

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 | Saldanha Small Hydroelectric Project |
| Project / programme of activities reference number: (if available) | 1526 |
| SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES | |
| Name of entity: Hidroluz Centrais Elétricas Ltda. | |
| Address: Setor Rio Branco, Linha 140 com Linha 50, Lote 85, Alta Floresta, Rondonia 78994-000 Brazil | |
| Party (country authorizing participation): Brazil | |
| 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: De Oliveira Lopes | Telephone 1: |
| First name: Eroná | Telephone 2 (optional): |
| Email: | Fax (optional): |
| Specimen signature: | Date (dd/mm/yyyy): |
| Name of entity: EcoSecurities Group PLC. | |
| Address: 40 Dawson Street, Dublin 02 Ireland | |
| Party (country authorizing participation): Netherlands | |
| 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: Wobbe | Telephone 1: |
| First name: Robin | Telephone 2 (optional): |
| Email: | Fax (optional): |
| Specimen signature: | Date (dd/mm/yyyy): |