

Modalities of Communication Statement (Version 03.0)

Data of sub-mission.		01/10/20	112			
Date of submission:		01/10/2012				
SECTION 1: CDM PROJECT/PROG						
Title of the project/programme of activities:	01 million Compact Fluorescent Lamps (EVN-2010) Project in Vietnam					
Project/programme of activities reference number: (if available)	6236					
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: EDF Trading Limited						
Address: 80, Victoria Street, Cardinal Place, SW1E5JL London United Kingdom of Great Britain and Northern Ireland						
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: Joubert	Telephone 1:					
First name: François	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					
Name of entity: Vietnam Electricity						
Address: No. 18 Tran Nguyen Han Street, Hoan Kiem District, Hanoi Viet Nam						
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						

(b) Communicate in relation to requests for addition and project participants and focal points, as well as changes t 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: Nguyen	Telephone 1:			
First name: Tan Loc	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:	Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):	Mr. ☐ Ms. ☒			
Last name: Bui	Telephone 1:			
First name: Thuy Quynh	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			
Name of entity: EVN Finance Joint Stock Company	1			
Address: Level 6,7 & 9-434 Tran Khat Chan, Hanoi Viet Nam				
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				
(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: Cao	Telephone 1:			
First name: Thi Thu Ha	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:	Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):	Mr. ☐ Ms. 🏻			
Last name: Dang	Telephone 1:			
First name: Thi Hong Hai	Telephone 2 (optional):			
Email:	Fax (optional):			

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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