

## **Modalities of Communication Form**

This form is to be used by project participants in order to submit the statement of Modalities of Communication.

Date of submission		08/06/2012			
Section 1: Project Details					
1. Title of the CDM project activity	Pampeana and Terra Santa Small Hydropower Plants Project Activity				
2. Please state project ID Number if available	4996				
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# **Section 2: Nomination of Focal Point**

### 3. Details of the entity/ies nominated as focal point

### Notes:

- · <u>Sole</u> Focal Point authority A signature of an authorized signatory of <u>ONLY the entity listed below is required</u> for communication related to the corresponding scope of authority.
- · <u>Shared</u> Focal Point authority A signature of an authorized signatory of <u>ANY of the entities listed below is required</u> for communication related to the corresponding scope of authority.
- · <u>Joint</u> Focal Point authority A signature of an authorized signatory of <u>ALL entities listed below are required</u> for communication related to the corresponding scope of authority.

## Name of the entity:

This entity is nominated as focal point for:		Sole	Shared	Joint X X	
(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs  (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.					
					(c) Communication with the secretariat and CDM El registration and/or issuance. Select this scope if the e communication related to the project
Contact details (primary authorized signatory):	Mr.	1			
Last name: Siqueira	Telephone:				
First name: Mozart	Fax:				
=	Address:				
Email:	Address:				
Specimen signature:					
Specimen signature:  Contact details (alternate authorized signatory):	Mr.				
Specimen signature:					
Specimen signature:  Contact details (alternate authorized signatory):	Mr.				

Name of the entity: Várzea do Juba Energética S.A.				
This entity is nominated as focal point for:		Sole	Shared	Joint
(a) Authority to instruct the secretariat and communicallocation/forwarding of CERs	cate with the CDM EB on			X
(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 EB registration and/or issuance. Select this scope if the er communication related to the project				X
Contact details (primary authorized signatory):	Mr.	_		
Last name: Siqueira	Telephone:			
First name: Mozart	Fax:			
Email:	Address:			
Specimen signature:	<u>'</u>			
Contact details (alternate authorized signatory):	Mr.			
Last name: Rego	Telephone:			
First name: Ricardo	Fax:			
Email:	Address:			
Specimen signature:				
Specimen signature:  Name of the entity: Ecopart Assessoria em Negócios Empresariais Ltda				
Name of the entity:		Sole	Shared	Joint
Name of the entity: Ecopart Assessoria em Negócios Empresariais Ltda	cate with the CDM EB on	Sole	Shared	Joint X
Name of the entity: Ecopart Assessoria em Negócios Empresariais Ltda This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communication of the entity is nominated as focal point for:	ipants and/or to communicate ils of project participant	Sole	Shared	
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