



Modalities of Communication Form

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

Date of submission

22/03/2011

Section 1: Project Details

1. Title of the CDM project activity

Project for the catalytic reduction of N₂O emissions with a secondary catalyst inside the ammonia oxidation reactors of the NAN1 and NAN2 nitric acid plants at Abonos Colombianos SA ("Abocol"), Colombia.

2. Please state project ID Number if available

1119

Section 2: Nomination of Focal Point

3. Details of the entity/ies nominated as focal point

Notes:

- **Sole Focal Point authority** - A signature of an authorized signatory of ONLY the entity listed below is required for communication related to the corresponding scope of authority.
- **Shared Focal Point authority** - A signature of an authorized signatory of ANY of the entities listed below is required for communication related to the corresponding scope of authority.
- **Joint Focal Point authority** - A signature of an authorized signatory of ALL entities listed below are required for communication related to the corresponding scope of authority.

Name of the entity:

Abonos Colombianos S.A.

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 project

X

Contact details (primary authorized signatory):

Mr.

Last name: Garzon Fernandez

Telephone:

First name: Roberto Luis

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr.

Last name: Rios Arrieta

Telephone:

First name: Juan Manuel

Fax:

Email:

Address:

Specimen signature:

Name of the entity: N.serve Environmental Services GmbH			
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 project			X
Contact details (primary authorized signatory):	Mr.		
Last name: von Ruffer	Telephone:		
First name: Albrecht	Fax:		
Email:	Address:		
Specimen signature:			
Contact details (alternate authorized signatory):	Mr.		
Last name: von Velsen-Zerweck	Telephone:		
First name: Marten	Fax:		
Email:	Address:		
Specimen signature:			