

## 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>	3.75 MW Bundled Wind Power Project in Maharashtra
<b>Project / programme of activities reference number:</b> (if available)	3516
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES	
<b>Name of entity:</b> M/s Advik Hi-tech Pvt. Ltd	
<b>Address:</b> Chakan- Talegaon Road, Gat No. 357/Plot No. 99, Part A, Village-Kharabwasi, Chakan, 410501 Pune , Maharashtra India	
<b>Party (country authorizing participation):</b> India	
<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: Bhartia	Telephone 1:
First name: Aditya	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
<b>Name of entity:</b> M/s Aurangabad Electricals Ltd.	
<b>Address:</b> Gut No. 65 Village-Chitegaon, Taluka- Paithan District Aurangabad 431 105 Maharashtra India	
<b>Party (country authorizing participation):</b> India	
<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: Agrawal	Telephone 1:
First name: P.C.	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):