

## Modalities of Communication Statement (Version 03.0)

| Date of sub-science  |  | 10/07/20   | 12     |       |  |
|--|--|------------|--------|-------|--|
| Date of submission:  |  | 18/07/2013 |        |       |  |
| SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS   |  |            |        |       |  |
| Title of the project/programme of activities:  | Ningxia Zhongwei (Xuanhe) Guodian Phase I 20 MWp<br>Solar Photovoltaic Power Project |            |        |       |  |
| <b>Project/programme of activities reference number:</b> <i>(if available)</i>   | 8901   |            |        |       |  |
| SECTION 2: NOMINATION OF 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:<br>Department of Climate Change, National Development and Reform Commission  |  |            |        |       |  |
| Address:<br>No.38, Yuetannan Street,<br>Beijing<br>China   |  |            |        |       |  |
| This entity is nominated as a focal point with the authority to:SoleSharedJoin   |  | 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  |  |            |        |       |  |
| (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: Sun   | Telephone 1:   |            |        |       |  |
| First name: Cuihua   | 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:<br>Ningxia Guodian A'tesi New Energy Development Co., Ltd.   |  |            |        |       |  |
| Address:<br>13th Floor, International Trade Center, Gongyuan Street, Yinchuan, Ningxia,<br>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  |  |            |        | X     |  |

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| (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 |                                |   |
|---|--------------------------------|---|
| (c) Communicate on all other project or programme<br>(a) or (b) above   | related matters not covered by | X |
| Contact details (primary authorized signatory):   | Mr. 🛛 Ms. 🗖                    |   |
| Last name: Yu   | Telephone 1:                   |   |
| First name: Wenjiang  | Telephone 2 (optional):        |   |
| Email:  | Fax (optional):                |   |
| Specimen signature:   | Date (dd/mm/yyyy):             |   |
| Contact details (alternate authorized signatory):   | Mr. 🛛 Ms.                      |   |
| Last name: Shi  | Telephone 1:                   |   |
| First name: Chongqi   | Telephone 2 (optional):        |   |
| Email:  | Fax (optional):                |   |
| Specimen signature:   | Date (dd/mm/yyyy):             |   |
| Is this entity changing its name?   | No                             |   |
| Former entity name, if applicable:  | 1                              |   |
| 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                            |   |