

APPLICATION FOR LISTING AN EARLY ACTION PROJECT				
ARB Staff Use Only	Date Application Received:	ARB Tracking Number:	Date Application Reviewed:	ARB Staff Use Only
<b>PART I. ENTITY SUBMITTING INFORMATION</b>				
Who is submitting this form, i.e., the Offset Project Operator (OPO), Authorized Project Designee (APD), or a holder of early action offset credits?				<input checked="" type="checkbox"/> OPO <input type="checkbox"/> APD <input type="checkbox"/> Holder
Notes:				
1. A holder of early action offset credits may apply to ARB for listing only if neither the OPO nor APD has listed or intends to list the project. 2. The person completing this form should be an employee of the OPO or APD or a holder of early action offset credits.				
OPO/APD/Holder Name:			CITSS ID Number (if known):	
Mailing Address (if different):			State:	Zip:
Street Address:			City:	State: Zip:
Person Completing Form:		Phone Number:	Email Address:	
<b>PART II. EARLY ACTION PROJECT INFORMATION</b>				
Early Action Project Name:			EAOP Project ID Number:	
Virginia Conservation Forestry Program - Rich Mountain			CAR696	
Location/Street Address:		City:	State:	Zip:
			VA	
Latitude:		Longitude:		
36.8948		-81.8974		
Offset Project Operator (OPO):		Authorized Project Designee (APD), if applicable:		
The Nature Conservancy		N/A		
Date Project Listed with EAOP:	Project Commencement Date:	Date of Early Action Quantification Methodology:		
10/01/2010	06/20/2002	08/31/2010		
Early Action Quantification Methodology:				
<input type="checkbox"/> CAR U.S. Livestock Project		Version: <input type="checkbox"/> 1.0 <input type="checkbox"/> 2.0 <input type="checkbox"/> 2.1 <input type="checkbox"/> 2.2 <input type="checkbox"/> 3.0		
<input type="checkbox"/> CAR Urban Forest Project		Version: <input type="checkbox"/> 1.0 <input type="checkbox"/> 1.1		
<input type="checkbox"/> CAR U.S. Ozone Depleting Substances Project		Version: <input type="checkbox"/> 1.0		
<input checked="" type="checkbox"/> CAR Forest Project		Version: <input type="checkbox"/> 2.1 <input type="checkbox"/> 3.0 <input type="checkbox"/> 3.1 <input checked="" type="checkbox"/> 3.2		
(CAR = Climate Action Reserve)				
<b>PART III. VERIFICATION BODIES</b>				
Provide the names of all verification bodies associated with the early action project.				
Name of Verification Body (1):		Name of Verification Body (2):		
Environmental Services Inc.				
Name of Verification Body (3):		Name of Verification Body (4):		
Name of Verification Body (5):		Name of Verification Body (6):		

**PART IV REPORTING PERIODS**

1.	Start Date of Reporting Period: 6/20/2002	End Date of Reporting Period: 12/31/2002	Vintage of Issued Credits: 2002
2.	Start Date of Reporting Period: 1/1/2003	End Date of Reporting Period: 12/31/2003	Vintage of Issued Credits: 2003
3.	Start Date of Reporting Period: 1/1/2004	End Date of Reporting Period: 12/31/2004	Vintage of Issued Credits: 2004
4.	Start Date of Reporting Period: 1/1/2005	End Date of Reporting Period: 12/31/2005	Vintage of Issued Credits: 2005
5.	Start Date of Reporting Period: 1/1/2006	End Date of Reporting Period: 12/31/2006	Vintage of Issued Credits: 2006
6.	Start Date of Reporting Period: 1/1/2007	End Date of Reporting Period: 12/31/2007	Vintage of Issued Credits: 2007
7.	Start Date of Reporting Period: 1/1/2008	End Date of Reporting Period: 12/31/2008	Vintage of Issued Credits: 2008
8.	Start Date of Reporting Period: 1/1/2009	End Date of Reporting Period: 12/31/2009	Vintage of Issued Credits: 2009
9.	Start Date of Reporting Period: 1/1/2010	End Date of Reporting Period: 12/31/2010	Vintage of Issued Credits: 2010
10.	Start Date of Reporting Period: 1/1/2011	End Date of Reporting Period: 12/31/2011	Vintage of Issued Credits: 2011

**PART V SIGNATURE**

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 duly authorized to represent and legally bind the Offset Project Operator (OPO), Authorized Project Designee (APD), or holder of Early Action Offset Credits on all matters related to this form.

SIGNATURE:

PRINTED NAME:  
Michael Lipford

TITLE:

Virginia State Director

DATE SIGNED:

7/24/13