

Modalities of Communication Statement (Version 03.0)

Date of submission:		09/02/20					
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS							
Title of the project/programme of activities:	Exploitation of the biogas from Controlled Landfill in Solid Waste Management Central – CTRS / BR.040						
Project/programme of activities reference number: <i>(if available)</i>	3464						
SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES							
 Notes: <u>Sole</u> 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. <u>Shared</u> 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. <u>Joint</u> 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: First Climate (Switzerland) AG							
Address: Brandschenkestrasse 51 8002 Zurich 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				Х			
(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							
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above							
Contact details (primary authorized signatory):	Mr. 🛛 Ms. 🗖	1					
Last name: Urs	Telephone 1:						
First name: Brodmann	Telephone 2 (optional):						
Email:	Fax (optional):						
Specimen signature: Date (dd/mm/yyyy):							
Contact details (alternate authorized signatory):	Mr. 🛛 Ms.						
Last name: Yves	Telephone 1:						
First name: Keller	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						

CDM-MOC-FORM

Name of entity: Asja Brasil Serviços para o Meio Ambiente Ltda.				
Address: Avenida Getúlio Vargas n456, 10th floor, Funcionários 30112020 Belo Horizonte Brazil 30112020 Belo Horizonte Brazil				
This entity is nominated as a focal point with the authority to:			Shared	Joint
(a) Communicate in relation to requests for forwarding of CER				Х
(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: Abade	Telephone 1:			
First name: Eduardo	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:	Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):	Mr. 🛛 Ms.			
Last name: Goncalves	Telephone 1:			
First name: Henrique	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			