

Modalities of Communication Form

This form is to be used by project participants in order to sub	omit the statement of Modalities of	of Commu	nication.	
Date of submission		22/02/2012		
Section 1: Pr	oject Details			
1. Title of the CDM project activity	Gansu Huanghe Bingling Hydr	ydropower Station Project		
2. Please state project ID Number if available	1985			
Section 2: Nomina	tion of Focal Point			
3. Details of the entity/ies nominated as focal point				
Notes: • <u>Sole</u> Focal Point authority - A signature of an authoriz communication related to the corresponding scope of authori • <u>Shared</u> Focal Point authority - A signature of an authority required for communication related to the corresponding scope • <u>Joint</u> Focal Point authority - A signature of an authority communication related to the corresponding scope of authority Name of the entity:	ty. orized signatory of <u>ANY of the c</u> of authority. ized signatory of <u>ALL entities lis</u>	entities lis	ted below	is
ENEL Trade SpA.				
This entity is nominated as focal point for:		Sole	Shared	Joint
(a) Authority to instruct the secretariat and communicate allocation/forwarding of CERs	with the CDM EB on	X		
(b) Authority to request the addition of project participar any voluntary withdrawal and to update contact details o (includes changes in company's name and legal status, ad	f project participant			X
(c) Communication with the secretariat and CDM EB on registration and/or issuance. Select this scope if the entity communication related to the project				X
Contact details (primary authorized signatory):	Mr.	1	I	
Last name: Deodati	Telephone:			
First name: Giuseppe	Fax:			
Email:	Address:			
Specimen signature:				
Contact details (alternate authorized signatory):	Mr.			
Last name: Ferrara	Telephone:			
First name: Carlo	Fax:			
Email:	Address:			
Specimen signature:				

This entity is nominated as focal point for:		Sole	Shared	Join
(a) Authority to instruct the secretariat and communiallocation/forwarding of CERs	icate with the CDM EB on			
(b) Authority to request the addition of project participants and/or to communicate any voluntary withdrawal and to update contact details of project participant (includes changes in company's name and legal status, addresses etc.				X
(c) Communication with the secretariat and CDM EE registration and/or issuance. Select this scope if the er communication related to the project				X
Contact details (primary authorized signatory):	Mr.			
Last name: Chen	Telephone:			
First name: Guangli	Fax:			
Email:	Address:			
Specimen signature:				
Contact details (alternate authorized signatory):				
Last name:	Telephone:			
First name:	Fax:			
	Address:			