

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 | |
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| Title of the project / programme of activities | Wind and solar PoA in South Africa |
| Project / programme of activities reference number: (if available) | 7467 |
| SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES | |
| Name of entity: CDC Climat Asset Management | |
| Address: 47, rue de la Victoire, 75009 Paris France | |
| Party (country authorizing participation): France | |
| 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: Schmidt-Traub | Telephone 1: |
| First name: Guido | Telephone 2 (optional): |
| Email: | Fax (optional): |
| Specimen signature: | Date (dd/mm/yyyy): |
| Contact details (alternate authorized signatory): | Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> |
| Last name: Paris | Telephone 1: |
| First name: Marianne | Telephone 2 (optional): |
| Email: | Fax (optional): |
| Specimen signature: | Date (dd/mm/yyyy): |
| Name of entity: CDC Climat | |
| Address: 47, rue de la Victoire, 75009 Paris France | |
| Party (country authorizing participation): France | |
| 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: Schmidt-Traub | Telephone 1: |
| First name: Guido | Telephone 2 (optional): |
| Email: | Fax (optional): |
| Specimen signature: | Date (dd/mm/yyyy): |
| Contact details (alternate authorized signatory): | Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/> |
| Last name: Paris | Telephone 1: |
| First name: Marianne | Telephone 2 (optional): |
| Email: | Fax (optional): |

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|---|--|--|--|
| Specimen signature: | | Date (dd/mm/yyyy): | |
| Name of entity: Inca Energy (Pty) Limited | | | |
| Address: 1, Melrose Boulevard, Melrose Arch. Unit 1, Ground Floor, Johannesburg, Gauteng 2193 South Africa | | | |
| Party (country authorizing participation): South Africa | | | |
| 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: Garrivier | | Telephone 1: | |
| First name: Benoit | | Telephone 2 (optional): | |
| Email: | | Fax (optional): | |
| Specimen signature: | | Date (dd/mm/yyyy): | |