



Modalities of Communication Statement (Version 03.0)

Date of submission:	08/07/2013		
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS			
Title of the project/programme of activities:	Suoi Choang Hydro Power Project		
Project/programme of activities reference number: (if available)	8902		
SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES			
Notes: • Sole Focal Point authority - An authorized signatory of <u>ONLY the entity listed below is required</u> to sign for communication related to the corresponding scope of authority. • Shared Focal Point authority - An authorized signatory <u>ANY of the entities listed below is required</u> to sign for communication related to the corresponding scope of authority. • Joint Focal Point authority - Authorized signatories of <u>ALL entities listed below are required</u> to sign for communication related to the corresponding scope of authority.			
Name of entity: PERENIA PTY LTD			
Address: PO Box 627 NSW 2059 North Sydney Australia			
This entity is nominated as a focal point with the authority to:	Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding of CER	X		
(b) Communicate in relation to requests for addition and/or voluntary withdrawal of project participants and focal points, as well as changes to company names, legal status, contact details and specimen signatures			X
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above			X
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐		
Last name: Wiener	Telephone 1:		
First name: Michael	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐		
Last name: Andrew	Telephone 1:		
First name: Jauncey	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
Is this entity changing its name?	No		
Former entity name, if applicable:			
Is this entity also a project participant?	Yes		
If the entity is also a project participant, do the same signatories represent it in its project participant role?	Yes		
Name of entity: MECO ELECTRICITY DEVELOPMENT AND INVESTMENT JOINT STOCK COMPANY			

Address: Alley 102 Truong Chinh street, Phuong Mai ward, Dong Da district Hanoi Viet Nam			
This entity is nominated as a focal point with the authority to:	Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding of CER			
(b) Communicate in relation to requests for addition and/or voluntary withdrawal of project participants and focal points, as well as changes to company names, legal status, contact details and specimen signatures			X
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above			X
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐		
Last name: Nguyen	Telephone 1:		
First name: Binh Duong	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐		
Last name: Nguyen	Telephone 1:		
First name: Thai Nguyen	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):	
Is this entity changing its name?	No		
Former entity name, if applicable:			
Is this entity also a project participant?	Yes		
If the entity is also a project participant, do the same signatories represent it in its project participant role?	Yes		
Name of entity: EVN FINANCE JOINT STOCK COMPANY			
Address: Level 6-7, No. 434 Tran Khat Chan Street, Pho Hue Ward, Hai Ba Trung District Hanoi Viet Nam			
This entity is nominated as a focal point with the authority to:	Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding of CER			
(b) Communicate in relation to requests for addition and/or voluntary withdrawal of project participants and focal points, as well as changes to company names, legal status, contact details and specimen signatures			X
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above			X
Contact details (primary authorized signatory):	Mr. ☐ Ms. ☒		
Last name: Cao	Telephone 1:		
First name: Thi Thu Ha	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):	

Contact details (alternate authorized signatory):	Mr. ☐ Ms. ☒
Last name: Dang	Telephone 1:
First name: Thu Hai	Telephone 2 (optional):
Email:	Fax (optional):
Specimen signature:	Date (dd/mm/yyyy):
Is this entity changing its name?	No
Former entity name, if applicable:	
Is this entity also a project participant?	Yes
If the entity is also a project participant, do the same signatories represent it in its project participant role?	Yes