



**ANNUAL REPORT ON SCHEDULE 1 CHEMICALS –
ANTICIPATED ACTIVITIES AT THE FACILITY FOR THE COMING YEAR (FORM S1-3)**

Part A : Details of the facility (Note 1)

1. Facility name : CDE CHEMICAL LTD.	4. Year of activities anticipated in this form (i.e. the "reporting year", must be a calendar year) : 2005
2. Name of the owner, company or enterprise operating the above facility : CDE CHEMICAL LTD. (Please mark 'X' in one of the following and provide details:) <input type="checkbox"/> HKID no. <input type="checkbox"/> Passport no. <input checked="" type="checkbox"/> BR no. : 00800888-000 <input type="checkbox"/> other relevant registration no. (please specify) :	5. Facility address : 10/F, FORTRESS TOWER, 250 KING'S ROAD, NORTH POINT, HONG KONG. Tel no. : 2000 0000 Fax no. : 2111 1111
3. Permit number : P00099	

Part B : Details of each Schedule 1 chemical anticipated to be produced in the facility (Please use a new Form S1-3 for each chemical)

1. IUPAC chemical name (Note 3) : METHYLPHOSPHONIC DIFLUORIDE	3. Structural formula :
2. CAS registry no. (Note 4) : 676-99-3	
4. Anticipated production (Note 5) quantity : _____ 200 _____ grams	6. Purpose(s) to produce the above chemical (please mark 'X' if applicable) : <input checked="" type="checkbox"/> Research <input type="checkbox"/> Medical <input type="checkbox"/> Pharmaceutical <input type="checkbox"/> Production of other Schedule 1 chemicals <input type="checkbox"/> Waste disposal <input type="checkbox"/> Protective uses <input type="checkbox"/> Other (please specify) :
5. Anticipated period of production (please provide dates in dd/mm/yy) : Start date : _____ 25/01/2005 _____ End date : _____ 10/03/2005 _____	
7. Anticipated change at the facility and its relevant plant during the reporting year compared to previously submitted technical descriptions of the facility on Form S1: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (please mark 'X') If yes, please submit Form S1 to provide updated information on the technical description of the facility.	

Part C : Total number of Form S1-3 submitted (including this page) : _____ **2 _____ pages**
(Please submit Form S1 for Part B.7 if applicable. Also see Guideline 8)

Part D : Undertaking by the permit holder

I, the undersigned, hereby declare to the best of my knowledge and belief, that all information provided in this form and in any additional pages attached to this form is true and correct. I also declare that, in submitting this form, I fully understand that Trade and Industry Department reserves at all times the right to release the above information and any information relates to this report, including particulars of the undersigned, to third parties for purposes stated in Section 28(2) of the Chemical Weapons (Convention) Ordinance (Cap. 578).

Name of the permit holder of the facility : **CHEUNG DAI DAI**

Signature of the permit holder and company chop :

CHEUNG DAI DAI

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*For and on behalf of*  
*CDE Chemical Ltd.*  
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Date : **7 JULY 2004**

For official use only

Date of receipt :

Remarks :