JCM Modalities of Communication Statement Form

Section 1: Project description		
Title of the project	Installation of Tribrid System to mobile communication's Base	
1. Company (1. Com	Transceiver Stations in Republic of Indonesia	
Country	Indonesia	
Date of Submission	24/01/2018	

Section 2: Nomination of focal point entity(ies)			
Name of entity: KDDI CORPORATION	V		
Address (incl. postcode): GARDEN AIR TOV	VER, 3-10-10, Iidabashi, Chiyoda-ku,		
Tokyo 102-8460, Japna			
Telephone: N/A	Fax: N/A		
E-mail: N/A	Website:		
D-man, 14/1	http://www.kddi.com/english		
Primary authorised signatory:	Mr. Ms.		
Last name: Ito	First name: Keiji		
Title: Head of Global ICT Business Division			
Specimen signatur	Date: dd/mm/yyyy		
	12/01/2018 Mr. ⊠ Ms. □		
Alternate authorised signatory:	Mr. 🛛 Ms. 🗌		
Last name: Hiroshi	First name: Uchida		
Title: General Maneger of Global ICT Business	Promotion Department		
Specimen signature:	Date: dd/mm/yyyy		
	/2/01/20/8 Mr. ⊠ Ms. □		
Contact person:	Mr. 🛛 Ms. 🗌		
Last name: Youichi	First name: Iriuchijima		
Title: Senior Manager of Global ICT Business Pr	romotion Department		
Department: Global ICT Business Promotion De	partment		
Mobile: +81 80 5943-9608	Direct tel.: +81 3-6678-0872		
E-mail: yo-iriuchijima@kddi.com	Direct fax: +81 3-6678-0230		
Is this entity changing its name? LECTION ATTOM ATTOM Is the entity also a project participant?	Yes		
Is this entity changing its name? LECTION FOR THIS STANDARD 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		
*Tables should be added, if more than one foo	cal points are	designated.	1145
Section 3: Third-party entity (TPE)			
Name of the TPE that conducts validation	JAPAN	QUALITY	ASSURANCE
(and verification) for the project:	ORGANIZATION		

Mr. 🖂

First name: Koichiro

Telephone: +81-3-4560-5527

Ms.

Address (incl. postcode): 1-25, Kandasudacho, Chiyoda-ku, Tokyo 101-8555, Japan

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

^{*}Rows may be added, as needed

E-mail: tanabe-koichiro@jqa.jp

Department: Global Environment Department

Contact person: Last name: Tanabe

Title: Manager

^{*}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(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	Installation of Tribrid System to mobile communication's Base		
	Transceiver Stations in Republic of Indonesia		
Country	Indonesia		
Project reference number:	ID016		
Date of Submission	26 /10/2018		

Section 2: Addition/change of name of a project participant		
Add project participant		
Change name of project participant (if selected, i	ndicate former na	me below)
The following entity is hereby added as a project pa	rticipant or is new	vly named in respect of
the above project. By providing a specimen signatur	e below, the proje	ect participant confirms
its acceptance of the current modalities of communic	ation.	
Name of entity:		
Address (incl. postcode):		
Former name of project participant (if applicable)):	
Telephone:	Fax:	
E-mail:	Website:	
Primary authorised signatory:	Mr.	Ms.
Last name:	First name:	
Title:		
Specimen signature:		Date: dd/mm/yyyy
		3.6 C
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 po	pint:
Name:	
Specimen signature:	Date: dd/mm/yyyy
	ry withdrawal of project participants
"	s a project participant in the above project and hereby
confirms its voluntary consent to be re	emoved.
Name of authorised signatory:	Mr. Ms.
Last name:	First name:
Title:	riist name.
	Y 4. 15/
Specimen signature:	Date: dd/mm/yyyy
*Rows may be added, as needed	
Signature of the nominated focal po	int:
Name:	
Specimen signature:	Date: dd/mm/yyyy
	ails (project participants or focal point entity(ies))
	project participant/focal point entity in respect of the
_ ' '	following changes to its contact details:
Project participant	
Focal point	
Name of entity: KDDI CORF	
•	N AIR TOWER, 3-10-10, Iidabashi, Chiyoda-ku,
Tokyo 102-8460, Japan	7 7. 2 77.
Telephone: N/A	Fax: N/A
E-mail: N/A	Website:
	http://www.kddi.com/english

Primary authorised signatory:	Mr. 🖂	Ms.	
Last name: Shiozaki	First name: Yasuhiko		
Title: Administrative Officer, Head of Global IC	CT Business Div	vision	
Specimen signature:		Date: dd/mm/yyyy	
		26/10/2018	
Alternate authorised signatory:	Mr. 🖂	Ms.	
Last name: Nishimori	First name:	Katsuya	
Title: General Maneger, Director of Global ICT	Sales & Mark	eting Department	
Specimen signature:		Date: dd/mm/yyyy	
		26/10/2018	
Contact person:	Mr. 🛛	Ms.	
Last name: Imanari	First name:	Hiromi	
Title: Senior Manager			
Department: Global ICT Sales & Marketing De	epartment		
Mobile: +81 80 5072 9593	Direct tel.: N	/ A	
E-mail: hi-imanari@kddi.com	Direct fax: +81 3 6678 0230		
*Rows may be added, as needed			
Signature of the nominated focal point:			
Name: Yasuhiko Shiozaki			
Specimen signature:		Date: dd/mm/yyyy	
		26/10/2018	
DISCLAIMER: Any new representative for a focal	point entity is re	ecognized 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 an	nd the focal poin	at are the same legal entity,	
with the same legal registration in the respective jun	risdiction.		

JCM Modalities of Communication Statement Form « 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	Installation of Tribrid System	to mobile communication's Base
	Transceiver Stations in Republi	c of Indonesia
Country	Indonesia	· · · · · · · · · · · · · · · · · · ·
Project reference number:	ID016	
Date of Submission	13 / 6 /2019	
Section 2: A	Addition/change of name of a pr	roject participant
Add project participant		
Change name of projec	t participant (if selected, indicate	former name below)
The following entity is her	eby added as a project participan	it or is newly named in respect of
		v, the project participant confirms
	t modalities of communication.	, the project participant commits
1		
1 76.7		
Name of entity:		
Address (incl. postcode):		
Address (incl. postcode):	articipant (if applicable):	
Address (incl. postcode): Former name of project p	articipant (if applicable): Fax:	
Address (incl. postcode):	- · ·	ite:
Address (incl. postcode): Former name of project p Telephone: E-mail:	Fax: Websi	ite:
Address (incl. postcode): Former name of project p Telephone:	Fax: Websi tory: Mr.	Ms
Address (incl. postcode): Former name of project p Telephone: E-mail: Primary authorised signa Last name:	Fax: Websi	Ms
Address (incl. postcode): Former name of project p Telephone: E-mail: Primary authorised signa Last name: Title:	Fax: Websi tory: Mr.	☐ Ms. ☐ name:
Address (incl. postcode): Former name of project p Telephone: E-mail: Primary authorised signa Last name:	Fax: Websi tory: Mr.	Ms
Address (incl. postcode): Former name of project p Telephone: E-mail: Primary authorised signa Last name: Title:	Fax: Websi tory: Mr.	☐ Ms. ☐ name:
Address (incl. postcode): Former name of project p Telephone: E-mail: Primary authorised signa Last name: Title:	Fax: Websi tory: Mr. [First i	Ms. name: Date: dd/mm/yyyy
Address (incl. postcode): Former name of project p Telephone: E-mail: Primary authorised signat Last name: Title: Specimen signature:	Fax: Websi tory: Mr. [First i	Ms. Date: dd/mm/yyyy Ms.
Address (incl. postcode): Former name of project p Telephone: E-mail: Primary authorised signal Last name: Title: Specimen signature: Alternate authorised signal	Fax: Websi tory: Mr. [First 1	Ms. Date: dd/mm/yyyy Ms.
Address (incl. postcode): Former name of project p Telephone: E-mail: Primary authorised signa Last name: Title: Specimen signature: Alternate authorised signa Last name:	Fax: Websi tory: Mr. [First 1	Ms. Date: dd/mm/yyyy Ms.

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
Specimen signature.	Date: dd/llilli yyyy
Section 3: Voluntary withdrawa	l of project participants
The following entity is registered as a project pa	rticipant in the above project and hereby
confirms its voluntary consent to be removed.	
Name of entity:	
Name of authorised signatory:	Mr. Ms.
Last name:	First name:
Title:	
Specimen signature:	Date: dd/mm/yyyy
dy)	
*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 I	
The following entity is an existing project partic	ipant/focal point entity in respect of the
above project and hereby requests the following cha	inges to its contact details:
Project participant	
☐ Focal point	
Name of entity: KDDI CORPORATION	
Address (incl. postcode): GARDEN AIR TOV	WER, 3-10-10, Iidabashi, Chiyoda-ku,
Tokyo 102-8460, Japan	
Telephone: N/A	Fax: N/A
E-mail: N/A	Website:
C-man; IV/A	http://www.kddi.com/english

Primary authorised signatory:	Mr. 🖂	Ms.	
Last name: Kimura	First name: l	Hiroyuki	
Title: Head, Global ICT Business Division			
Specimen signature:		Date: dd/mm/yyyy	
	***************************************	13/6/2019	
Alternate authorised signatory:	Mr. 🖂	Ms.	
Last name: Imai	First name: 1	Hiroshi	
Title: General Manager, Global ICT Sales Pla	nning Departmer	ıt	
Specimen signature:		Date: dd/mm/yyyy	
		010120	
		3/6/0019	
Contact person	Mr. 🛚	Ms. 🗌	
Last name: Morishita	First name: I	Hiroyasu	
Title: General Manager, Southeast Asian Bloc	Group		
Department: Global ICT Sales Planning Depa	rtment		
Mobile: +81 80 5991 9131	Direct tel.: N/	'A	
E-mail: hi-morishita@kddi.com	Direct fax: +81 3 6678 0230		
*Rows may be added, as needed			
Signature of the nominated focal point:			
Name: Yasuhiko Shiozaki			
Specimen signature:		Date: dd/mm/yyyy	
		13/6/2019	
		1.	
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			