Modalities of Communication Statement
(Version 03.0)

Date of submission:	14/03/2013

SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS

Title of the project/programme of activities:	Lushui County Lamenga 2nd level hydro power project
Project/programme of activities reference number: *(if available)*	7604

SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES

Notes:

- **Sole Focal Point authority** - An authorized signatory of ONLY the entity listed below is required to sign for communication related to the corresponding scope of authority.
- **Shared Focal Point authority** - An authorized signatory ANY of the entities listed below is required to sign for communication related to the corresponding scope of authority.
- **Joint Focal Point authority** - Authorized signatories of ALL entities listed below are required to sign for communication related to the corresponding scope of authority.

Name of entity:
Nujiang Zaifeng Hydropower Development Co., Ltd.

Address:
Bayi Road, Liuku Town, Lushui County, Nujiang Autonomous Prefecture, Yunnan Province, China

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: Chen	Telephone 1:
First name: Wentao	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:
Arcadia Energy (Suisse) S.A.

Address:
Route de Longeraie 7,
Morges
Switzerland

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: Rittner	Telephone 1:
First name: Frank	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:
Q.C.A. AG

Address:
Tellenstr. 34,
CH-6056 Kaegiswil
Switzerland

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: Rittner	Telephone 1:
First name: Frank	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**