

Modalities of Communication Statement (Version 03.0)

Date of submission:		24/08/2018		
SECTION 1: CDM PROJECT/PROG	RAMME OF ACTIVITIES	DETAI	LS	
Title of the project/programme of activities:	Improved cookstove program in Bangladesh supported by the Republic of Korea			
Project/programme of activities reference number: <i>(if available)</i>	10431			
SECTION 2: NOMINATION O	F FOCAL POINT ENTITY	/IES		
Notes: • Sole Focal Point authority - An authorized signatory of communication related to the corresponding scope of authori • Shared Focal Point authority - An authorized signatories of communication related to the corresponding scope of authori • Joint Focal Point authority - Authorized signatories of communication related to the corresponding scope of authori	ty. ry <u>ANY of the entities listed bel</u> ty. of <u>ALL entities listed below are r</u>	ow is requ	<u>iired</u> to sig	
Name of entity: Ecoeye Co., Ltd				
Address: 1503, Hyundai Knowledge Industrial Center B 70 Dusan-ro Geumcheon-gu Seoul Republic of Korea				
This entity is nominated as a focal point with the authorit	ty to:	Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding o	f CER			X
(b) Communicate in relation to requests for addition and project participants and focal points, as well as changes to status, contact details and specimen signatures	•			X
(c) Communicate on all other project or programme relat (a) or (b) above	ted matters not covered by			X
Contact details (primary authorized signatory):	Mr. 🛛 Ms.	1		
Last name: Ha	Telephone 1:			
First name: Sangsun	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:	Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):	Mr. 🗙 Ms.			
Last name: Rhee	Telephone 1:			
First name: Soo Bok	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?	No			
If the entity is also a project participant, do the same				
signatories represent it in its project participant role?				

CDM-MOC-FORM

Name of entity: Bangladesh Bondhu Foundation				
Address: House# 8/12 (1st Floor), Block # B Lalmatia 1207 Dhaka Bangladesh				
This entity is nominated as a focal point with the authorit	y to:	Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding o	f CER			X
(b) Communicate in relation to requests for addition and project participants and focal points, as well as changes to status, contact details and specimen signatures	o company names, legal			X
(c) Communicate on all other project or programme relat (a) or (b) above	ted matters not covered by			X
Contact details (primary authorized signatory):	Mr. 🛛 Ms.			
Last name: Khalequzzaman	Telephone 1:			
First name: Md	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:	Date (dd/mm/yyyy):			
	1			
Contact details (alternate authorized signatory):	Mr. 🗖 Ms. 🛛			
Last name: Hajong	Telephone 1:			
First name: Suchitra	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: Korea Midland Power Co., LTD				
Address: 160 Boryeongbuk-re Chungcheongnam-do 33439 Boryeong-Si Republic of Korea				
This entity is nominated as a focal point with the authorit	y to:	Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding o	f CER			X
(b) Communicate in relation to requests for addition and project participants and focal points, as well as changes to status, contact details and specimen signatures				X
(c) Communicate on all other project or programme relat (a) or (b) above	ted matters not covered by			X
Contact details (primary authorized signatory):	Mr. 🛛 Ms.			
Last name: Ko	Telephone 1:			
First name: Dong Sun	Telephone 2 (optional):			
Email:	Fax (optional):			

CDM-MOC-FORM

Specimen signature:	Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):	Mr. 🛛 Ms.			
Last name: Park	Telephone 1:			
First name: Chang Min	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:	Date (dd/mm/yyyy):			
Speemen of Statute.				
Is this entity changing its name?	No			
Former entity name, if applicable:				
Is this entity also a project participant?	No			
If the entity is also a project participant, do the same				
signatories represent it in its project participant role?				
Name of entity: SK Securities Co., LTD				
Address: 31, Gukjegeumyung-ro 8-gil Yeongdeungpo-gu 07332 Seoul Republic of Korea				
This entity is nominated as a focal point with the authorit	y to:	Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding o	f CER			X
(b) Communicate in relation to requests for addition and/ project participants and focal points, as well as changes to status, contact details and specimen signatures				X
(c) Communicate on all other project or programme relat (a) or (b) above	red matters not covered by			X
Contact details (primary authorized signatory):	Mr. 🗖 Ms. 🛛		11	
Last name: Cha	Telephone 1:			
First name: Seung Youn	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?	No			
If the entity is also a project participant, do the same signatories represent it in its project participant role?				
Name of entity: SK Securities Investment Asia Limited				
Address: Room 1202, 121F, International Commerce Centre, 1 Austin Road West Kowloon Hong Kong Hong Kong				
This entity is nominated as a focal point with the authorit	y to:	Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding o	f CER			X

CDM-MOC-FORM

(b) Communicate in relation to requests for addition project participants and focal points, as well as chang status, contact details and specimen signatures		X
(c) Communicate on all other project or programme (a) or (b) above	related matters not covered by	X
Contact details (primary authorized signatory):	Mr. 🛛 Ms. 🗖	
Last name: Youn	Telephone 1:	
First name: Hyun Sung	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?	No	
If the entity is also a project participant, do the same signatories represent it in its project participant role?		