



## Modalities of Communication Form

*This form is to be used by project participants in order to submit the statement of Modalities of Communication.*

<b>Date of submission</b>	01/03/2010		
<b>Section 1: Project Details</b>			
<b>1. Title of the CDM project activity</b>	Project for the Catalytic Reduction of N <sub>2</sub> O Emissions with a Secondary Catalyst Inside the Ammonia Reactor of the N4 Nitric Acid Plant at Haifa Chemicals Ltd., Israel.		
<b>2. Please state project ID Number if available</b>	1370		
<b>Section 2: Nomination of Focal Point</b>			
<b>3. Details of the entity/ies nominated as focal point</b>			
<p>Notes:</p> <ul style="list-style-type: none"> <li>· <b>Sole Focal Point authority</b> - A signature of an authorized signatory of <u>ONLY the entity listed below is required</u> for communication related to the corresponding scope of authority.</li> <li>· <b>Shared Focal Point authority</b> - A signature of an authorized signatory of <u>ANY of the entities listed below is required</u> for communication related to the corresponding scope of authority.</li> <li>· <b>Joint Focal Point authority</b> - A signature of an authorized signatory of <u>ALL entities listed below are required</u> for communication related to the corresponding scope of authority.</li> </ul>			
<b>Name of the entity:</b> Citi Group Global Markets			
<b>This entity is nominated as focal point for:</b>	<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs</b>	<b>X</b>		
<b>(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.)</b>			<b>X</b>
<b>(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 project</b>			<b>X</b>
<b>Contact details (primary authorized signatory):</b>	Mr.		
Last name: Mead	Telephone:		
First name: Paul	Fax:		
Email:	Address:		
Specimen signature:			
<b>Contact details (alternate authorized signatory):</b>	Mr.		
Last name: Konijnenberg	Telephone:		
First name: Mark	Fax:		
Email:	Address:		
Specimen signature:			

<b>Name of the entity:</b> N.serve Environmental Services GmbH			
<b>This entity is nominated as focal point for:</b>	<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs</b>			
<b>(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.</b>			<b>X</b>
<b>(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 project</b>			<b>X</b>
<b>Contact details (primary authorized signatory):</b>	Mr.		
Last name: von Ruffer	Telephone:		
First name: Albrecht	Fax:		
Email:	Address:		
Specimen signature:			
<b>Contact details (alternate authorized signatory):</b>	Mr.		
Last name: von Velsen-Zerweck	Telephone:		
First name: Marten	Fax:		
Email:	Address:		
Specimen signature:			

  

<b>Name of the entity:</b> Johnson Matthey plc			
<b>This entity is nominated as focal point for:</b>	<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs</b>			
<b>(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.</b>			<b>X</b>
<b>(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 project</b>			<b>X</b>
<b>Contact details (primary authorized signatory):</b>	Mr.		
Last name: Gillinder	Telephone:		
First name: Trevor	Fax:		
Email:	Address:		
Specimen signature:			
<b>Contact details (alternate authorized signatory):</b>	Mr.		
Last name: Crooks	Telephone:		
First name: Garry	Fax:		
Email:	Address:		
Specimen signature:			

<b>Name of the entity:</b> Haifa Chemicals Limited			
<b>This entity is nominated as focal point for:</b>	<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs</b>			
<b>(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.</b>			<b>X</b>
<b>(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 project</b>			<b>X</b>
<b>Contact details (primary authorized signatory):</b>	Ms.		
Last name: Koltin	Telephone:		
First name: Dorit	Fax:		
Email:	Address:		
Specimen signature:			
<b>Contact details (alternate authorized signatory):</b>	Ms.		
Last name: Yitzhaki	Telephone:		
First name: Nir	Fax:		
Email:	Address:		
Specimen signature:			