



Modalities of Communication Statement (Version 03.0)

Date of submission:	31/10/2012																
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS																	
Title of the project/programme of activities:	Methane capture and destruction on Las Heras landfill in Mendoza, Argentina																
Project/programme of activities reference number: <i>(if available)</i>	1645																
SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES																	
<p>Notes:</p> <ul style="list-style-type: none"> · Sole 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. · Shared 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. · Joint 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. 																	
Name of entity: Bionersis S.A.																	
Address: 176, Avenue Charles de Gaulle 92200 Neuilly Sur Seine France																	
This entity is nominated as a focal point with the authority to:	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;"></th> <th style="width: 10%;">Sole</th> <th style="width: 10%;">Shared</th> <th style="width: 10%;">Joint</th> </tr> </thead> <tbody> <tr> <td>(a) Communicate in relation to requests for forwarding of CER</td> <td></td> <td></td> <td style="text-align: center;">X</td> </tr> <tr> <td>(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</td> <td></td> <td></td> <td style="text-align: center;">X</td> </tr> <tr> <td>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</td> <td></td> <td></td> <td style="text-align: center;">X</td> </tr> </tbody> </table>		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
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(a) Communicate in relation to requests for forwarding of CER			X														
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(c) Communicate on all other project or programme related matters not covered by (a) or (b) above			X														
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>																
Last name: Vidaillet	Telephone 1:																
First name: Stephane	Telephone 2 (optional):																
Email:	Fax (optional):																
Specimen signature:	Date (dd/mm/yyyy):																
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>																
Last name: Pastre	Telephone 1:																
First name: Frédéric	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: ORBEO			
Address: 17, Cours Valmy, Tour Societe Generale 92987 Paris La Defence Cedex France			
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. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Rosier	Telephone 1:		
First name: Philippe	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Siegart	Telephone 1:		
First name: Pascal	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		