

Modalities of Communication Statement (Version 03.0)

Date of submission:		16/06/2021			
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS					
Title of the project/programme of activities:	Grid Connected Gas based Combined Cycle Power Project in Andhra Pradesh				
Project/programme of activities reference number: <i>(if available)</i>	8323				
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: EKI Energy Services Limited					
Address: EnKing Embassy Office No. 201 Plot 48, Scheme 78, Part 2 Vijay Nagar 452010 Indore 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: Sharma	Telephone 1:				
First name: Naveen	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?	No				
If the entity is also a project participant, do the same signatories represent it in its project participant role?					