## **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		DaKrong 2 Hydropower Project		
Project / programme of activities reference number: (if available)		8054		
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, FI-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 authoriz	zed 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: DaKrong Hydroelectric Joint Stock Company				
Address: DaKrong Commune, DaKrong District, Quang Tri Province, Viet Nam				
Party (country authorizing participation): Viet Nam				
End-date of participation:	■ N/A (participation	is not limited in time)		
Contact details (primary authorized signatory):		Mr. ⋈ Ms. □		
Last name: Do Thanh		Telephone 1:		
First name: Vinh		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Name of entity: Investment and Trade Consultancy Company Limited (INTRACO Co., Ltd.)				

## CDM-MOC-FORM

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 Anh		Telephone 1:	
First name: Dung		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:		Date (dd/mm/yyyy):	