

## 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	
<b>Title of the project / programme of activities</b>	Azito Energie, Phase 3 Expansion from Single Cycle to Combined Cycle
<b>Project / programme of activities reference number:</b> <i>(if available)</i>	8456
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES	
<b>Name of entity:</b> Azito Energie S.A	
<b>Address:</b> Immeuble Grand Siecle, Route du Lycee Technique Abidjan Vieux Cocody 01 B.P.1296 Abidjan Cidex Côte d'Ivoire	
<b>Party (country authorizing participation):</b> Côte d'Ivoire	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Aye	Telephone 1:
First name: Luc	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<b>Name of entity:</b> The Ministry of Energy	
<b>Address:</b> Abdjan Plateau Immeuble EEC1 2nd Floor 01 BP 2541 Abidjan 01 Côte d'Ivoire	
<b>Party (country authorizing participation):</b> Côte d'Ivoire	
<b>End-date of participation:</b>	<input checked="" type="checkbox"/> N/A (participation is not limited in time) <input type="checkbox"/> dd/mm/yyyy
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Cisse	Telephone 1:
First name: Sabati	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):