

## Modalities of Communication Statement (Version 03.0)

Date of submission:		11/11/2021				
	DN 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS					
Title of the project/programme of activities:	Biomass based power project by Harinagar Sugar Mills Ltd					
<b>Project/programme of activities reference number:</b> <i>(if available)</i>	6315					
SECTION 2: NOMINATION O	F FOCAL POINT ENTITY	/IES				
<ul> <li>Notes:         <ul> <li><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.</li> <li><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.</li> <li><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.</li> </ul> </li> </ul>						
Name of entity: INFINITE SOLUTIONS						
Address: 214 - 215 MILINDA MANOR OPP. NEXT TREASURE ISLAND MALL, 2 RNT MARG, INDORE 452001 INDORE India						
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			
<ul> <li>(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</li> <li>(c) Communicate on all other project or programme related matters not covered by</li> </ul>						
(a) or (b) above	······································					
Contact details (primary authorized signatory):	Mr. 🛛 Ms.					
Last name: Singhvi	Telephone 1:					
First name: Sumeet	Telephone 2 (optional):					
Email:	Fax (optional):					
Specimen signature: Date (dd/mm/yyyy):						
Contact details (alternate authorized signatory):	Mr. 🛛 Ms. 🗖					
Last name: SAH	Telephone 1:					
First name: JIMMY	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: Harinagar Sugar Mills Ltd				
Address: 10th Floor, World Trade Centre 400005 Mumbai India 400005 MUMBAI India				
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. 🛛 Ms.			
Last name: Pittie	Telephone 1:			
First name: Vedang	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			