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	Low Pressure Gas Recovery Project of Shandong Weifang Hongrun Petrochemical Auxiliary Co., Ltd., China
Project / programme of activities reference number: *(if available)*	3775

SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES		
Name of entity: Weifang Hongrun Petrochemical Auxiliary Co., Ltd.		
Address: Middle section of Fushou Eastern Street of High and New Technology Industrial Development Zone, Weifang City, Shandong Province 262513 China		
Party (country authorizing participation): China		
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐
Last name: Wen		Telephone 1:
First name: Xueyuan		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):		Mr. ☒ Ms. ☐
Last name: Yan		Telephone 1:
First name: Guangqi		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Name of entity: Electric Power Development Co., Ltd		
Address: 15-1,Ginza 6-Chome, Chuo-ku, Tokyo 104-8165 Japan		
Party (country authorizing participation): Japan		
End-date of participation:	☒ N/A (participation is not limited in time) ☐ dd/mm/yyyy	
Contact details (primary authorized signatory):		Mr. ☒ Ms. ☐
Last name: Tsukada		Telephone 1:
First name: Natsuki		Telephone 2 (optional):
Email:		Fax (optional):
Specimen signature:		Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):		Mr. ☒ Ms. ☐
Last name: Mitsuyama		Telephone 1:
First name: Fumiaki		Telephone 2 (optional):

Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):