JCM Modalities of Communication Statement Form

Section 1: Project description		
Title of the project	Solar Power on Rooftop of School Building Project	
Country	Maldives	
Date of Submission	26 / 2 /2018	

Section 2: Nomination of focal point entity						
Name of entit	y: Pa	Pacific Consultants Co., Ltd.				
Address (incl.	Address (incl. postcode): 3-22 Kanda-Nishikicho, Chiyoda-ku, Tokyo 101-8462, Japan					
Telephone:		•		Fax:		
E-mail:				Webs	ite: http	s://www.pacific.co.jp/e/
Primary auth	orised signator	ry:		Mr.		Ms
Last name: V	Vatanabe			First name: Masamichi		
Title: Directo	r/Board Membe	er				
Specimen sign	natur			×	•	Date: 257/1/2018
Alternate aut	horised signato	ory:		Mr.		Ms.
Last name: N	Iizuno			First	name: ነ	Yoshihiro
Title: Genera	l Manager		**************	******************		
Specimen sig	nature:					Date: 25/1/2018
Contact pers	on:			Mr.		Ms. 🖂
Last name: Is	shibashi			First	name: N	Voriko
Title: Consult	tant		erroren ora en en en elemen			
Department:	Global Enviror	nment Departmen	t, Inter	nation	al Divis	ion
Mobile:		**************************************		Direct	t tel.:	
E-mail:				Direct	fax:	
TION FOR TRATION NS ONLY	Is this entity of	changing its name	i	Yes [No [[] (Forn	mer entity name:)
	Is the entity a participant?	lso a project	1	Yes [No [annanie en	
USE THIS SEC POST-REGIST SUBMISSION	participant, do	present it in its		Yes [No [

Section 3: Third-party entity (TPE)			
Name of the TPE that conducts validation Lloyd's Register Quality Assurance Limited			
(and verification) for the project:			
Address (incl. postcode): Queen's Tower	A, 10th Floor, 2-3-1, Minatomirai, Nishi-ku,		
Yokohama 220-6010, Japan			
Contact person: Mr. Ms. Ms.			
Last name: Chiba	First name: Michiaki		
Title: Climate Change Manager - Asia & Pacific			
Department: Climate Change & Sustainability			
E-mail: Telephone:			

Section 4: List of project participants other than nominated focal point entity		
	Name of project participant	
(1)	Villa Educational Services Private Ltd	
(2)	20 =	
(3)	The state of the s	
(4)		
(5)		
(6)	A.**	

^{*}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 focal point entity following project registration.

Section 1: Project details		
Title of the project	Solar Power on Rooftop of School Building Project	
Country	Maldives	
Project reference number:	MV001	
Date of Submission	05/02/2019	

☐ Add project participant ☐ Change name of project participant (if selected, indicate former name below) The following entity is hereby added as a project participant or is newly named in respect of the above project. By providing a specimen signature below, the project participant confirms its acceptance of the current modalities of communication. Name of entity: Address (incl. postcode): Former name of project participant (if applicable): Telephone: Fax: E-mail: Website: Purmary authorised signatory: Mr. ☐ Ms. ☐ Last name: First name: Title: Date: dd/mm/yyyy Afternate anthorised signatory: Mr. ☐ Ms. ☐ Last name: First name: Title: Date: dd/mm/yyyy Contact person: Mr. ☐ Ms. ☐ Ms. ☐ Last name: First name: Title: Department:	Section 2: Addition/change of nam-	e of a project	participant			
The following entity is hereby added as a project participant or is newly named in respect of the above project. By providing a specimen signature below, the project participant confirms its acceptance of the current modalities of communication. Name of entity:	Add project participant					
the above project. By providing a specimen signature below, the project participant confirms its acceptance of the current modalities of communication. Name of entity: Address (incl. postcode): Former name of project participant (if applicable): Telephone: E-mail: Website: Primary authorised signatory: Last name: Title: Specimen signature: Mr.	Change name of project participant (if selected,	☐ Change name of project participant (if selected, indicate former name below)				
its acceptance of the current modalities of communication. Name of entity: Address (incl. postcode): Former name of project participant (if applicable): Telephone: E-mail: Website: Primary authorised signatory: Mr.	The following entity is hereby added as a project pa	articipant or is	newly named in respect of			
Address (incl. postcode): Former name of project participant (if applicable): Telephone: E-mail: Website: Primary authorised signatory: Last name: Title: Specimen signature: Mr.	the above project. By providing a specimen signature	re below, the p	roject participant confirms			
Address (incl. postcode): Former name of project participant (if applicable): Telephone: E-mail: Website: Primary authorised signatory: Last name: Title: Specimen signature: Afternate authorised signatory: Last name: Title: Specimen signature: Mr.	its acceptance of the current modalities of communication.					
Former name of project participant (if applicable): Telephone: Fax: E-mail: Website: Primary authorised signatory: Mr.	Name of entity:					
Telephone: E-mail: Website: Primary authorised signatory: Last name: Title: Specimen signature: Mr.	Address (incl. postcode):					
E-mail: Primary authorised signatory: Last name: Title: Specimen signature: Alternate authorised signatory: Last name: Title: Specimen signature: Mr.	Former name of project participant (if applicable):				
Primary authorised signatory: Last name: Title: Specimen signature: Afternate authorised signatory: Last name: Title: Specimen signature: Mr.	Telephone:	Fax:				
Last name: Title: Specimen signature: Date: dd/mm/yyyy Alternate anthonised signatory: Last name: First name: Title: Specimen signature: Date: dd/mm/yyyy Contact person: Last name: First name: First name: Date: dd/mm/yyyy	E-mail:	Website:				
Title: Specimen signature: Alternate anthorised signatory: Last name: Title: Specimen signature: Date: dd/mm/yyyy Mr Ms Date: dd/mm/yyyy Contact person: Last name: First name: First name: Title: Title:	Primary authorised signatory:	Mr. 🗌	Ms.			
Specimen signature: Alternate authonised signatory: Last name: Title: Specimen signature: Date: dd/mm/yyyy Mr.	Last name:	First name:				
Alternate anthonised signatory: Last name: Title: Specimen signature: Date: dd/mm/yyyy Contast person: Last name: First name: First name: Title:	Title:					
Last name: Title: Specimen signature: Date: dd/mm/yyyy Contact person: Last name: First name: First name: Title:	Specimen signature:		Date: dd/mm/yyyy			
Last name: Title: Specimen signature: Date: dd/mm/yyyy Contact person: Last name: First name: First name: Title:						
Title: Specimen signature: Date: dd/mm/yyyy Contact person: Last name: Title:	- Company Comp	Mr.	Ms.			
Specimen signature: Contact person: Last name: Title: Date: dd/mm/yyyy Mr. Ms. First name: Title:		First name:				
Contagt person: Last name: First name: Title:	Title:	<u>.</u>	A A A A A A A A A A A A A A A A A A A			
Last name: First name: Title:	Specimen signature:		Date: dd/mm/yyyy			
Title:	Contact person:	Mr.	Ms. [
	Last name:	First name:				
Department:	Title:					
- 10	Department:					

Mobile:	Direct tel.:
E-mail:	Direct fax:
Signature of the nominated focal point:	
Name:	
Specimen signature:	Date: dd/mm/yyyy
Specimen significant	Date. dd/IIII/yyyy
Section 3: Voluntary withdrawa	
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
*Dovers move handled 1	
*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 (projec	t nouticinante on found naint outies
The following entity is an existing project participar	
project and hereby requests the following changes to	
Project participant	ons contact details.
Focal point	
Name of entity: Pacific Consultants Co., L	td
Address (incl. postcode): 3-22 Kanda-Nichikicho,	
Telephone:	Fax:
E-mail:	
Primary authorised signatory:	Website: https://www.pacific.co.jp/e/ Mr. Ms.
Last name: Shibazaki	First name: Koichiro
Title: General Manager	First name, Kolemio
Specimen signature:	Date:
	11/1/2019

Alternate authorised signatory:	Mr. 🛛	Ms.	
Last name: Nishihata	First name: A	kifumi	
Title: Manager			
Specimen signature:		Date:	
		Feb. 4, 2019	
Contact persons	Mr. 🗌	Ms. 🖂	
Last name: Tanaka	First name: R	isa	
Title: Consultant			
Department: Global Environment Section, Urban I	Development De	partment, Global	
Business Division	-		
Mobile: -	Direct tel.:		
E-mail:	Direct fax:		
*Rows may be added, as needed			
Signature of the nominated focal point:			
Name: Yoshihiro Mizuno			
Specimen signature:			
$\frac{\text{Vale:}}{4/2/2019}$			
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 juris	_		

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 focal point entity following project registration.

Section 1: Project details		
Title of the project	Solar Power on Rooftop of School Building Project	
Country	Maldives	
Project reference number:	MV001	
Date of Submission		

Section 2: Addition/change of nam	e 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 participant or is newly named in respect of the above project. By providing a specimen signature below, the project participant confirms			
its acceptance of the current modalities of communic	cation.		
Name of entity:			
Address (incl. postcode):	X		
Former name of project participant (if applicable			
Telephone:	Fax:		
E-mail:	Website:		
Primary authorised signatory:	Mr.		
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.		
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/mm/yyyy		
Section 3: Voluntary withdrawal			
The following entity is registered as a project par	ticipant in the above project and hereby		
confirms its voluntary consent to be removed.	2		
Name of entity:			
Name of authorised signatory:	Mr Ms		
Last name:	First name:		
Title:			
Specimen signature:	Date: dd/mm/yyyy		
V			
*Rows may be added, as needed			
Signature of the nominated focal point:			
Name:			
Specimen signature:	Date: dd/mm/yyyy		
	3,3,3		
*			
Section 4: Change of contact details (project			
The following entity is an existing project participan	nt/focal point entity in respect of the above		
project and hereby requests the following changes to	its contact details:		
Project participant			
Name of entity: Pacific Consultants Co., L	td.		
Address (incl. postcode): 3-22 Kanda-Nichikicho, Chiyoda-ku, Tokyo 101-8462, Japan			
Telephone:	Fax:		
E-mail:	Website: https://www.pacific.co.jp/e/		
Primary authorised signatory:	Mr. 🖂 Ms. 🗌		
Last name: Sasaki	First name: Kazuyoshi		
Title: Director of Project Management and Engineering Department			
Specimen signature:	Date: 01/10/2021		
	an increase of contrate of an area of the contrate of the cont		

Alternate authorised signatory:	Mr. 🖂	Ms. [
Last name: Nakano	First name: Ma	asaya	
Title: General Manager			
Specimen signature:		Date: 01/10/2021	
Contact person:	Mr. 🗌	Ms. 🖂	
Last name: Tran	First name: Th	i My Hanh	
Title: Consultant			
Department: Project Management and Engineering Department, Global Company			
Mobile: -	Direct tel.:		
E-mail:	Direct fax:		
*Rows may be added, as needed	k)	2	
Signature of the nominated focal point:			
Name: Akifumi Nishihata	·		
Specimen signature:		Date: 01/10/2021	
DISCLAIMER: Any new representative for a focal p	oint entity is reco	gnized to hold the same	
authority designated to him/her by the entity as that h	neld by the previo	us signatory.	
If a change to a project participant requested in this	section is also ap	plicable to a focal point	
entity, it is recognized that the project participant and	d the focal point a	re the same legal entity,	
with the same legal registration in the respective juris	sdiction.	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 focal point entity following project registration.

Section 1: Project details			
Title of the project	Solar Power on Rooftop of School Building Project		
Country	Maldives		
Project reference number:	MV001		
Date of Submission	19/09/2023		

Section 2: Addition/change of name	e 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 signature below, the project participant confirms				
its acceptance of the current modalities of communication.				
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			
Alternate authorised signatory:	Mr. Ms.			
Last name:	First name:			
Title:				
Specimen signature:	Date: dd/mm/yyyy			
Contact person:	Mr.			
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/yy	X/X/X/
Specimen signature.	Date. dd/mm/yy	ууу
onalies of the earlies of the earl		
Section 3: Voluntary withdra		2
The following entity is registered as a project	participant in the above project and he	reby
confirms its voluntary consent to be removed.		1.1
Name of entity:	nde and a stande and a standard	
Name of authorised signatory:	Mr. Ms.	
Last name:	First name:	
Title:	The transfer of the transfer o	1 4/1 1
Specimen signature:	Date: dd/mm/yy	ууу
*Dover may be added as used a		
*Rows may be added, as needed		1 3
Signature of the nominated focal point:		
Name:		
Specimen signature:	Date:	
Section 4. Change of several details (see		1182.01
Section 4: Change of contact details (pro		C 41
The following entity is an existing project parabove project and hereby requests the following		the
Project participant	changes to its contact details.	
Focal point		
Name of entity: Pacific Consultants Co.	Ltd	
Address (incl. postcode): 3-22 Kanda-Nichikich		
Telephone:	Fax:	
E-mail:	Website: https://www.pacific.co.jp/	/e/
Primary authorised signatory:	Mr. Ms.	<u> </u>
Last name: Sasaki	First name: Kazuyoshi	
Title: General Manager	Zarde amaree realty offin	1 ,41
	D-4-	
Specimen signature:	Date:	
	6/9/2	023

The state of the s				
Alternate authorised signatory:	Mr. Ms.			
Last name: Nose	First name: Daiki			
Title: Manager				
Specimen signature:	Date:			
	17. Aug. 2023			
Contact person:	Mr. Ms.			
Last name: Tran	First name: Hanh			
Title: Consultant				
Department: Sustainable Development Section, Project Management and Engineering				
Department, Global Company				
Mobile: -	Direct tel.:			
E-mail:	Direct fax:			
*Rows may be added, as needed				
Signature of the nominated focal point:				
Name: YoshihiroMizuno				
Specimen signotures.	Date:			
	6. Sept. 2023			
1 ± 2	6. 34.20)			
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.			
	d in this section is also applicable to a focal point			
	ipant and the focal point are the same legal entity,			

with the same legal registration in the respective jurisdiction.