



Modalities of Communication Statement (Version 03.0)

Date of submission:	09/11/2023												
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS													
Title of the project/programme of activities:	Methane capture project												
Project/programme of activities reference number: (if available)	10660												
SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES													
<p>Notes:</p> <ul style="list-style-type: none"> · Sole 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. · Shared 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. · Joint 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: PT. Parna Agromas													
Address: Pacific Century Place Building, 33th Floor, JL. Jenderal Sudirman Kaveling 52 – 53, Kebayoran Baru 12190 Jakarta Selatan Indonesia													
This entity is nominated as a focal point with the authority to:	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Sole</th> <th style="width: 15%;">Shared</th> <th style="width: 15%;">Joint</th> </tr> </thead> <tbody> <tr> <td>(a) Communicate in relation to requests for forwarding of CER</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> <tr> <td>(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</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> <tr> <td>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> </tbody> </table>	Sole	Shared	Joint	(a) Communicate in relation to requests for forwarding of CER	X	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	X	(c) Communicate on all other project or programme related matters not covered by (a) or (b) above	X	X
Sole	Shared	Joint											
(a) Communicate in relation to requests for forwarding of CER	X	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	X											
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above	X	X											
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>												
Last name: Lee	Telephone 1:												
First name: Jeonghwan	Telephone 2 (optional):												
Email:	Fax (optional):												
Specimen signature:	Date (dd/mm/yyyy):												
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>												
Last name: Park	Telephone 1:												
First name: Woosung	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: LX International Corp.													

Address: 58, Saemunan-ro, Jongno-gu 03184 Seoul Republic of Korea			
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. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Kim	Telephone 1:		
First name: Keejae	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):	
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Lee	Telephone 1:		
First name: Jeonghwan	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):	
Is this entity changing its name?	No		
Former entity name, if applicable: LG International Corp.			
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: PT. GREEN GLOBAL LESTARI			
Address: Pacific Century Place, 33th Floor, Jl. Jend. Sudirman Kav. 52-53, SCBD Lot. 10 Senayan, Kebayoran Baru 12190 Jakarta Selatan Indonesia			
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. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Lee	Telephone 1:		
First name: Jeonghwan	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):	

Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Park	Telephone 1:
First name: Woosung	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?	