

Evaluation of Conflict of Interest for Low Carbon Fuel Standard Applications and Reports

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Email the completed form to LCFSVerify@arb.ca.gov

Part I: Verification Body Information

Verification Body Name:

Part II: Applicant/Regulated Entity Information

Company Name:	Company Address:
LCFS Company ID/FEIN Number:	Company Physical Address:
Contact Name:	Contact Telephone Number:
Contact Email Address:	
Application/Report Type and Data Quarter or Data Year (list all, as applicable):	

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Fuel Production Facility or Project Name, Physical Address, and LCFS Facility ID (list all, as applicable):

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Part III: Conflict of Interest Self-Assessment

Based on my assessment, I believe my verification body’s risk for potential COI is:
 Low Medium High

Attached	Previously Submitted	Attach the Following (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	Describe how you evaluated the scope of the Conflict of Interest (COI) review, including the applicant/regulated entity’s ownership, operational control, and authority to contract a verification body. See instructions.
<input type="checkbox"/>	<input type="checkbox"/>	Organizational Chart and Business Description. Attach an organizational chart of your verification body and any entities related to your verification body. Only submit once per year, unless changes occur.
<input type="checkbox"/>	<input type="checkbox"/>	Conflict of Interest Mitigation Plan for Medium Potential COI.

Part IV: Services with High or Medium Potential COI

Indicate whether any employee of the verification body, related entity, or subcontractor who is a member of the verification team, provided any of the following medium or high potential COI services to the regulated entity within the previous five years. These services also must be disclosed in Part III. See instructions for the definition of “member.” See §95503(b) through (d), and §95500(g).

High Potential COI (§95503(b)(1), §95503(b)(3), and (§95503(b)(4))

<p>The verification body and entity shared management staff or board of directors membership, or any of the senior management staff of the responsible entity were employed by the verification body, or vice versa. If yes, provide the following information in an attachment for each for each person and instance: name, verification body position title, entity position title, dates of overlap (MM/YYYY to MM/YYYY).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Any member of the verification body provided any type of monetary or non-monetary incentive to the entity to secure this verification services contract?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Any member of the verification body received any type of monetary or non-monetary incentive from the entity to influence verification documentation or findings.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Any member of the verification body or verification team provided verification services for the entity beyond the six-year limit and three-year rotation periods permitted in section 95500(g). If yes, attach the following information for each instance: name, description of verification services provided, and dates of service (MM/YYYY to MM/YYYY).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

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High Potential COI (cont., §95503(b)(2)(A) through (U))

Yes	No	Services Provided
<input type="checkbox"/> Yes	<input type="checkbox"/> No	A. Designing, developing, implementing, reviewing, or maintaining an information or data management system for data submitted pursuant to the LCFS Regulation or MRR unless the review was part of providing independent quality assurance audit services, attestation engagement services, providing validation or verification services pursuant to the U.S. EPA RFS or the EU RED, or third-party engineering reports pursuant to the U.S. EPA RFS;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	B. Developing CI or fuel transaction data or other greenhouse gas-related engineering analysis that includes facility-specific information;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	C. Designing or providing consultative engineering or technical services in the development and construction of a fuel production facility; or energy efficiency, renewable power, or other projects which explicitly identify greenhouse gas reductions as a benefit;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	D. Designing, developing, implementing, conducting an internal audit, consulting, or maintaining a greenhouse gas emissions reduction or greenhouse gas removal offset project as defined in the Cap-and-Trade Regulation and reported to the Executive Officer, or a project to receive LCFS project-based credits;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	E. Preparing or producing LCFS fuel pathway application or LCFS reporting manuals, handbooks, or procedures specifically for the responsible entity;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	F. Directly managing any health, environment or safety functions for the responsible entity;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	G. Any service related to development of information systems, or consulting on the development of environmental management systems is considered high COI except for systems that will not be part of the validation or verification process and except for accounting software systems;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	H. Verification services that are not conducted in accordance with, or equivalent to, §95503 requirements, unless the systems and data reviewed during those services, as well as the result of those services, will not be part of the verification process;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	I. Reporting pursuant to the LCFS Regulation, or uploading data for the Executive Officer, on behalf of the entity required to contract for verification services;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	J. Owning, buying, selling, trading, or retiring LCFS credits, RINs, or credits in any carbon market;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	K. Dealing in or being a promoter of credits on behalf of the responsible entity;

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Yes	No	Services Provided
<input type="checkbox"/> Yes	<input type="checkbox"/> No	L. Appraisal services of carbon or greenhouse gas liabilities or assets;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	M. Brokering in, advising on, or assisting in any way in carbon or greenhouse gas-related markets;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	N. Bookkeeping and other non-attest services related to accounting records or financial statements, excluding services and results of those services that will not be part of the validation or verification process;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	O. Appraisal and valuation services, both tangible and intangible;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	P. Any actuarially oriented advisory service involving the determination of amounts recorded in financial statements and related accounts;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Q. Any internal audit service that has been outsourced by the entity required to contract for verification services that relates to the entity's internal accounting controls, financial systems or financial statements, unless the result of those services will not be part of the verification or validation process;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	R. Fairness opinions and contribution-in-kind reports in which the verification or validation body has provided its opinion on the adequacy of consideration in a transaction, unless the resulting services will not be part of the verification or validation process;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	S. Acting as a broker-dealer (registered or unregistered), promoter or underwriter on behalf of the responsible entity;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	T. Any legal services;
<input type="checkbox"/> Yes	<input type="checkbox"/> No	U. Expert services to the entity required to contract for verification services, a trade or membership group to which the entity required to contract for verification services belongs, or a legal representative for the purpose of advocating the entity's interests in litigation or in a regulatory or administrative proceeding or investigation.

Medium Potential COI (§95503(d))

<p>The potential for a conflict of interest was deemed to be neither high nor low as specified in sections 95503(b) and 95503(c).</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>There are personal or familial relationships between the members of the verification body (including subcontractors of the verification team) and management or members of the entity. If yes, list names, titles, and relationships in an attachment.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

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Part V: Verification Teams

Team Members for Fuel Pathway Validation/Verification

Name of Validation/Verification Team Leader:
Is the team leader accredited as a Lead LCFS verifier for Fuel Pathways? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the team leader an employee of the verification body or a subcontractor? <input type="checkbox"/> Employee <input type="checkbox"/> Subcontractor
Will the team leader attend the site visit? <input type="checkbox"/> Yes <input type="checkbox"/> No
Independent Reviewer Name:
Is the independent reviewer accredited as a Lead LCFS verifier? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the independent reviewer an employee of the verification body? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are other accredited LCFS verifiers, technical experts, or verifiers-in-training expected to participate on the team? If yes, attach a list of the other team members. Include name, whether an employee or subcontractor, type of LCFS accreditation, and description of roles and responsibilities during this verification service, including whether they will attend the site visit. <input type="checkbox"/> Yes <input type="checkbox"/> No

Verification Team Members for Quarterly Fuel Transactions or CCS Reports

Name of Verification Team Leader:
Is the team leader accredited as a Lead LCFS verifier? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the team leader an employee of the verification body or a subcontractor? <input type="checkbox"/> Employee <input type="checkbox"/> Subcontractor
Will the team leader attend the site visit? <input type="checkbox"/> Yes <input type="checkbox"/> No
Independent Reviewer Name:
Is the independent reviewer accredited as a Lead LCFS verifier? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the independent reviewer an employee of the verification body? <input type="checkbox"/> Yes <input type="checkbox"/> No

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Are other accredited LCFS verifiers, technical experts, or verifiers-in-training expected to participate on the team? If yes, attach a list of the other team members. Include name, whether an employee or subcontractor, type of LCFS accreditation, and description of roles and responsibilities during this verification service, including whether they will attend the site visit.

Yes No

Verification Team Members for Petroleum-Based Fuel Reports

Name of Verification Team Leader:

Is the team leader accredited as an oil and gas systems specialist under MRR and Lead LCFS verifier?

Yes No

Is the team leader an employee of the verification body or a subcontractor?

Employee Subcontractor

Will the team leader attend the site visit?

Yes No

Independent Reviewer Name:

Is the independent reviewer accredited as a Lead LCFS verifier?

Yes No

Is the independent reviewer an employee of the verification body?

Yes No

Are other accredited LCFS verifiers, technical experts, or verifiers-in-training expected to participate on the team? If yes, attach a list of the other team members. Include name, whether an employee or subcontractor, type of LCFS accreditation, and description of roles and responsibilities during this verification service, including whether they will attend the site visit.

Yes No

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Part VI: Disclosure of Services

Has any member of the verification team, verification body, or a related entity engaged in services of any nature, other than CARB verification services, with the applicant/regulated entity, or its related entities in the last five years?

Yes No

If "Yes," attach the following information to assess low versus medium potential for conflict of interest.

Disclose each service provided to the applicant/regulated entity and its related entities in the last five years, current work, and any future work arrangements/contracts. Indicate those services listed under section 95503(c)(2) and (3) that do not require risk categorization. Exclude CARB LCFS verifications, since they are listed in Part IV. List the dates of service (MM/YYYY – MM/YYYY), the person's name providing the service, and the description and location of service. Include each member of the verification team, verification body, or a related entity that participated.

Fee disclosure is not required if you assess the COI risk as "medium" and submit a plan to avoid, neutralize, or mitigate the medium potential COI situation. If you assess the COI risk as "low," list the fee in U.S. dollars for each service and demonstrate the sum of the fees is less than 20 percent of the verification fees. Do not include fees for services listed under section 95503(c)(2) and (3).

Is the sum of disclosed fees, pursuant to section 95503(c), less than 20% of the fee for the proposed verification?

Yes No N/A

Part VII: Other Conflict of Interest Circumstances

Are there any other circumstances known to your verification body that could result in a potential COI? If yes, attach an explanation, including why this should not affect impartiality of verification services.

Yes No

Part VIII: Verification Body Authorization

I certify under penalty of perjury under the laws of the State of California the information provided in this COI submittal is true, accurate and complete. I further certify that I am duly authorized to represent and legally bind the verification body on all matters related to this form.

Name:

Title:

Signature:

Date:

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Instructions

Conflict of Interest (COI) and Notice of Verification Services (NOVS) information must be submitted prior to beginning verification services. The current version of these forms is provided on the Low Carbon Fuel Standard (LCFS) verification website and may be used by verification bodies to provide the required information for CARB review. You may submit one COI form and one NOVS form with multiple applications/report types only when the legal entity (company) is the same for all LCFS applications/report types being verified. For Fuel Pathway Applications/Reports, the legal entity is the fuel pathway applicant/holder. For Quarterly Fuel Transactions Reports for Alternative Fuels, the legal entity is the fuel reporting entity.

Additional submittals of this COI form may be necessary if an individual person or company is hired by the applicant/regulated entity to contract with the verification body on behalf of the applicant/regulated entity, pursuant to §95503(a). This form may also be used to assess emerging potential for COI during verification services and for a period of one year after the completion of verification services.

If the ownership and operational control structure of the applicant/regulated entity is not clear, request clarification from the applicant/regulated entity and then contact CARB with the information you have compiled. CARB staff will assist in determining the required scope of COI evaluation.

- You may submit ISD/PPMB-120 and ISD/PPMB-121 jointly or sequentially. Respond fully and in detail to all questions.
- If you have no prior relationship to the applicant/regulated entity, you may answer “no” or “does not apply,” but you must answer every question. Attach extra sheets as necessary.

Where to Submit the Form

Complete the form on your computer, then print, sign and scan the form. The completed signed form and all supporting documentation should be emailed to LCFSVerify@arb.ca.gov. In the email subject line, indicate what is being submitted, COI and/or NOVS, the entity’s Company LCFS ID, and the data year.

Example Subject Line: COI&NOVS-XXXXX-2020.

This form is available from the CARB website at <https://ww2.arb.ca.gov/lcfs-verification>.

Part I: Verification Body Information

Enter the verification body name.

Part II: Applicant/Regulated Entity Information

Enter information for the applicant/regulated entity.

List the report type(s) and data quarter(s) or data year(s) for which this COI form is submitted. Report types include:

- Fuel Pathway Application
- Annual Fuel Pathway Report
- Quarterly Fuel Transactions Report
- Crude Oil Quarterly and Annual Volumes Report
- Low-Complexity/Low-Energy-Use Refinery Report
- Refinery Investment Project Report
- Innovative Crude Project Report
- Renewable Hydrogen Project Report

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- Direct Air Capture with Carbon Capture and Sequestration
- Joint Applicant Data Report

“Data Year” for Fuel Pathway Applications is the year in which the application is submitted to CARB. “Data Year” for Annual Fuel Pathway Reports and Quarterly Fuel Transactions Reports is the calendar year before annual verification services must be completed. For example, fuel transactions occurring in 2020 must be verified by August 31, 2021 and the “Data Year” is 2020.

“Data Quarter” for a Quarterly Project Report is the quarter of operations for which credits are calculated (e.g., Q3 2020).

Part III: Conflict of Interest Self-Assessment

After reviewing this document, complete this self-evaluation. It is important to disclose all possible business or personal relationships that may introduce conflict. If the potential COI is high, your verification body will NOT be able to perform verification services for this entity. If the potential COI is medium, you MUST attach a mitigation plan to this COI form.

Be aware that the five-year period for assessing potential for high conflict of interest begins on the date the reporting entity first contracted for LCFS validation/verification and ends on the date the final verification statement is submitted.

1. Required to be submitted once per year unless changes occur. In the description of scope of conflict of interest self-assessment, include the entity’s organizational chart showing the business structure. For fuel pathway applications/reports, the legal entity is the fuel pathway applicant/holder. Note that a facility may be a separate company within a larger organization. For Quarterly Fuel Transactions Reports for Alternative Fuels, the legal entity is the fuel reporting entity. The relevant legal entity may extend to a parent company if the parent company selects or contracts with the verification body instead of at the facility/company level.
2. Required to be submitted once per year unless changes occur. Attach an organizational chart of your verification body and any entities related to your verification body. Include a brief description of the primary nature of the work performed by your verification body and any entities related to your verification body.
3. Required only if Medium Potential for Conflict is stipulated. A mitigation plan is a demonstration by the body that any individual who may be conflicted with the reporting entity to be verified is isolated from verification services. Medium conflict generally occurs between two individuals (one at the verification body and one at the facility) or between an individual and an organization. The mitigation plan should address §95503(d)(2), including:
 - A demonstration that any individuals (in the verification body, on the verification team, or subcontractors) with potential conflicts have been removed or insulated from the project.
 - An explanation of any changes to the verification body or verification team to remove the potential conflict of interest. Include organizational structure changes.
 - If applicable, the plan should explain how the amount and nature of work previously performed is such that any member of the verification team’s credibility and lack of bias should not be under question.

Part IV: Services with High or Medium Potential COI

Complete the information indicated. If your conflict is deemed “high,” your verification body *will not* be allowed to continue with verification services for this entity.

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Note: “Member” for the purposes of this section means any employee or subcontractor of the verification body or related entities of the verification body. “Member” also includes any individual with majority equity share in the verification body or its related entities. “Related entity” for the purposes of this section means any direct parent company, direct subsidiary, or sister company and only applies to entities related to the verification body. The scope of this assessment does not extend to entities related to the applicant/regulated entity.

Part V: Verification Teams

Indicate the individuals that will comprise the verification team. Ensure the appropriate accreditations are represented. At minimum, this must consist of a lead verifier and independent reviewer. For example, verification of fuel pathway applications/reports require a verifier accredited as a Lead LCFS Verifier for Fuel Pathways lead the verification team. A verifier accredited as a Lead LCFS Verifier for Fuel Pathways must also be present at the site visit. A technical expert may also be a part of the team as long as they do not perform verification services and are listed on the form. See Carbon Capture and Sequestration (CCS) Protocol section 4.3.2.4(b) for required competencies for CCS projects.

Part VI: Disclosure of Services

Note that disclosure of services provided extends beyond the applicant/regulated entity to its related entities. “Related entity” means any direct parent company, direct subsidiary, or sister company.

Part VII: Other Conflict of Interest Circumstances

Indicate any possible circumstance that could result in a COI between your verification body and the reporting entity. Where possible, indicate why this should not affect the verification.

Part VIII: Verification Body Authorization

This section is required. The individual signing this form must be authorized to sign a legally binding document on behalf of the verification body and is not required to be a CARB-accredited LCFS verifier.