, Ward 9, District 10, Ho Chi Minh Viet Nam		
Party (country authorizing participation): Viet Nam		
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☐ Ms. ☒
Last name: Le Thi Tuyet		Telephone 1:
First name: Trinh		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Name of entity: Investment and Trade Consultancy Company Limited (INTRACO Co., Ltd)		

Address: Unit 501, Thai Ha Building, No 18/11 Thai Ha Street, Dong Da District, Hanoi, Viet Nam	
Party (country authorizing participation): Viet Nam	
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Hoang	Telephone 1:
First name: Anh Dung	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):