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OPR STAFF USE ONLY

Date Application Received:	Date Application Reviewed:			
OPR Tracking Number:				
PART I: ENTITY APPLYING FOR LISTING				
Is this form being submitted by the Offset Project Operator (OPO) or by the Authorized Project Designee (APD)? OPO APD The person completing this form should be an OPO/APD employee. If the APD is submitting this form, the OPO should submit the form Designation of Authorized Project Designee simultaneously.				
Name of Person Submitting Form:				
Organization, if applicable:	Date Form Completed:			
Email Address:	Telephone Number:			
Mailing Address:	City/State/Zip Code:			
Physical Address (check if same as mailing):	City/State/Zip Code:			
PART II: OFFSET PROJECT INFORMATION				
Offset Project Name:	Offset Project Commencement Date:			
First Reporting Period Start Date:	First Reporting Period End Date:			
Indicate the Rice Growing Region(s) where the project is located: California Rice Growing Region Mid-South Rice Growing Region				

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	Dry Seeding Activity		ge in Preparation vest Activity	Alternate Wetting and Drying Activity
1				
2				
3				
4				
5				
6				
7				
Provide size (hectares) and dimensions for each field: Field Hectares Dimensions				
1				
2				
3				
4				
5				
6				
6 7				
	PART III: OPO/AP	D/TECHNICAL	. CONSULTANT INI	FORMATION
7	PART III: OPO/API	D/TECHNICAL	. CONSULTANT INI	FORMATION
7	-A: OPO		OPO's CITSS ID Nu	
7 ART III	-A: OPO			ımber:
ART III OPO Note Mailing	-A: OPO ame:		OPO's CITSS ID No	ımber:
7 ART III OPO National Mailing Physical	-A: OPO ame: Address:	mailing []):	OPO's CITSS ID No C A City/State/Zip Code	umber:

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Part III-B: A	APD (if applic	cable) 🗌 No	APD/Not A	pplicable
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OPO Name:	APD's CITSS ID Number:		
	C A		
Mailing Address:	City/State/Zip Code:		
Physical Address (check if same as mailing):	City/State/Zip Code:		
Contact Person:	Telephone Number:		
Email Address:			
PART III-C: TECHNICAL CONSULTANT (if appli	cable)		
OPO Name:	TC CITSS ID Number:		
	CA		
Mailing Address:	City/State/Zip Code:		
Physical Address (check if same as mailing):	City/State/Zip Code:		
Contact Person:	Telephone Number:		
Email Address:			
PART IV: OFFSET PROJECT LOCATION			
Street Address:	City/State/Zip:		
FIELD LOCATION	1		

FIELD LOCATION

Field	Latitude	Longitude	Parcel Number
1			
2			
3			
4			
5			
6			
7			

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Indicate whether the project takes place on:

	Type of Land	Yes	No
a.	Private lands		
b.	Public lands		
C.	Land that is owned by, or subject to an ownership or possessory interest of a Tribe		
d.	Land that is "Indian lands" of a Tribe, as defined by 25 U.S.C §81(a)(1)		
e.	Land that is owned by any person, entity, or Tribe, within the external borders of such Indian lands		

NOTE: If the project is located on c, d, or e above, attach a description and copies of documentation demonstrating that the land is owned by (or subject to an ownership or possessory interest of) a tribe or private entities.

PART V: CROP CYCLE

Provide the crop cycle pattern for each field during the baseline period:

Field	Crop Cycle Pattern
1	
2	
3	
4	
5	
6	
7	

PART VI: ATTACHMENTS

Provide the following as attachments:

- 1. A description of the field ownership and operational structures.
- 2. Copies of documentation (e.g., title report, lease, etc.) showing the OPO's legal authority to implement the offset project.
- 3. A diagram or map that illustrates the location and geocoordinates of each field.

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PART VII: OTHER QUESTIONS (GENERAL)

Have any GHG reductions associated with the offset project ever been registered with or claimed by another registry or program, or sold to a third party prior to our listing? No.			
Registry/Program:		Reporting Period(s):	
Vintage(s):		Credits Issued:	
2. Is this offset project being implemented and conducted as the result of any law, statute, regulation, court order, or other legally binding mandate? Yes No			
If yes,	explain below:		
	PART VIII: ATTESTATION	NS AND OPO SIGNAT	TURE
Initial:	I certify under penalty of perjury under the reductions and/or GHG removal enhance		California the GHG
		ing Period State Date:	to Crediting Period End Date:
	will be measured in accordance with the C Projects, June 25, 2015 and all informatio accurate, and complete.	-	
Initial:	I understand I am voluntarily participating in the California Greenhouse Gas Cap-and-Trade Program under title 17, article 5, and by doing so, I am now subject to all regulatory requirements and enforcement mechanisms of this program and subject myself to the jurisdiction of California as the exclusive venue to resolve any and all disputes arising from the enforcement of provisions in this article.		
Initial:	I understand that the offset project activity and implementation of the offset project must be in accordance with all applicable local, regional, and national environmental and health and safety laws and regulations that apply to the offset project location. I understand that offset projects are not eligible to receive ARB or registry offset credits for GHG reductions and GHG removal enhancements that are not in compliance with the requirements of the Cap-and-Trade Program.		
In signing this form, I certify under penalty of perjury of the laws of California that the information contained in this form is true, accurate, and complete. I further certify that I am an Account Representative of the Offset Project Operator (OPO).			
Printed	l Name:	Title:	
Signature: D		Date:	

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BACKGROUND

Section 95975 of the Cap-and-Trade Regulation describes the requirements and process for an Offset Project Operator (OPO) or Authorized Project Designee (APD) to list an offset project with an approved Offset Project Registry. This form is designed to help an OPO or APD fulfill the requirements of Section 95975 of the Cap-and-Trade Regulation and Chapter 7 of the Compliance Offset Protocol Rice Cultivation Projects, June 25, 2015, for listing a rice cultivation offset project. The information in the completed form should be submitted to the approved Offset Project Registry with which the OPO or APD would like their offset project listed.

WHERE TO SUBMIT INFORMATION CONTAINED IN THIS FORM

Complete the information on the form using your computer. Then either add an electronic signature to the form or print, sign, and scan the form. The completed and signed information and all supporting documentation should be submitted to the appropriate Offset Project Registry.

This form is also available from the CARB website at:

https://ww2.arb.ca.gov/our-work/programs/compliance-offset-program/offset-program-forms.

INSTRUCTIONS

PART I: ENTITY APPLYING FOR LISTING

- Indicate whether the Offset Project Operator (OPO) or Authorized Project Designee (APD) is submitting the information for project listing.
- Section 95975(a) of the Cap-and-Trade Regulation requires that the OPO and, if applicable, the APD must register with ARB for the Cap-and-Trade Program prior to listing a project. It also requires that neither the OPO nor APD is subject to any Holding Account restrictions imposed as part of an enforcement action. To register with CARB, visit the website for Compliance Instrument Tracking System Services (CITSS): https://www.wci-citss.org/
- List the name, phone, email address, and mailing and physical address of the person submitting the
 information. If the mailing and physical addresses are the same, check the box and leave the physical
 address fields blank. This person should be an employee of the OPO or APD, whichever entity is
 making the submission. The person submitting the information need not be the same person as the
 contact person listed for the OPO or APD in Part III and also need not be the person signing the form
 in Part VIII.
- The person submitting the information should indicate the date the form is completed.

PART II: OFFSET PROJECT INFORMATION

- Provide the name for the offset project. Indicate the offset project commencement date and the start and end dates of the first reporting period; approximations are acceptable if precise dates are unknown.
- Indicate the rice growing region in which the project is located.
- Indicate the rice cultivation project activities employed on each rice field. If there are more than seven
 fields the table can be expanded or an attachment, labeled Part II, with the required information can be
 included with the listing.
- Indicate the size in hectares and dimensions for each field. If there are more than seven fields the table can be expanded or an attachment, labeled Part II, with the required information can be included with the listing.

PART III: OPO/APD/TECHNICAL CONSULTANT INFORMATION

 Enter contact information for the Offset Project Operator (OPO), Authorized Project Designee (APD), and Technical Consultant for the offset project. Every project will have an OPO. If a project does not

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have an APD or Technical Consultant, mark the box indicating the project does not have an APD or Technical Consultant and leave the appropriate fields blank.

For the OPO and, if applicable, the APD and Technical Consultant, enter the entity's name, its CITSS ID number (if applicable), its mailing address, and the name, phone number, and e-mail address of a contact person for the entity. The CITSS ID is six characters in length, with two letters followed by four numbers (e.g., "CA1234"). DO NOT PROVIDE THE OPO's or APD's CONFIDENTIAL CITSS ACCOUNT NUMBER, which begins with the CITSS ID number followed by a hyphen and more numbers.

PART IV: OFFSET PROJECT LOCATION

- Provide the street address and latitude and longitude for the project.
- Provide the latitude, longitude and parcel number for each field in the project. If there are more than seven fields the table can be expanded or an attachment, labeled Part IV.1, with the required information can be included with the listing
- Identify the category of land the project takes place on. If the project takes place on any of the tribal lands provide an attachment, labeled Part IV.2, with the required documentation

PART V: CROP CYCLE

Provide the crop cycle pattern for each field during the baseline period (e.g., Rice Wheat, Rice, Wheat, Rice). If there are more than seven fields the table can be expanded or an attachment, labeled Part V, with the required information can be included with the listing

PART VI: ATTACHMENTS

- As required by the Compliance Offset Protocol Rice Cultivation Projects, June 25, 2015, provide on attached sheet(s) the following:
 - 1. A description of the field ownership and operation structure.
 - 2. Copies of documentation (e.g., title report, lease, etc.) showing the OPO's legal authority to implement the project.
 - 3. A diagram or map illustration the location and geocoordiantes of each field.

PART VII: OTHER QUESTIONS

- This part includes two questions, answer both questions.
- If the answer for the first question is "yes," provide further detail for the reductions claimed and/or credits that have been issued.
- If the answer for the second question is "yes," provide an explanation.

PART VIII: ATTESTATIONS AND OPO SIGNATURE

- Section 95975(c) of the Cap-and-Trade Regulation requires three attestations for listing an offset project. The required attestations are provided in this section. The person signing the form should initial each attestation (no typed or printed initials).
- The first attestation requires the applicant to provide the offset project name and the start and end
 dates of the crediting period to complete the statement. The offset project name should match the
 name entered in Part II. The dates for the Offset Project's crediting period must also be provided.
 Note that the dates provided in the attestation are for the crediting period, not for the first reporting
 period provided in Part II. The crediting period dates may be approximate if precise dates are not
 known.
- Section 95975(d) requires the attestations in Section 95975(c) to "be provided to an Offset Project Registry with the listing information, if being listed with an Offset Project Registry."
- The individual signing the document must be registered in CITSS as the OPO's Primary Account Representative or Alternate Account Representative. The individual signing the document may be an

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APD employee and/or representative; but to sign the document, the individual must be an Account Representative on the OPO's CITSS account.

• Provide the individual's signature, printed name, corporate title, and date signed.