

Modalities of Communication Form

This form is to be used by project participants in order to sub	omit the statement of Modalities of	of Commu	nication.		
Date of submission		13/07/2012			
Section 1: Project Details					
1. Title of the CDM project activity	Gu'ertu River Stage VI and VI Hydropower Project	I 17MW E	Bundled		
2. Please state project ID Number if available	3991				
Section 2: Nomina	tion of Focal Point				
3. Details of the entity/ies nominated as focal point					
Notes: • <u>Sole</u> Focal Point authority - A signature of an authoriz communication related to the corresponding scope of authori • <u>Shared</u> Focal Point authority - A signature of an auth <u>required</u> for communication related to the corresponding scop • <u>Joint</u> Focal Point authority - A signature of an author communication related to the corresponding scope of authori Name of the entity:	ty. orized signatory of <u>ANY of the e</u> of authority. ized signatory of <u>ALL entities lis</u>	entities list	ed below	is	
Kuitun Xinbei Electric Power Co., Ltd.					
This entity is nominated as focal point for:		Sole	Shared	Joint	
(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs				X	
b) Authority to request the addition of project participants and/or to communicate any voluntary withdrawal and to update contact details of project participant includes changes in company's name and legal status, addresses etc.		X			
(c) Communication with the secretariat and CDM EB on matters related to registration and/or issuance. Select this scope if the entity is to be copied on all communication related to the projectX				X	
Contact details (primary authorized signatory):	Mr.				
Last name: Zheng	Telephone:				
First name: Mingya	Fax:				
Email:	Address:				
Specimen signature:					
Contact details (alternate authorized signatory):	Ms.				
Last name: Liu	Telephone:				
First name: Hong	Fax:				
Email:	Address:				
Specimen signature:					

This entity is nominated as focal point for:(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs(b) Authority to request the addition of project participants and/or to communicate any voluntary withdrawal and to update contact details of project participant (includes changes in company's name and legal status, addresses etc.		Sole	Shared	Joint X X					
					(c) Communication with the secretariat and CDM EB registration and/or issuance. Select this scope if the er communication related to the project				X
					Contact details (primary authorized signatory):	Mr.			
Last name: Kang	Telephone:								
First name: Cheng	Fax:								
Email:	Address:								
Specimen signature:									
Contact details (alternate authorized signatory):	Ms.								
Contact details (alternate authorized signatory): Last name: Teng	Ms. Telephone:								
× 0 V/									