

**CITSS KNOW YOUR CUSTOMER COMPLIANCE DOCUMENTATION WITH INDIVIDUAL
ATTESTATION FORM**

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Print Entity Name:

Individuals completing this form are submitting documentation meeting the Know Your Customer requirements pursuant to title 17, California Code of Regulations section 95834, directly to a Covered Entity or Opt-in Covered Entity. The documents submitted by the individual shall be retained by Covered Entity or Opt-in Covered Entity, and the California Air Resources Board (CARB) Executive Officer or his designated representative shall be permitted, at any time, to review and audit the documentation.

If you have questions regarding the completion of this form, please contact the Help Desk at 916-324-7659 or CACITSSHelpDesk@arb.ca.gov for assistance.

INDIVIDUAL ATTESTATION

I, hereby attest that I am employed by the Covered Entity listed below, (Covered Entity), and for purposes of the Cap-and-Trade Regulation, set forth in title 17, California Code of Regulations, section 95801, et seq. (Regulation) , I will be designated by Covered Entity as an account representative or Account Viewing Agent for Covered Entity. I further attest that I have submitted all information required pursuant to title 17, California Code of Regulations, section 95834 (KYC documentation) to Covered Entity, including that I have not been convicted of a felony in the United States within the previous five years, and that the information I submitted to the Covered Entity was true, accurate and complete. I further attest that, where applicable, the KYC documentation submitted to Covered Entity were notarized as required pursuant to title 17, California Code of Regulation section 95834. I attest under penalty of perjury under the laws of the State of California that the foregoing representations are true and correct.

Print Covered Entity Name:

Print Individual's Name:

Title:

Date:

Signature: