# Mẫu 22

*(Phụ lục 10a ban hành kèm theo Thông tư số 17/2015/TT-BTNMT ngày 06 tháng 4 năm 2015   
của Bộ Tài nguyên và Môi trường)*

**Modalities of Communication Statement Form**

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| **Section 1: Project details** | |
| Title of the project |  |
| Country |  |
| Project reference number: |  |
| Date of Submission | dd/mm/yyyy |

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| **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 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: |
| 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 | | |

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| **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 signatory: | | **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 | | |

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| **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 entity: |  | |
| Address (incl. postcode): | | |
| 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**: |
| \*Rows may be added, as needed | | |
| **Signature of the nominated focal point:**  **Name:**  **Specimen signature:** **Date:** dd/mm/yyyy  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. | | |