

Modalities of Communication Statement (Version 03.0)

Date of submission:		15/11/2017			
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS					
Title of the project/programme of activities:	The Capture and Utilisation of Methane at the Sibanye Gold Owned Beatrix Mine in South Africa				
Project/programme of activities reference number: (if available)	4728				
SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES					
Notes: • Sole Focal Point authority - An authorized signatory of ONLY the entity listed below is required to sign for communication related to the corresponding scope of authority. • Shared Focal Point authority - An authorized signatory ANY of the entities listed below is required to sign for communication related to the corresponding scope of authority. • Joint Focal Point authority - Authorized signatories of ALL entities listed below are required to sign for communication related to the corresponding scope of authority. Name of entity:					
Address: Constantia Office Park Bridgeview House, Ground floor Corner 14th Avenue and Hendrik Potgieter Street 1709 Weltevreden Park South Africa					
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	
			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: Keyter	Telephone 1:				
First name: Charl	Telephone 2 (optional):				
Email:	Fax (optional):				
Specimen signature: Date (dd/mm/yyyy):					
Is this entity changing its name?	Yes				
Former entity name, if applicable: GFI Mining South Africa (Pty) Ltd					
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: Mercuria Energy Trading SA					
Address: 50 Rue du Rhone, 6th Floor 1204 Geneva Switzerland		C.1	GL.	T	
This entity is nominated as a focal point with the authority to:		Sole	Shared	Joint	

CDM-MOC-FORM

(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			
Contact details (primary authorized signatory):	Mr.⊠ Ms.□		
Last name: Steels	Telephone 1:		
First name: Jean François	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		