

Modalities of Communication Statement (Version 03.0)

Date of submission:		24/12/2014			
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS					
Title of the project/programme of activities:	Tanzania Renewable Energy Programme				
Project/programme of activities reference number: (if available)	9904				
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: Rural Energy Agency (REA)					
Address: Mawasiliano Towers, Sam Nujoma Road Dar es Salaam United Republic of Tanzania					
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. ☑ Ms. □				
Last name: U. A. Mwakahesya	Telephone 1:				
First name: Lutengano	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: International Bank for Reconstruction and Development (IBRD) as the Trustee of the Carbon Partnership Facility					
Address: 1818 H Street, NW 20433 Washington DC United States of America					
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	

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(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			
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above		X	
Contact details (primary authorized signatory):	Mr. ☐ Ms. ☒	'	
Last name: Chassard	Telephone 1:		
First name: Joelle	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature: Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):	Mr. ⋈ Ms. □		
Last name: Andreu	Telephone 1:		
First name: Jose	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		