

Modalities of Communication Statement (Version 03.0)

Date of submission:		15/07/20				
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS						
Title of the project/programme of activities:	Distribution of Improved cook	stove - Pl	nase IV			
Project/programme of activities reference number: (if available)	8687					
SECTION 2: NOMINATION O	F 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:						
Vitol S.A. Address: D'Arve 28, CH 1205, Boulevard du Pont, Geneva 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: Fransen	Telephone 1:					
First name: David	Telephone 2 (optional):					
Email:	Fax (optional):					
Specimen signature:	Date (dd/mm/yyyy):					
Contact details (alternate authorized signatory):	Mr. ⋈ Ms. □					
Last name: Doucakis	Telephone 1:					
First name: Nikolas	Telephone 2 (optional):					
Email:	Fax (optional):					
Specimen signature: Date (dd/mm/yyyy):						
Is this entity changing its name?	No					
Former entity name, if applicable:	<u> </u>					
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: M/s G K Energy Marketers Pvt Ltd						

Address: Flat No. 350, Building No. 25, Ground Floor, Lokmanya Nagar, LBS Road, Pune, Maharashstra 411030 India					
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: Kabra	Telephone 1:				
First name: Gopal	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				