



## Modalities of Communication Statement (Version 03.0)

<b>Date of submission:</b>	25/03/2019		
<b>SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS</b>			
<b>Title of the project/programme of activities:</b>	The Project of CCC program of Activities (PoA) for Distribution of Improved Cookstoves (ICS) in Developing South and Southeast Asia Countries (Myanmar)		
<b>Project/programme of activities reference number:</b> <i>(if available)</i>	10471		
<b>SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES</b>			
Notes:			
<ul style="list-style-type: none"> <li>· <b>Sole Focal Point authority</b> - An authorized signatory of <u>ONLY the entity listed below is required</u> to sign for communication related to the corresponding scope of authority.</li> <li>· <b>Shared Focal Point authority</b> - An authorized signatory <u>ANY of the entities listed below is required</u> to sign for communication related to the corresponding scope of authority.</li> <li>· <b>Joint Focal Point authority</b> - Authorized signatories of <u>ALL entities listed below are required</u> to sign for communication related to the corresponding scope of authority.</li> </ul>			
<b>Name of entity:</b> Climate Change Center			
<b>Address:</b> No.701, 190, Yulgok-ro, Jongno-gu 03127 Seoul Republic of Korea			
<b>This entity is nominated as a focal point with the authority to:</b>	<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Communicate in relation to requests for forwarding of CER</b>	<b>X</b>		
<b>(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</b>	<b>X</b>		
<b>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</b>			<b>X</b>
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Kim	Telephone 1:		
First name: Sohee	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
<b>Contact details (alternate authorized signatory):</b>	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>		
Last name: Kwack	Telephone 1:		
First name: Hyun Shin	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
Is this entity changing its name?	<b>No</b>		
Former entity name, if applicable:			
Is this entity also a project participant?	<b>Yes</b>		
If the entity is also a project participant, do the same signatories represent it in its project participant role?	<b>Yes</b>		

<b>Name of entity:</b> SK Telecom			
<b>Address:</b> T-tower, EulJi-ro 65, Jung-Gu Seoul Republic of Korea			
<b>This entity is nominated as a focal point with the authority to:</b>	<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Communicate in relation to requests for forwarding of CER</b>			
<b>(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</b>			
<b>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</b>			<b>X</b>
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Chang	Telephone 1:		
First name: Hyung-eal	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
<b>Contact details (alternate authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Shin	Telephone 1:		
First name: Sung-nam	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
Is this entity changing its name?	<b>No</b>		
Former entity name, if applicable:			
Is this entity also a project participant?	<b>No</b>		
If the entity is also a project participant, do the same signatories represent it in its project participant role?			
<b>Name of entity:</b> SAMPYO Cement Co., Ltd			
<b>Address:</b> 20, Dongyang-gil, Samcheok-si Gangwon-do Republic of Korea			
<b>This entity is nominated as a focal point with the authority to:</b>	<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Communicate in relation to requests for forwarding of CER</b>			
<b>(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</b>			
<b>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</b>			<b>X</b>
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Ko	Telephone 1:		
First name: Jae Young	Telephone 2 (optional):		
Email:	Fax (optional):		

Specimen signature:		Date (dd/mm/yyyy):		
<b>Contact details (alternate authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Kim		Telephone 1:		
First name: Jae Hong		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Is this entity changing its name?		<b>No</b>		
Former entity name, if applicable:				
Is this entity also a project participant?		<b>No</b>		
If the entity is also a project participant, do the same signatories represent it in its project participant role?				
<b>Name of entity:</b> KOREA SOUTH-EAST POWER Co., Ltd.				
<b>Address:</b> 32, Sadeul-r0123beon-gil, Jinju-Si 52852 Gyeongsangnam-do Republic of Korea				
<b>This entity is nominated as a focal point with the authority to:</b>		<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Communicate in relation to requests for forwarding of CER</b>				
<b>(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</b>				
<b>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</b>				<b>X</b>
<b>Contact details (primary authorized signatory):</b>		Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>		
Last name: Kim		Telephone 1:		
First name: In-Kyong		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
<b>Contact details (alternate authorized signatory):</b>		Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Lee		Telephone 1:		
First name: Jong-Ho		Telephone 2 (optional):		
Email:		Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):		
Is this entity changing its name?		<b>No</b>		
Former entity name, if applicable:				
Is this entity also a project participant?		<b>No</b>		
If the entity is also a project participant, do the same signatories represent it in its project participant role?				
<b>Name of entity:</b> Korea Electric Power Corporation (KEPCO)				

<b>Address:</b> 55 Jeollyeok-ro, Naju-si, 58217 Jeollanam-do Republic of Korea			
<b>This entity is nominated as a focal point with the authority to:</b>	<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Communicate in relation to requests for forwarding of CER</b>			
<b>(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</b>			
<b>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</b>			<b>X</b>
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Lee	Telephone 1:		
First name: Woo-rim	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
<b>Contact details (alternate authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>		
Last name: Lee	Telephone 1:		
First name: Chun Bae	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:	Date (dd/mm/yyyy):		
Is this entity changing its name?	<b>No</b>		
Former entity name, if applicable:			
Is this entity also a project participant?	<b>No</b>		
If the entity is also a project participant, do the same signatories represent it in its project participant role?			