

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	Ia H'Rung and Chu Prong Hydropower Project
Project / programme of activities reference number: (if available)	7069
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES	
Name of entity: ENECO Energy Trade B.V.	
Address: Rivium Quadrant 75, 2909 LC Capelle aan den IJssel Netherlands	
Party (country authorizing participation): United Kingdom of Great Britain and Northern Ireland	
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 Boer	Telephone 1:
First name: Robert	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Meyrick	Telephone 1:
First name: Mark	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Name of entity: Phan Vu Power Construction Investment Joint Stock Company	
Address: Khop Village, Ia Grang Commune, Ia Grai District, Gia Lai 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: Nguyen	Telephone 1:
First name: Xuan Van	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 1303, HITTC Building, 185 Giang Vo 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	Telephone 1:
First name: Anh Dung	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):