



JCM Modalities of Communication Statement Form

Section 1: Project description	
Title of the project	Introducing double-bundle modular electric heat pumps at AXIA SOUTH CIKARANG Tower 2
Country	The Republic of Indonesia
Date of Submission	03/08/2016

Section 2: Nomination of focal point entity(ies)	
Name of entity:	Toyota Tsusho Corporation
Address (incl. postcode): 9-8, Meieki 4-chome, Nakamura-ku, Nagoya 450-8575, Japan	
Telephone: N/A	Fax: N/A
E-mail: N/A	Website: http://www.toyota-tsusho.com/english/
Primary authorised signatory:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Matsuo	First name: Tsuyoshi
Title: Estate Business Department General Manager	
Specimen signature:	Date: dd/mm/yyyy 29/07/2016
	
Alternate authorised signatory:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Morita	First name: Shintaro
Title: Estate Business Department Project Manager	
Specimen signature:	Date: dd/mm/yyyy 29/07/2016
	
Contact person:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Morita	First name: Shintaro
Title: Project Manager	
Department: Estate Business Department	
Mobile: N/A	Direct tel.: +81-52-584-8569
E-mail: shintaro_morita@toyota-tsusho.com	Direct fax: +81-52-584-5310
USE THIS SECTION FOR POST-REGISTRATION SUBMISSIONS ONLY	Is this entity changing its name? Yes <input type="checkbox"/> (Former entity name:) No <input type="checkbox"/>
	Is the entity also a project participant? Yes <input type="checkbox"/> No <input type="checkbox"/>
	If the entity is also a project participant, do the same signatories represent it in its project participant role? Yes <input type="checkbox"/> No <input type="checkbox"/>

*Tables should be added, if more than one focal points are designated.

Section 3: Third-party entity (TPE)	
Name of the TPE that conducts validation (and verification) for the project:	Japan Quality Assurance Organization
Address (incl. postcode): 1-25 Kandasudacho, Chiyoda-ku, Tokyo, 101-8555	
Contact person:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Tanabe	First name: Koichiro
Title: Manager	
Department: Global Environment Department	
E-mail: tanabe-koichiro@jqa.jp	Telephone: +81-3-4560-5527

Section 4: List of project participants other than nominated focal point entity(ies)	
	Name of project participant
(1)	PT. TTL Residences
(2)	
(3)	
(4)	
(5)	
(6)	

*Rows may be added, as needed

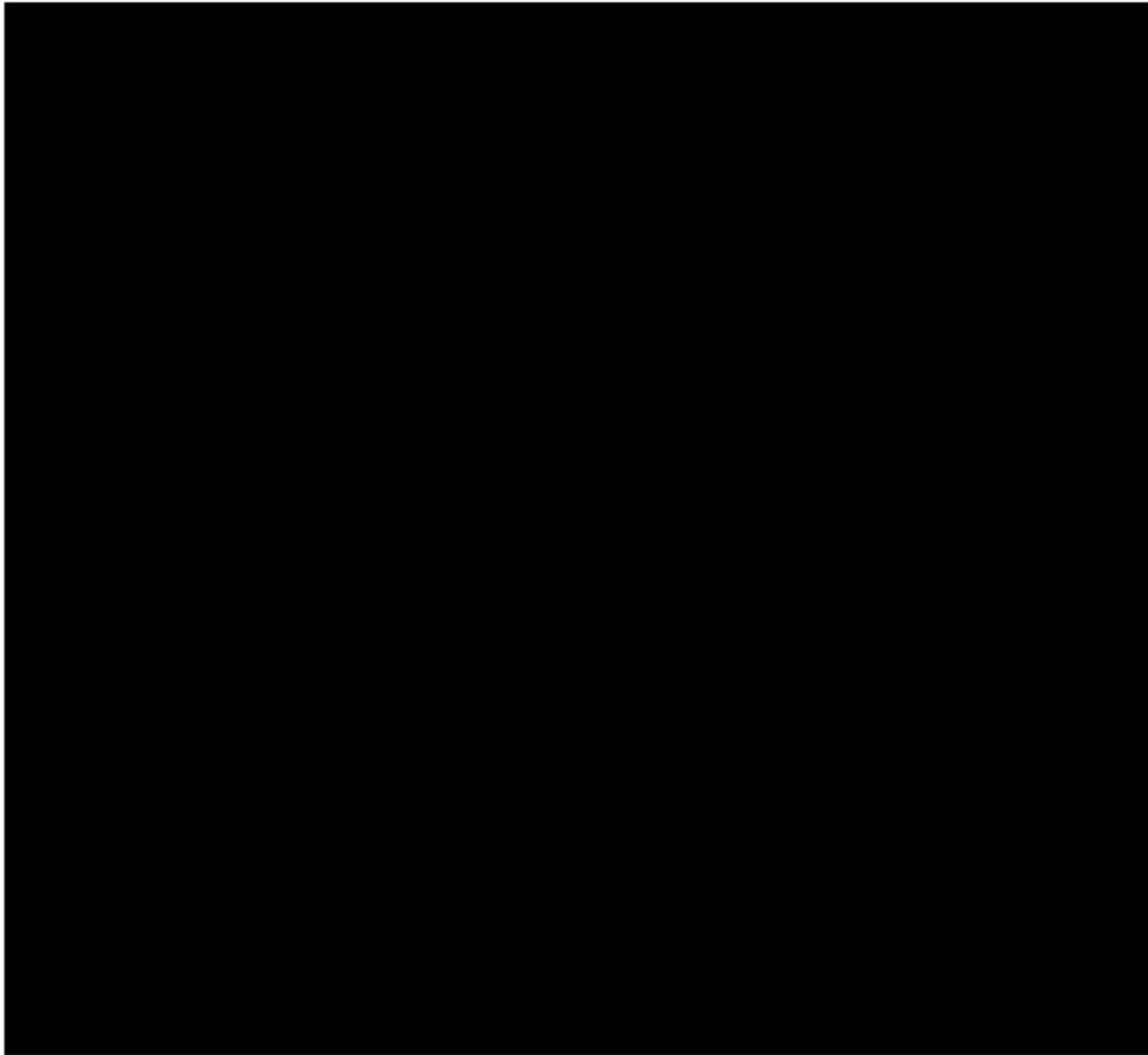
*Contact information of each participant is indicated in Section 5.

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ANNEX 1

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

Section 1: Project details	
Title of the project	Introducing double-bundle modular electric heat pumps at AXIA SOUTH CIKARANG Tower 2
Country	Republic of Indonesia
Project reference number:	ID008
Date of Submission	29/5/2018

Section 4: Change of contact details (project participants or focal point entity(ies))	
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:	
<input checked="" type="checkbox"/> Project participant	
<input checked="" type="checkbox"/> Focal point	
Name of entity:	Toyota Tsusho Corporation
Address (incl. postcode): 3-13, Konan 2-chome, Minato-ku, Tokyo 108-8208, Japan	
Telephone: N/A	Fax: N/A
E-mail: N/A	Website: http://www.toyota-tsusho.com/english/
Primary authorised signatory:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Watanabe	First name: Yasunori
Title: LIVING & HEALTHCARE DEPARTMENT General Manager	
Specimen signa 	Date: 25/5/2018
Alternate authorised signatory:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Hayashi	First name: Ohshu
Title: LIVING & HEALTHCARE DEPARTMENT Project Manager	
Specimen signature: 	Date: 25/5/2018
Contact person:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Hayashi	First name: Ohshu
Title: Project Manager	
Department: LIVING & HEALTHCARE DEPARTMENT	
Mobile: N/A	Direct tel.: 03-4306-5203
E-mail: oshu_hayashi@toyota-tsusho.com	Direct fax: 03-4306-8883



Signature of the nominated focal point:

Name: Shintaro Morita

Specimen signature:

Date: 25/5/2018



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.