

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		01/06/2012		
Section 1: Project Details				
1. Title of the CDM project activity	China Resources Huilai Xian'an Wind Power Project			
2. Please state project ID Number if available	3752			
Section 2: Nomination of Focal Point				

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

Notes

- · <u>Sole Focal Point authority</u> 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.
- <u>Shared Focal Point authority</u> 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.
- · <u>Joint</u> Focal Point authority A signature of an authorized signatory of <u>ALL entities listed below are required</u> for communication related to the corresponding scope of authority.

Name of the entity:

China Resources Wind Power (Huilai) Co., Ltd.

This entity is nominated as focal point for: (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.		Sole	Shared	Join		
				X		
			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: Rixin	Telephone:					
First name: Liu	Fax:	Fax:				
Email:	Address:	Address:				
Specimen signature:						
Contact details (alternate authorized signatory):	Mr.					
Last name. Waining	Telephone:					
Last name: Weiping						
First name: Lin	Fax:					

Name of the entity: Office of National Coordination Committee on Climate Change, National Development and Reform Commission								
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):	Ms.							
Last name: Sun	Telephone:							
First name: Cuihua	Fax:							
Email:	Address:							
Specimen signature:								
Contact details (alternate authorized signatory):								
Last name:	Telephone:							
First name:	Fax:							
Email:	Address:							
Specimen signature:								