




EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
	Date Findings Reviewed:	Date More Information Requested:	Date Findings Approved:	
PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc.			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods		EAOP Project ID#: CAR661	ARB Project ID# (if known): CAFR0001	
Name of Party Requesting Desk Review: Coastal Ridges LLC, a California Limited Liability Company				
Offset Project Data Report (Reporting Period) Start Date: 1 January 2005		Offset Project Data Report (Reporting Period) End Date: 31 December 2005		
<i>Note: A separate Early Action Desk Review Findings must be provided for each Offset Project Data Report (Reporting Period) for which an Early Action Verification Report and Offset Verification Statement is being reviewed.</i>				
Part III. DESK REVIEW FINDINGS				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Offset Project Data Report year?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If the verification body answered <u>no to any</u> of the three questions above, please do <u>not</u> sign the attestation in Part IV. Please provide a report to ARB that explains the reasons for your findings and provide your signature here in Part III.				
SIGNATURE:		PRINTED NAME:		
TITLE:		DATE:		
Part IV. VERIFICATION BODY ATTESTATION AND SIGNATURE				
If the verification body answered <u>yes to all</u> of the questions in Part III above, please provide your signature below.				
I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form.				
SIGNATURE:		PRINTED NAME: Stewart McMorro		

	
TITLE: ARB Lead Verifier (H2-12-111)	DATE: 25 September 2013


EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
	Date Findings Reviewed:	Date More Information Requested:	Date Findings Approved:	
PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc.			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods		EAOP Project ID#: CAR661	ARB Project ID# (if known): CAFR0001	
Name of Party Requesting Desk Review: Coastal Ridges LLC, a California Limited Liability Company				
Offset Project Data Report (Reporting Period) Start Date: 1 January 2006		Offset Project Data Report (Reporting Period) End Date: 31 December 2006		
<i>Note: A separate Early Action Desk Review Findings must be provided for each Offset Project Data Report (Reporting Period) for which an Early Action Verification Report and Offset Verification Statement is being reviewed.</i>				
Part III. DESK REVIEW FINDINGS				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Offset Project Data Report year?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If the verification body answered <u>no to any</u> of the three questions above, please do <u>not</u> sign the attestation in Part IV. Please provide a report to ARB that explains the reasons for your findings and provide your signature here in Part III.				
SIGNATURE:		PRINTED NAME:		
TITLE:		DATE:		
Part IV. VERIFICATION BODY ATTESTATION AND SIGNATURE				
If the verification body answered <u>yes to all</u> of the questions in Part III above, please provide your signature below.				
I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form.				
SIGNATURE:		PRINTED NAME: Stewart McMorrow		

	
TITLE: ARB Lead Verifier (H2-12-111)	DATE: 25 September 2013


EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
	Date Findings Reviewed:	Date More Information Requested:	Date Findings Approved:	
PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc.			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods		EAOP Project ID#: CAR661	ARB Project ID# (if known): CAFR0001	
Name of Party Requesting Desk Review: Coastal Ridges LLC, a California Limited Liability Company				
Offset Project Data Report (Reporting Period) Start Date: 1 January 2007		Offset Project Data Report (Reporting Period) End Date: 31 December 2007		
<i>Note: A separate Early Action Desk Review Findings must be provided for each Offset Project Data Report (Reporting Period) for which an Early Action Verification Report and Offset Verification Statement is being reviewed.</i>				
Part III. DESK REVIEW FINDINGS				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Offset Project Data Report year?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<i>If the verification body answered <u>no to any</u> of the three questions above, please do <u>not</u> sign the attestation in Part IV. Please provide a report to ARB that explains the reasons for your findings and provide your signature here in Part III.</i>				
SIGNATURE:		PRINTED NAME:		
TITLE:		DATE:		
Part IV. VERIFICATION BODY ATTESTATION AND SIGNATURE				
<i>If the verification body answered <u>yes to all</u> of the questions in Part III above, please provide your signature below.</i>				
I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form.				
SIGNATURE:		PRINTED NAME: Stewart McMorrow		

	
TITLE: ARB Lead Verifier (H2-12-111)	DATE: 25 September 2013


EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
	Date Findings Reviewed:	Date More Information Requested:	Date Findings Approved:	
PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc.			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods		EAOP Project ID#: CAR661	ARB Project ID# (if known): CAFR0001	
Name of Party Requesting Desk Review: Coastal Ridges LLC, a California Limited Liability Company				
Offset Project Data Report (Reporting Period) Start Date: 1 January 2008		Offset Project Data Report (Reporting Period) End Date: 31 December 2008		
Note: A separate Early Action Desk Review Findings must be provided for each Offset Project Data Report (Reporting Period) for which an Early Action Verification Report and Offset Verification Statement is being reviewed.				
Part III. DESK REVIEW FINDINGS				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Offset Project Data Report year?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If the verification body answered <u>no</u> to <u>any</u> of the three questions above, please do <u>not</u> sign the attestation in Part IV. Please provide a report to ARB that explains the reasons for your findings and provide your signature here in Part III.				
SIGNATURE:		PRINTED NAME:		
TITLE:		DATE:		
Part IV. VERIFICATION BODY ATTESTATION AND SIGNATURE				
If the verification body answered <u>yes</u> to <u>all</u> of the questions in Part III above, please provide your signature below.				
I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form.				
SIGNATURE:		PRINTED NAME: Stewart McMorro		

	
TITLE: ARB Lead Verifier (H2-12-111)	DATE: 25 September 2013


EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
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PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc.			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods		EAOP Project ID#: CAR661	ARB Project ID# (if known): CAFR0001	
Name of Party Requesting Desk Review: Coastal Ridges LLC, a California Limited Liability Company				
Offset Project Data Report (Reporting Period) Start Date: 1 January 2009		Offset Project Data Report (Reporting Period) End Date: 31 December 2009		
<i>Note: A separate Early Action Desk Review Findings must be provided for each Offset Project Data Report (Reporting Period) for which an Early Action Verification Report and Offset Verification Statement is being reviewed.</i>				
Part III. DESK REVIEW FINDINGS				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Offset Project Data Report year?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<i>If the verification body answered <u>no to any</u> of the three questions above, please do <u>not</u> sign the attestation in Part IV. Please provide a report to ARB that explains the reasons for your findings and provide your signature here in Part III.</i>				
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SIGNATURE:		PRINTED NAME: Stewart McMorro		

	
TITLE: ARB Lead Verifier (H2-12-111)	DATE: 25 September 2013


EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
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PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc.			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods		EAOP Project ID#: CAR661	ARB Project ID# (if known): CAFR0001	
Name of Party Requesting Desk Review: Coastal Ridges LLC, a California Limited Liability Company				
Offset Project Data Report (Reporting Period) Start Date: 1 January 2010		Offset Project Data Report (Reporting Period) End Date: 31 December 2010		
<i>Note: A separate Early Action Desk Review Findings must be provided for each Offset Project Data Report (Reporting Period) for which an Early Action Verification Report and Offset Verification Statement is being reviewed.</i>				
Part III. DESK REVIEW FINDINGS				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Offset Project Data Report year?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<i>If the verification body answered <u>no</u> to any of the three questions above, please do <u>not</u> sign the attestation in Part IV. Please provide a report to ARB that explains the reasons for your findings and provide your signature here in Part III.</i>				
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Part IV. VERIFICATION BODY ATTESTATION AND SIGNATURE				
<i>If the verification body answered <u>yes</u> to <u>all</u> of the questions in Part III above, please provide your signature below.</i>				
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SIGNATURE:		PRINTED NAME: Stewart McMorrow		

	
TITLE: ARB Lead Verifier (H2-12-111)	DATE: 25 September 2013


EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
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PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc.			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods		EAOP Project ID#: CAR661	ARB Project ID# (if known): CAFR0001	
Name of Party Requesting Desk Review: Coastal Ridges LLC, a California Limited Liability Company				
Offset Project Data Report (Reporting Period) Start Date: 1 January 2011		Offset Project Data Report (Reporting Period) End Date: 31 December 2011		
<i>Note: A separate Early Action Desk Review Findings must be provided for each Offset Project Data Report (Reporting Period) for which an Early Action Verification Report and Offset Verification Statement is being reviewed.</i>				
Part III. DESK REVIEW FINDINGS				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Offset Project Data Report year?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If the verification body answered <u>no to any</u> of the three questions above, please do <u>not</u> sign the attestation in Part IV. Please provide a report to ARB that explains the reasons for your findings and provide your signature here in Part III.				
SIGNATURE:		PRINTED NAME:		
TITLE:		DATE:		
Part IV. VERIFICATION BODY ATTESTATION AND SIGNATURE				
If the verification body answered <u>yes to all</u> of the questions in Part III above, please provide your signature below.				
I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form.				
SIGNATURE:		PRINTED NAME: Stewart McMorro		

	
TITLE: ARB Lead Verifier (H2-12-111)	DATE: 25 September 2013

EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
	Date Findings Reviewed:	Date More Information Requested:	Date Findings Approved:	
PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods		EAOP Project ID#: CAR661	ARB Project ID# (if known): CAFR0001	
Name of Party Requesting Desk Review: Coastal Ridges LLC, a California Limited Liability Company				
Offset Project Data Report (Reporting Period) Start Date: 1 January 2012		Offset Project Data Report (Reporting Period) End Date: 31 December 2012		
<i>Note: A separate Early Action Desk Review Findings must be provided for each Offset Project Data Report (Reporting Period) for which an Early Action Verification Report and Offset Verification Statement is being reviewed.</i>				
Part III. DESK REVIEW FINDINGS				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Offset Project Data Report year?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<i>If the verification body answered <u>no</u> to <u>any</u> of the three questions above, please do <u>not</u> sign the attestation in Part IV. Please provide a report to ARB that explains the reasons for your findings and provide your signature here in Part III.</i>				
SIGNATURE:		PRINTED NAME:		
TITLE:		DATE:		
Part IV. VERIFICATION BODY ATTESTATION AND SIGNATURE				
<i>If the verification body answered <u>yes</u> to <u>all</u> of the questions in Part III above, please provide your signature below.</i>				
I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form.				
SIGNATURE:		PRINTED NAME: Stewart McMorow		

	
TITLE: ARB Lead Verifier (H2-12-111)	DATE: 25 September 2013

EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
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PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc.			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods			EAOP Project ID#: CAR661	ARB Project ID# (if known): CAFR0001
Name of Party Requesting Desk Review: Coastal Ridges, LLC, a California Limited Liability Company				
Offset Project Data Report (Reporting Period) Start Date: 01 January 2013			Offset Project Data Report (Reporting Period) End Date: 31 December 2013	
<i>Note: A separate Early Action Desk Review Findings must be provided for each Offset Project Data Report (Reporting Period) for which an Early Action Verification Report and Offset Verification Statement is being reviewed.</i>				
Part III. DESK REVIEW FINDINGS				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Offset Project Data Report year?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<i>If the verification body answered no to any of the three questions above, please do not sign the attestation in Part IV. Please provide a report to ARB that explains the reasons for your findings and provide your signature here in Part III.</i>				
SIGNATURE:			PRINTED NAME:	
TITLE:			DATE:	
Part IV. VERIFICATION BODY ATTESTATION AND SIGNATURE				
<i>If the verification body answered yes to all of the questions in Part III above, please provide your signature below.</i>				
I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form.				
SIGNATURE:			PRINTED NAME: Stewart McMorrow	

	
TITLE: ARB Lead Verifier/Project Specialist (H2-12-111)	DATE: 05 May 2014

VO14023.00 ESI Willits Woods CAR661-ARB EA Desk Review Finding-final.doc
K pf 5/5/14f

EARLY ACTION DESK REVIEW FINDINGS				
ARB Staff Use Only	ARB Form Tracking Number:	Date Findings Received:	Date Findings Processed:	ARB Staff Use Only
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PART I. VERIFICATION BODY INFORMATION				
Verification Body Name: Environmental Services, Inc.			Verification Body ID Number: H2-12-002	
PART II. EARLY ACTION PROJECT INFORMATION				
Early Action Project Name: Willits Woods			EAOP Project ID#: CAR661	ARB Project ID#: CAFR0001
Name of Party Requesting Desk Review: Coastal Ridges, LLC, a California Limited Liability Company				
Reporting Period Start Date: 01 January 2014		Reporting Period End Date: 31 December 2014		
<i>Note: A separate Early Action Desk Review Findings must be provided for each reporting period being reviewed.</i>				
Part III. ATTACHMENT				
<input checked="" type="checkbox"/> Report Detailing the Desk Review Findings				
Part IV. DESK REVIEW FINDINGS SUMMARY				
1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Program?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification methodology?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable early action reporting period?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Part V. VERIFICATION BODY ATTESTATION AND SIGNATURE				
<i>If the verification body answered "No" to any of the three questions in Part IV, sign this form in Part V.A immediately below. If the verification body answered "Yes" to all three questions, provide the attestation in Part V.B.</i>				
Part V.A. LEAD VERIFIER SIGNATURE IF NOT CONCURRING				
SIGNATURE:		PRINTED NAME:		
TITLE:		DATE:		

Part V.B. LEAD VERIFIER ATTESTATION AND SIGNATURE IF CONCURRING

I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable early action reporting period.

ATTESTATION SIGNATURE:**PRINTED NAME:**

Jonathan Pomp

TITLE:

ARB Lead Verifier, #H2-14-188

DATE:

09 June 2015

Part V.C. SIGNATURE BY VERIFICATION BODY OFFICER

I concur with the findings in this form and certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form.

ATTESTATION SIGNATURE:**PRINTED NAME:**

Janice McMahon

TITLE:Sr.Vice President/Technical Director
Forestry, Carbon and GHG Services Division, ESI**DATE:**

09 June 2015

JAP/IPM/rb/VO14023.01 NCRM Willits CAFR0001-ARB 2014 Finding Form
K pf 6/9/15f

Email the information in this form to
ghgoffsetverification@arb.ca.gov