

Modalities of Communication Statement (Version 03.0)

| Date of submission: | | 12/11/2014 | | | | | |
|--|---|------------|----------------------|-------|--|--|--|
| SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS | | | | | | | |
| Title of the project/programme of activities: | Programme for Promotion of Access to Domestic Biogas in Rural Bangladesh | | | | | | |
| Project/programme of activities reference number: <i>(if available)</i> | 9992 | | | | | | |
| SECTION 2: NOMINATION O | F FOCAL POINT ENTITY | /IES | | | | | |
| Notes: • <u>Sole</u> Focal Point authority - An authorized signatory of communication related to the corresponding scope of authori • <u>Shared</u> Focal Point authority - An authorized signator communication related to the corresponding scope of authori • <u>Joint</u> Focal Point authority - Authorized signatories of communication related to the corresponding scope of authori Name of entity: | ty. ry <u>ANY of the entities listed belo</u> ty. f <u>ALL entities listed below are r</u> | ow is requ | <u>iired</u> to sigi | | | | |
| Infrastructure Development Company Limited | | | | | | | |
| Address: UTC Building, 16th Floor,8 Panthapath, Kawran Bazar, Dha Bangladesh | ka 1215 | | | | | | |
| 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 relat (a) or (b) above | ted matters not covered by | | | X | | | |
| Contact details (primary authorized signatory): | Mr. 🛛 Ms. | 1 | ļļ | | | | |
| Last name: Malik | Telephone 1: | | | | | | |
| First name: Mahmood | Celephone 2 (optional): | | | | | | |
| Email: | Fax (optional): | | | | | | |
| Specimen signature: | Date (dd/mm/yyyy): | | | | | | |
| | | | | | | | |
| Contact details (alternate authorized signatory): | Mr. 🛛 Ms. | | | | | | |
| Last name: Tazdik | Telephone 1: | | | | | | |
| First name: Junaed | 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: PEAR Carbon Offset Initiative, Ltd. | | | | | | | |

Address: RATIO 1002,Tsukiji 1-10-11, Chuo-ku, Tokyo 104-0045 Japan

| This entity is nominated as a focal point with the authority to:(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 | | Sole | Shared | Joint X X | | | | | |
|--|-------------------------|------|--------|-----------------|---|--------------------------------|----------|--|---|
| | | | | | (c) Communicate on all other project or programme (a) or (b) above | related matters not covered by | | | X |
| | | | | | Contact details (primary authorized signatory): | Mr. 🛛 Ms. 🗌 | <u> </u> | | |
| Last name: Matsuo | Telephone 1: | | | | | | | | |
| First name: Naoki | 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 | | | | | | | | |