



JCM Modalities of Communication Statement Form

Section 1: Project description	
Title of the project	Installation of Inverter-type Air Conditioning System, LED Lighting and Separate Type Fridge Freezer Showcase to Grocery Stores in Republic of Indonesia
Country	Republic of Indonesia
Date of Submission	15/09/2015

Section 2: Nomination of focal point entity(ies)	
Name of entity:	Lawson, Inc.
Address (incl. postcode):	East Tower, Gate City Osaki, 11-2, Osaki 1-chome, Shinagawa-ku, Tokyo, 141-8643 Japan
Telephone: +81-3-6420-5116	Fax: +81-3-5759-6905
E-mail: hiroyuki.matsutani@lawson.co.jp	Website: http://www.lawson.co.jp
Primary authorised signatory:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Uto	First name: Shinichirou
Title: Deputy Division Director, Franchisee Operation Support Division	
Specimen signature:	Date: 15/09/2015
	
Alternate authorised signatory:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Matsutani	First name: Hiroyuki
Title: Manager	
Specimen signature:	Date: 15/09/2015
	
Contact person:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Matsutani	First name: Hiroyuki
Title: Manager	
Department: Store Construction Department, Franchisee Operation Support Division	
Mobile: -	Direct tel.: +81-3-6420-5116
E-mail: hiroyuki.matsutani@lawson.co.jp	Direct fax: +81-3-5759-6905
USE THIS SECTION FOR POST-REGISTRATION	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, Japan	
Contact person:	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>
Last name: Tanabe	First name: Koichiro
Title: Project Manager	
Department: CDM Assessment Division, 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 MIDI UTAMA INDONESIA Tbk
(2)	
(3)	
(4)	
(5)	
(6)	

*Rows may be added, as needed

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