

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	06/01/2012					
Section 1: Project Details						
1. Title of the CDM project activity	Bionersis project on La Duquesa landfill, Dominican Republic					
2. Please state project ID Number if available	2595					
Section 2: Nomina	tion 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: EDF Trading Limited						
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						
Contact details (primary authorized signatory):	Mr.					
Last name: Joubert	Telephone:					
First name: François	Fax:					
Email:	Address:					
Specimen signature:						
Contact details (alternate authorized signatory):						
Last name:	Telephone:					
First name:	Fax:					
Email:	Address:					
Specimen signature:						

Name of the entity: Bionersis SA						
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						
(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: Heuze	Telephone:					
First name: Nicolas	Fax:					
Email:	Address:					
Specimen signature:						
Contact details (alternate authorized signatory):						
Last name:	Telephone:					
First name:	Fax:					
Email:	Address:					
Specimen signature:						