**Modalities of Communication Statement**
*(Version 03.0)*

**Date of submission:** 15/05/2014

**SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS**

<table>
<thead>
<tr>
<th>Title of the project/programme of activities:</th>
<th>Wind power project in Rajasthan, India</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project/programme of activities reference number: (if available)</td>
<td>8569</td>
</tr>
</tbody>
</table>

**SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES**

Notes:
- **Sole Focal Point authority** - An authorized signatory of ONLY the entity listed below is required to sign for communication related to the corresponding scope of authority.
- **Shared Focal Point authority** - An authorized signatory ANY of the entities listed below is required to sign for communication related to the corresponding scope of authority.
- **Joint Focal Point authority** - Authorized signatories of ALL entities listed below are required to sign for communication related to the corresponding scope of authority.

**Name of entity:**
Ratedi Wind Power Private Limited

**Address:**
The IL&FS Financial Centre, Plot No. C-22, G Block, Bandra-Kurla Complex, Bandra-East, Maharashtra 400051 Mumbai

India

This entity is nominated as a focal point with the authority to:

<table>
<thead>
<tr>
<th>(a) Communicate in relation to requests for forwarding of CER</th>
<th>Sole</th>
<th>Shared</th>
<th>Joint</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
<td></td>
<td></td>
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</table>

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<thead>
<tr>
<th>(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</th>
<th>Sole</th>
<th>Shared</th>
<th>Joint</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</th>
<th>Sole</th>
<th>Shared</th>
<th>Joint</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Contact details (primary authorized signatory):**

Mr. Mr. Ms. Ms. Rohil, Telephone 1:

**Email:**

Fax (optional):

Specimen signature: Date (dd/mm/yyyy):

**Contact details (alternate authorized signatory):**

Mr. Mr. Ms. Ms. Dipan, Telephone 1:

**Email:**

Fax (optional):

Specimen signature: Date (dd/mm/yyyy):

**Is this entity changing its name?** Yes

**Former entity name, if applicable:** IL&FS Wind Power Limited

**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