JCM Modalities of Communication Statement Form

Section 1: Project description		
Title of the project	5MW Solar Power Project in Belen	
Country	Costa Rica	
Date of Submission	15 103 / 2019	

Section 2: Nomination of focal point entity				
Name of entit	ty: NTT DATA INSTITU	TE OF MANAGEMENT CONSULTING,		
Address (incl. postcode): JA Kyosai Bldg, 10th FL., 7-9, Hirakawacho 2-chome, Chiyoda-ku				
Tokyo 102-00	93, Japan			
Telephone: Fax:				
E-mail:		Website: http://www.keieiken.co.jp		
Primary auth	orised signatory:	Mr. Ms.		
Last name: N	/luraoka	First name: Motoshi		
Title: Partner	r, Socio & Eco Strategic Consulting L	Jnit		
Specimen sig	mature:	Date:		
		15/2/2019		
Alternate authorised signatory:		Mr. Ms.		
Last name: L	Jeda	First name: Ikuya		
Title: Manage	er, Socio & Eco Strategic Consulting	Unit		
Specimen signature: Date:				
Specifica Signification		15/3/2019		
Contact pers	on:	Mr. Mr.		
Last name: N	/latsuda	First name: Shuichi		
Title: Manag	jer			
Department:	Eco Business Support centre			
Mobile:		Direct tel.:		
E-mail:	41 41	Direct fax:		
USE THIS SECTION FOR POST-REGISTRATION SUBMISSIONS ONLY	Is this entity changing its name?	Yes (Former entity name:) No		
	Is the entity also a project participant?	Yes No		
	If the entity is also a project participant, do the same signatories represent it in its project participant role?	Yes No		

Section 3: Third-party entity (TPE)			
Name of the TPE that conducts validation	Japan Quality Assurance organization		
(and verification) for the project:			
Address (incl. postcode): 1-25 Kanda Sudacho, Chiyoda-ku, Tokyo 101-8555, Japan JR Kanda			
Manseibashi Building			
Contact person:	Mr. 🛛 Ms. 🗌		
Last name: Motokawa	First name: Hiroshi		
Title: Director			
Department: Global Environment Department			
E-mail: Telephone:			

S	Section 4: List of project participants other than nominated focal point entity		
	Name of project participant		
(1)	Generacion Solar Fotovoltaica Belen Sociedad Anonima Coope guanacaste		
(2)	CoopeGuanacaste R.1,		
(3)			
(4)			
(5)			
(6)			

*Rows may be added, as needed *Contact information of each participant is indicated in Section 5.

JCM Modalities of Communication Statement Form ANNEX 1

This annex is to be used by the nominated focal point to request changes to project participant status and contact details of a focal point entity following project registration.

Section 1: Project details		
Title of the project	5MW Solar Power Project in Belen	
Country	Costa Rica	
Project reference number:	CR001	
Date of Submission	27/02/2023	

Section 2: Addition/change of name of a project participant				
Add project participant				
Change name of project participant (if selected, indicate former name below)				
The following entity is hereby added as a project pa	articipant or is newly named in respect of			
the above project. By providing a specimen signatu	re below, the project participant confirms			
its acceptance of the current modalities of communic	cation.			
Name of entity:				
Address (incl. postcode):				
Former name of project participant (if applicable	2):			
Telephone:	Fax:			
E-mail:	Website:			
Primary authorised signatory:	Mr. 🗌 Ms. 🗌			
Last name:	First name:			
Title:				
Specimen signature: Date: dd/mm/yyyy				
Alternate authorised signatory:	Mr Ms			
Last name:	First name:			
Title:				
Specimen signature: Date: dd/mm/yyyy				
Contact person:	Mr Ms			
Last name:	First name:			
Title:				
Department:				

Mobile:	Direct tel.:
E-mail:	Direct fax:
Signature of the nominated focal point: Name: Specimen signature:	Date: dd/mm/yyyy

Section 3: Voluntary withdrawal of project participants

The following entity is registered as a project participant in the above project and hereby			
confirms its voluntary consent to be removed.			
Name of entity:			
Name of authorised sign	natory:	Mr.	Ms.
Last name:		First name:	
Title:			
Specimen signature:			Date: dd/mm/yyyy
*Rows may be added, as needed			
Signature of the nominated focal point: Name:			
Specimen signature:			Date: dd/mm/yyyy

Section 4: Change of contact details (project participants or focal point entity)

The following entity is an existing project participant/focal point entity in respect of the above project and hereby requests the following changes to its contact details:

Project participant

⊠Focal point

Name of antitu	NTT DATA INSTITUTE OF MANAGEMENT	CONSULTING,
Name of entity:	Inc.	

Address (incl. postcode): JA kyosai Bldg, 9th Fl., 7-9, Hirakawacho 2-chome, Chiyoda-ku, Tokyo 102-0093

Telephone:	Fax:	
E-mail: N/A	Website:https://www.nttdata-	
	strategy.com/english/	
Primary authorised signatory:	Mr. 🗌 Ms. 🗌	
Last name:	First name:	

Title:		
Specimen signature:		Date: dd/mm/yyyy
Alternate authorised signatory:	Mr. 🛛	Ms.
Last name: Higashi	First name: Shin	ntaro
Title: Senior Manager		
Specimen signature:		Date: 27/02/2023
Contact person:	Mr. 🖂	Ms.
Last name: Higashi First name: Shintaro		ntaro
Title: Senior Manager		
Department: Socio & Eco Strategic Consulting Un	it	
Mobile:	Direct tel.:	
E-mail:	Direct fax:	
*Rows may be added, as needed		
Signature of the nominated focal point:		
Name: Motoshi Muraoka		
Specimen signature:		Date: 27/02/2023
DISCLAIMER: Any new representative for a focal point entity is recognized to hold the same		
authority designated to him/her by the entity as that held by the previous signatory.		

If a change to a project participant requested in this section is also applicable to a focal point entity, it is recognized that the project participant and the focal point are the same legal entity, with the same legal registration in the respective jurisdiction.