

## **Modalities of Communication Form**

This form is to be used by project participants in order to submit the statement of Modalities of Communication.							
Date of submission		21/05/2012					
Section 1: Project Details							
1. Title of the CDM project activity	Fujian Pingnan Lidaping 20MW Hydropower Expansion Project						
2. Please state project ID Number if available	4080						
Section 2: Nomination of Focal Point							
3. Details of the entity/ies nominated as focal point							
<ul> <li>Notes:</li> <li>Sole Focal Point authority - A signature of an authorized signatory of <u>ONLY the entity listed below is required</u> for communication related to the corresponding scope of authority.</li> <li><u>Shared Focal Point authority</u> - A signature of an authorized signatory of <u>ANY of the entities listed below is required</u> for communication related to the corresponding scope of authority.</li> <li><u>Joint Focal Point authority</u> - A signature of an authorized signatory of <u>ALL entities listed below are required</u> for communication related to the corresponding scope of authority.</li> </ul>							
Name of the entity: Pingnan County Hengli Hydropower Co.,Ltd.							
This entity is nominated as focal point for:		Sole	Shared	Joint			
(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs							
(b) Authority to request the addition of project participants and/or to communicate any voluntary withdrawal and to update contact details of project participant (includes changes in company's name and legal status, addresses etc.				X			
(c) Communication with the secretariat and CDM EB on matters related to registration and/or issuance. Select this scope if the entity is to be copied on all communication related to the projectImage: Communication communi							
Contact details (primary authorized signatory):	Mr.						
Last name: Liu	Telephone:						
First name: Donghua	Fax:						
Email:	Address:						
Specimen signature:							
Contact details (alternate authorized signatory):	Mr.						
Last name: You	Telephone:						
First name: Langfei	Fax:						
Email:	Address:						
Specimen signature:							

Name of the entity: EDF Trading Limited						
This entity is nominated as focal point for:		Sole	Shared	Joint		
(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs		X				
(b) Authority to request the addition of project participants and/or to communicate any voluntary withdrawal and to update contact details of project participant (includes changes in company's name and legal status, addresses etc.				X		
(c) Communication with the secretariat and CDM EB on matters related to registration and/or issuance. Select this scope if the entity is to be copied on all communication related to the project		X				
Contact details (primary authorized signatory):	Mr.	_	11			
Last name: Joubert	Telephone:					
First name: Francois	Fax:					
Email:	Address:					
Specimen signature:						
Contact details (alternate authorized signatory):						
Last name:	Telephone:					
First name:	Fax:					
Email:	Address:					
Specimen signature:						