

## 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>  | Gansu Guazhou Ganhekou North 48MW Wind Farm Project  |
| <b>Project / programme of activities reference number:</b><br><i>(if available)</i>                | 7403   |
| SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES  |  |
| <b>Name of entity:</b><br>Department of Climate Change, National Development and Reform Commission |  |
| <b>Address:</b><br>38# Yuetan South Street,<br>Beijing<br>China                                    |  |
| <b>Party (country authorizing participation):</b><br>China   |  |
| <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 type="checkbox"/> Ms. <input checked="" type="checkbox"/>   |
| Last name: Sun   | Telephone 1:   |
| First name: Cuihua   | Telephone 2 (optional):  |
| Email:   | Fax (optional):  |
| Specimen signature:  | Date (dd/mm/yyyy):   |
| <b>Name of entity:</b><br>Gansu Xinquan Wind Power Co., Ltd.                                       |  |
| <b>Address:</b><br>No. 141 Yuanquan Street, Guazhou County, Gansu Province,<br>Jiuquan<br>China    |  |
| <b>Party (country authorizing participation):</b><br>China   |  |
| <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: Qi  | Telephone 1:   |
| First name: Wannian  | Telephone 2 (optional):  |
| Email:   | Fax (optional):  |
| Specimen signature:  | Date (dd/mm/yyyy):   |
| <b>Contact details (alternate authorized signatory):</b>   | Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>   |
| Last name: Lu  | Telephone 1:   |
| First name: Yaodong  | Telephone 2 (optional):  |
| Email:   | Fax (optional):  |
| Specimen signature:  | Date (dd/mm/yyyy):   |