

**MRR APPLICATION FOR ACCREDITATION OF VERIFICATION BODIES FOR GREENHOUSE
GAS EMISSIONS DATA REPORTS FORM**

ISD/PPMB-028 (REV. 12/2019) PAGE 1 OF 4

NOTE: Refer to the attached instructions for completing this form and definitions of terms.

PART I: GENERAL INFORMATION

Indicate the Type of Organization (select one):

<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Limited Partnership
<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Air District
<input type="checkbox"/> Other (Explain):		

Accreditation to be Issued to (Verification Body):	
Mailing Address:	
Physical Address (If Different From Above):	
Contact Name and Title:	Contact Email Address:
Contact Telephone Number:	Federal Employer ID:
Organization's Verification Website Address:	

PART II: VERIFICATION STAFF INFORMATION

Staff Name	Staff Duties
1.	
2.	
3.	
4.	
5.	

NOTE: A verification body must employ at least two verifiers that have been accredited as lead verifiers as specified in title 17, §95132(b)(2) and at least five total full-time staff.

**MRR APPLICATION FOR ACCREDITATION OF VERIFICATION BODIES FOR GREENHOUSE
GAS EMISSIONS DATA REPORTS FORM**

ISD/PPMB-028 (REV. 12/2019) PAGE 2 OF 4

**PART III: JUDICIAL PROCEEDINGS, ENFORCEMENT ACTIONS,
OR ADMINISTRATIVE ACTIONS EXPLANATION**

Has the Verification Body had any judicial proceedings, enforcement actions, or administrative actions filed against it in the previous five years? Yes No

If yes, list each proceeding/action and include the date it occurred, the court or administrative body that handled the matter, and a brief description of the matter. Attach additional information and explanations on separate paper and include with this application.

Date	Court/Administrative Body that Handled the Matter	Description of Matter

PART IV: LIST OF ATTACHMENTS

All items listed below are required with this application. This checklist is provided to remind the applicant of the requirements. All boxes should be checked and documentation attached.

- | | |
|---|---|
| <input type="checkbox"/> Professional Liability Insurance | <input type="checkbox"/> Staff Technical Training |
| <input type="checkbox"/> Identification of Services | <input type="checkbox"/> Organization Chart |
| <input type="checkbox"/> Internal Conflict of Interest Policy | |

PART V: SIGNATURE BLOCK

In signing this application, I certify under penalty of perjury under the laws of the state of California that the information contained in this application is true, accurate, and complete. If not personally listed as the applicant on this form, I further certify that I am duly authorized to represent and legally bind the applicant on all matters related to accreditation of the applicant as a verification body.

Signature:	Printed Name:
Title:	Date:

MRR APPLICATION FOR ACCREDITATION OF VERIFICATION BODIES FOR GREENHOUSE GAS EMISSIONS DATA REPORTS FORM

ISD/PPMB-028 (REV. 12/2019) PAGE 3 OF 4

INSTRUCTIONS

This application is for all verification bodies that wish to provide services for verification of Greenhouse Gas Emissions Data Reports. This application is to be used for accreditation. The signed completed form and all supporting documentation may be emailed to GHGverify@arb.ca.gov. Within 90 days of receiving your application for accreditation, California Air Resources Board (CARB) will notify you in writing that your application is complete or that your application requires additional specific information to be complete. You will be notified if your accreditation is approved or if additional information is required

PART I. GENERAL INFORMATION:

Accreditation to be Issued to (Verification Body): List your organization's name as it is to be listed on the Executive Order granting accreditation.

Type of Organization: Check the appropriate box.

Mailing Address: Provide the address, city, state, zip code and country.

Physical Address: Provide the physical address if different from the mailing address.

Contact Name and Title: Provide the name and title of your authorized contact. Your authorized contact is the person you authorize to represent your organization.

Contact Email Address: Provide the contact's email address.

Contact Telephone Number: Provide the contact's day-time phone number.

Federal Employer ID #: Provide your company's Federal Employer ID #.

Business Website Address: Provide your company's website address.

PART II. VERIFICATION STAFF INFORMATION:

Provide a list of the employees and subcontractors that will be providing verification services on behalf of the verification body. Briefly list each individual's duties. For individuals accredited by CARB, provide the respective accreditation numbers. For individuals that are not accredited by CARB, attach a description of each person's qualifications and include the following documentation: education, experience, professional licenses, and other pertinent information (example: training).

Note: A verification body must employ at least two verifiers that have been accredited as lead verifiers as specified in title 17, section 95132(b)(2) and at least five total full-time staff. If these or any other requirements are no longer met, the verification body must notify CARB within 30 days of no longer meeting the requirement and may request additional time to hire additional staff to meet the requirements of this section

PART III. JUDICIAL PROCEEDINGS, ENFORCEMENT, AND ADMINISTRATIVE ACTIONS:

In the table, include the date the proceeding/action was taken, the name of the court or administrative body that handled the matter, and a brief explanation as to the nature of each proceeding or administrative action. Attach documentation to substantiate your explanation.

PART IV. LIST OF ATTACHMENTS:

The verification body must attach documentation for each item listed below:

- Professional Liability Insurance: Documentation of a minimum of \$4 million US dollars of professional liability insurance must be attached. Neither general nor umbrella liability policies

MRR APPLICATION FOR ACCREDITATION OF VERIFICATION BODIES FOR GREENHOUSE GAS EMISSIONS DATA REPORTS FORM

ISD/PPMB-028 (REV. 12/2019) PAGE 4 OF 4

can be used for the professional liability insurance minimum. Acceptable liability insurance types may include E&O Liability, Professional & Pollution, and Architecture & Engineering Professional Liability.

- **Staff Technical Training:** The verification body must provide a demonstration that the body has procedures or policies to support staff technical training as it relates to verification, including CARB verifier training, on an ongoing basis.
- **Internal Conflict of Interest Policy/Mechanisms to Prevent Conflict of Interest (COI):** The verification body must provide documentation to demonstrate that it has policies and mechanisms in place to prevent conflicts of interest and to identify and resolve potential conflict of interest situations if they arise. For this application, the verification body must provide the following information:
 - Identification of services provided by the verification body, the industries that the body serves, and the locations where those services are provided;
 - A detailed organization chart that includes the verification body, its management structure and any related entities;
 - The verification body's internal conflict of interest policy that identifies activities and limits to monetary or non-monetary gifts that apply to all employees and procedures to monitor, assess, and notify ARB of potential conflicts of interest.

PART V. SIGNATURE BLOCK:

Signature: Provide your authorized contact's name, signature, and date of signature.

NOTE: The CARB Executive Officer may request additional information or documentation from an applicant or other persons or entities regarding the applicant's fitness for qualification, after receipt of the application materials.