

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	Avoidance of methane emission from the wastewater treatment facility in K.S. Bio-Plus Co., Ltd., Thailand
Project / programme of activities reference number: <i>(if available)</i>	7788
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES	
Name of entity: K.S. Bio-Plus Co., Ltd.	
Address: 115, Preedaview Bldg., Soi Chokechai, Rama 3 Rd., 10120 Yanava Thailand	
Party (country authorizing participation): Thailand	
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: Skulchokchai	Telephone 1:
First name: Direk	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: Nuntiruj	Telephone 1:
First name: Thaweewat	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Name of entity: Danish Ministry of Climate and Energy, Danish Energy Agency	
Address: 44, Amaliegade, DK-1256 Copenhagen Denmark	
Party (country authorizing participation): Denmark	
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: Pedersen	Telephone 1:
First name: Bo Riisgaard	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):