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		CDM Sustainable Energy Programme		
Project / programme of activities reference number: (if available)		10124		
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES				
Name of entity: The SEM Fund				
Address: Liberte 6, Extension Nord, VDN, N BP 38418 Dakar Senegal	To 31			
Party (country authorizing participation): Senegal				
End-date of participation:	☑ N/A (participation i	s not limited in time)		
Contact details (primary authoriz	zed signatory):	Mr. ⊠ Ms.□		
Last name: Bell		Telephone 1:		
First name: Samuel		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Contact details (alternate authorized signatory):		Mr. ⊠ Ms.□		
Last name: Fay		Telephone 1:		
First name: John		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Name of entity:				
Stiftung "Zukunft des Kohlenstoffmarktes"				
Address:				
c/o KfW, LGc3, Palmengartenstrasse 5-9 60325 Frankfurt am Main				
Germany				
Party (country authorizing participation): Germany				
End-date of participation:	☑ N/A (participation i	s not limited in time)		
Contact details (primary authorized signatory):		Mr. ☐ Ms.⊠		
Last name: Ahlberg		Telephone 1:		
First name: Malin		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature: Date (dd/mm/yyyy):				
Contact details (alternate authorized signatory):		Mr. ⋈ Ms.□		
Last name: Forth		Telephone 1:		
First name: Thomas		Telephone 2 (optional):		

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Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Name of entity:				
Shared Value Africa Limited				
Address: Post net 800, Private Bag E891,				
Mandahill				
10101 Lusaka				
Zambia				
Party (country authorizing participation): Zambia				
End-date of participation:	■ N/A (participation)	is not limited in time) dd/mm/yyyy		
Contact details (primary authorize	zed signatory):	Mr. ⋈ Ms. □		
Last name: Fay		Telephone 1:		
First name: John		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Name of entity:				
Vitalite Zambia Limited				
Address:				
25 Joseph Mwilwa Rd, Rhodespark				
10101 Lusaka				
Zambia				
Party (country authorizing participation): Norway				
End-date of participation:	N/A (participation	is not limited in time) dd/mm/yyyy		
Contact details (primary authorize	zed signatory):	Mr. ⋈ Ms.□		
Last name: Bell		Telephone 1:		
First name: Samuel		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Contact details (alternate authorized signatory):		Mr. ⋈ Ms.□		
Last name: Roine		Telephone 1:		
First name: Kjetil		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		