

## Modalities of Communication Statement (Version 03.0)

Date of submission:		28/05/2021						
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS								
Title of the project/programme of activities:	Bundled 9.00 MW wind power Generation project in Rajasthan, India by M/s. Gangadhar Narsingdas Agrawal Group							
Project/programme of activities reference number: (if available)	7215							
SECTION 2: NOMINATION O	F FOCAL POINT ENTITY	/IES						
Notes:  • Sole Focal Point authority - An authorized signatory of communication related to the corresponding scope of authority - An authorized signator communication related to the corresponding scope of authority - Joint Focal Point authority - Authorized signatories of communication related to the corresponding scope of authority communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories of communication related to the corresponding scope of authority - Authorized signatories - Authorized signatories - Authorized signatories - Authorized signatories - Authorized signat	ty. ry <u>ANY of the entities listed bel</u> ety. of <u>ALL entities listed below are r</u>	ow is requ	<u>iired</u> to sig					
Name of entity: M/s Gangadhar Narsingdas Agrawal (HUF)								
Address: Anand Bhavan Station Road, Margao 403601 Goa 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: Agrawal	Telephone 1:							
First name: Anirudh	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: M/S Ferromar Shipping Private Limited (FSPL)								
Address: Anand Bhavan Station Road, Margao 403601 Goa India								

## CDM-MOC-FORM

This entity is nominated as a focal point with the authority to:  (a) Communicate in relation to requests for forwarding of CER		Sole	Shared	Joint	
			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: Agrawal	Telephone 1:				
First name: Anirudh	Telephone 2 (optional):	Telephone 2 (optional):			
Email:	Fax (optional):				
Specimen signature:	Date (dd/mm/yyyy):				
Is this optity shanging its name?	No				
Is this entity changing its name?	INO				
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?					