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	Nam Tha 3 Hydropower Project
Project / programme of activities reference number: *(if available)*	6800

SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES

Name of entity:
Nordic Environment Finance Corporation NEFCO in its capacity as Fund Manager to the NEFCO Carbon Fund (NeCF)

Address:
Fabianinkatu 34, P.O. Box 249, Fl-00171,
Fl-00171, Helsinki
Finland

Party (country authorizing participation):
Sweden

End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy

Contact details (primary authorized 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:
Phuc Khanh Energy Development and Construction Investment Joint Stock Company

Address:
No.001, Nguyen Hue Street, Pho Moi ward, Lao Cai city, Lao Cai province
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 Van	Telephone 1:
First name: Tam	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):

Name of entity:
Energy and Environment Consultancy Joint Stock Company

Address: Floor 6, Lac Hong Building, Alley 85, Le Van Luong Street, Ha Noi 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: 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 Minh	Telephone 1:
First name: Tuyen	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):