

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: <i>(if available)</i>	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:	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
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. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>
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:	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
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.)	

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:	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Hoang Anh	Telephone 1:
First name: Dung	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):