

## Modalities of Communication Statement (Version 03.0)

Date of submission:		15/10/2	012				
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS							
Title of the project/programme of activities:	Laifeng Kaidi Biomass Power	Project					
<b>Project/programme of activities reference number:</b> <i>(if available)</i>	6663						
SECTION 2: NOMINATION O	F 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.   • Joint Focal Point authority - Authorized signatories of ALL entities listed below are required to sign for communication related to the corresponding scope of authority.   • Mame of entity:							
Vitol S.A.							
Address: Boulevard du Pont d'Arve 28 , CH 1205 Geneva Switzerland							
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.	1					
Last name: Fransen	Telephone 1:						
First name: David	Telephone 2 (optional):						
Email:	Fax (optional):						
Specimen signature:	Date (dd/mm/yyyy):						
Contact details (alternate authorized signatory):	Mr. 🛛 Ms.						
Last name: Doucakis	Telephone 1:						
First name: Nikolas	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: Laifeng Kaidi Green Energy Development Co., Ltd.							

Address:

607 room, Kaidi Building, TI Jiangxia Avenue, Eastlak New Technology Development Zone, Wuhan City, Hubei Province China

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						
(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: Xue	Telephone 1:					
First name: Fei	Telephone 2 (optional):					
Email:	Fax (optional):					
Specimen signature:	Date (dd/mm/yyyy):					
Contact details (alternate authorized signatory):	Mr. 🗖 Ms. 🛛					
Last name: Hao	Telephone 1:					
First name: Jing	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					