Modalities of Communication Statement
(Version 03.0)

Date of submission:	05/07/2024

SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS

Title of the project/programme of activities:	Solar Power project in Rajasthan
Project/programme of activities reference number: *(if available)*	9602

SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES

Notes:
   · **Sole Focal Point authority** - An authorized signatory of <u>ONLY the entity listed below is required</u> to sign for communication related to the corresponding scope of authority.
   · **Shared Focal Point authority** - An authorized signatory <u>ANY of the entities listed below is required</u> to sign for communication related to the corresponding scope of authority.
   · **Joint Focal Point authority** - Authorized signatories of <u>ALL entities listed below are required</u> to sign for communication related to the corresponding scope of authority.

Name of entity:
M/s Jakson Power Private Limited

Address:
Unit No 101, First Floor, Windsor, Village Kole Kalyan Off CST Road, Vidyanagari Marg, Santacruz (East), Mumbai 400098 Maharashtra
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: Agarwal	Telephone 1:
First name: Ankur	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**