

## **Modalities of Communication Form**

This form is to be used by project participants in order to sub	mit the statement of Modalities o	of Commu	nication.		
Date of submission		27/01/20	10		
Section 1: Project Details					
1. Title of the CDM project activity	Celtins and Cemat grid connection of isolated systems				
2. Please state project ID Number if available	1067				
Section 2: Nomination of Focal Point					
3. Details of the entity/ies nominated as focal point					
Notes:  • Sole Focal Point authority - A signature of an authorize communication related to the corresponding scope of authorite • Shared Focal Point authority - A signature of an authorized for communication related to the corresponding scope • Joint Focal Point authority - A signature of an authorized for communication related to the corresponding scope of authorized for the entity:	ty.  orized signatory of <u>ANY of the e</u> oe of authority.  Ized signatory of <u>ALL entities lis</u>	entities list	ed below	<u>is</u>	
Companhia de Energia Elétrica do Estado do Tocantins - CE	LTINS				
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.				
Last name: Sorge	Telephone:				
First name: José Antônio	Fax:				
Email:	Address:				
Specimen signature:					
Contact details (alternate authorized signatory):					
Last name:	Telephone:				
First name:	Fax:				
Email:	Address:				
Specimen signature:					

Name of the entity: Centrais Elétricas Mato-Grossenses S.A CEMAT				
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
				X
(c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the enticommunication related to the project				X
Contact details (primary authorized signatory):	Mr.			
Last name: Sorge	Telephone:			
First name: José Antônio	Fax:			
Email:	Address:			
Specimen signature:				
Contact details (alternate authorized signatory):				
Last name:	Telephone:	Telephone:		
First name:	Fax:			
Email:	Address:			
Name of the entity: Ecopart Assessoria em Negócios Empresariais Ltda.				
· ·		Sole	Shared	Joint
Ecopart Assessoria em Negócios Empresariais Ltda.	ate with the CDM EB on	Sole	Shared	Joint X
Ecopart Assessoria em Negócios Empresariais Ltda.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica	ants and/or to communicate of project participant	Sole	Shared	
Ecopart Assessoria em Negócios Empresariais Ltda.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details	ants and/or to communicate of project participant addresses etc. n matters related to	Sole	Shared	X
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Ecopart Assessoria em Negócios Empresariais Ltda.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the enticommunication related to the project	ants and/or to communicate of project participant addresses etc. n matters related to ty is to be copied on all	Sole	Shared	X
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Ecopart Assessoria em Negócios Empresariais Ltda.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the enticommunication related to the project  Contact details (primary authorized signatory):  Last name: Hirschheimer  First name: Melissa	ants and/or to communicate of project participant addresses etc.  n matters related to ty is to be copied on all  Ms.  Telephone: Fax:	Sole	Shared	X
Ecopart Assessoria em Negócios Empresariais Ltda.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the enticommunication related to the project  Contact details (primary authorized signatory):  Last name: Hirschheimer  First name: Melissa  Email:	ants and/or to communicate of project participant addresses etc.  n matters related to ty is to be copied on all  Ms.  Telephone: Fax:	Sole	Shared	X
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