

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	India-FaL-G Brick and Blocks Project No.3
Project / programme of activities reference number: (if available)	4831
SECTION 2: LIST OF PROJECT PARTICIPANT ENTITY/IES	
Name of entity: M/s Eco Carbon Pvt.Ltd.	
Address: 1 Floor, 32-10-55, Shri Venkateswara Colony, Sheila Nagar, INSWAREB Laboratory Building AP 530012 Vishakhapatnam India	
Party (country authorizing participation): India	
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: Kalidas	Telephone 1:
First name: Nateri	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: Bhanumathidas	Telephone 1:
First name: Nateri	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Name of entity: International Bank for Reconstruction and Development as Trustee of the Community Development Carbon Fund (CDCF)	
Address: The World Bank, 1818 H Street 20433 NW Washington DC United States of America	
Party (country authorizing participation): Italy	
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: Chassard	Telephone 1:
First name: Joelle	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Name of entity: International Bank for Reconstruction and Development as Trustee of the Community Development Carbon Fund (CDCF)	

Address: The World Bank, 1818 H Street 20433 NW Washington DC United States of America	
Party (country authorizing participation): Netherlands	
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: Chassard	Telephone 1:
First name: Joelle	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Name of entity: The State of the Netherlands acting through the Netherlands' Ministry of Infrastructure and the Environment (IenM)	
Address: Rijnstraat 8 2515 XP The Hague Netherlands	
Party (country authorizing participation): Netherlands	
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 type="checkbox"/> Ms. <input checked="" type="checkbox"/>
Last name: Gerards	Telephone 1:
First name: Marisa	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Name of entity: Government of Italy acting through the Ministry for the Environment, Land and Sea	
Address: Via Cristoforo Colombo 44 00147 Rome Italy	
Party (country authorizing participation): Italy	
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: Clini	Telephone 1:
First name: Corrado	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):