

Modalities of Communication Statement (Version 03.0)

| Date of submission: | | 03/09/2012 | | | | |
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| SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS Title of the project/programme of activities: SRS Bagasse Cogeneration Project | | | | | | |
| Title of the project/programme of activities: | | уест | | | | |
| Project/programme of activities reference number: (if available) | 0080 | | | | | |
| 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: M/s Shree Renuka Sugars Ltd. | | | | | | |
| Address: BC 105, Havelock Road, Camp, Belgaum 590001 Karnataka India | | | | | | |
| 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: Dharmadas | Telephone 1: | | | | | |
| First name: William | 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: EDF Trading Limited | | | | | | |
| Address: High Holborn,71 WC1V6ED London United Kingdom of Great Britain and Northern Ireland | | | | | | |
| This entity is nominated as a focal point with the authority to: | | Sole | Shared | Joint | | |
| (a) Communicate in relation to requests for forwarding of CFR | | | | V | | |

| (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t status, contact details and specimen signatures | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|--------|------------|--|
| (c) Communicate on all other project or programme related matters not covered by (a) or (b) above | | | | | |
| Contact details (primary authorized signatory): | Mr.⊠ Ms.□ | ' | | | |
| Last name: Joubert | Telephone 1: | | | | |
| First name: François | 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: Agrinergy Ltd. | | | | | |
| Address: Eagle Tower, GL 50 1TA Cheltenham United Kingdom of Great Britain and Northern Ireland | | | | | |
| This entity is nominated as a focal point with the authority to: | | | | | |
| I his entity is nominated as a focal point with the authori | y to: | Sole | Shared | Joint | |
| (a) Communicate in relation to requests for forwarding of | | Sole | Shared | Joint X | |
| - | f CER for voluntary withdrawal of | Sole | Shared | | |
| (a) Communicate in relation to requests for forwarding of (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t | f CER for voluntary withdrawal of o company names, legal | Sole | Shared | | |
| (a) Communicate in relation to requests for forwarding of (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t status, contact details and specimen signatures (c) Communicate on all other project or programme relations. | f CER for voluntary withdrawal of o company names, legal | Sole | Shared | | |
| (a) Communicate in relation to requests for forwarding of (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t status, contact details and specimen signatures (c) Communicate on all other project or programme relation (a) or (b) above | f CER for voluntary withdrawal of company names, legal ted matters not covered by | Sole | Shared | | |
| (a) Communicate in relation to requests for forwarding of (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t status, contact details and specimen signatures (c) Communicate on all other project or programme relation (a) or (b) above Contact details (primary authorized signatory): | f CER for voluntary withdrawal of company names, legal ted matters not covered by Mr. ☑ Ms. □ | Sole | Shared | | |
| (a) Communicate in relation to requests for forwarding of (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t status, contact details and specimen signatures (c) Communicate on all other project or programme rela (a) or (b) above Contact details (primary authorized signatory): Last name: Atkinson | f CER for voluntary withdrawal of company names, legal ted matters not covered by Mr. Ms. Telephone 1: | Sole | Shared | | |
| (a) Communicate in relation to requests for forwarding of (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t status, contact details and specimen signatures (c) Communicate on all other project or programme rela (a) or (b) above Contact details (primary authorized signatory): Last name: Atkinson First name: Ben | f CER for voluntary withdrawal of company names, legal ted matters not covered by Mr. Ms. Telephone 1: Telephone 2 (optional): | Sole | Shared | | |
| (a) Communicate in relation to requests for forwarding of (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t status, contact details and specimen signatures (c) Communicate on all other project or programme rela (a) or (b) above Contact details (primary authorized signatory): Last name: Atkinson First name: Ben Email: | f CER for voluntary withdrawal of company names, legal ted matters not covered by Mr. Ms. Telephone 1: Telephone 2 (optional): Fax (optional): | Sole | Shared | | |
| (a) Communicate in relation to requests for forwarding of (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t status, contact details and specimen signatures (c) Communicate on all other project or programme rela (a) or (b) above Contact details (primary authorized signatory): Last name: Atkinson First name: Ben Email: Specimen signature: | f CER for voluntary withdrawal of company names, legal ted matters not covered by Mr. Ms. Telephone 1: Telephone 2 (optional): Fax (optional): Date (dd/mm/yyyy): | Sole | Shared | | |
| (a) Communicate in relation to requests for forwarding of (b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t status, contact details and specimen signatures (c) Communicate on all other project or programme rela (a) or (b) above Contact details (primary authorized signatory): Last name: Atkinson First name: Ben Email: Specimen signature: | f CER for voluntary withdrawal of company names, legal ted matters not covered by Mr. Ms. Telephone 1: Telephone 2 (optional): Fax (optional): Date (dd/mm/yyyy): | Sole | Shared | | |