

Modalities of Communication Statement (Version 03.0)

Date of submission:	te of submission:		09/05/2013			
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS						
Title of the project/programme of activities:	DEWA Chiller Station L					
Project/programme of activities reference number: (if available)	7260					
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:						
Dubai Electricity and Water Authority (DEWA)						
Address: PO Box 564, Dubai United Arab Emirates						
This entity is nominated as a focal point with the authorit	y to:	Sole	Shared	Joint		
Communicate in relation to requests for forwarding of CER						
(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: Simic	Telephone 1:					
First name: Nebojsa	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: Dubai Carbon Centre of Excellence						
Address: PO BOX 333992, Dubai United Arab Emirates						
This entity is nominated as a focal point with the authority to:		Sole	Shared	Joint		
(a) Communicate in relation to requests for forwarding o	f CER	X				

CDM-MOC-FORM

(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: Iannelli	Telephone 1:			
First name: Ivano	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature: Date (dd/mm/yyyy):				
Contact details (alternate authorized signatory):	Mr. ☑ Ms. □			
Last name: Salman	Telephone 1:			
First name: Waleed	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			