

**APPLICATION FOR LISTING AN EARLY ACTION PROJECT**

<b>ARB Staff Use Only</b>	<b>Date Application Received:</b>	<b>ARB Tracking Number:</b>	<b>Date Application Reviewed:</b>	<b>ARB Staff Use Only</b>
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**PART I. ENTITY SUBMITTING INFORMATION**

**Who is submitting this form, i.e., the Offset Project Operator (OPO), Authorized Project Designee (APD), or a holder of early action offset credits?**

Notes:

- 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.
- 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

**OPO/APD/Holder Name:** [REDACTED] **CITSS ID Number (if known):** [REDACTED]

**Mailing Address (if different):** [REDACTED] **City:** [REDACTED] **State:** [REDACTED] **Zip:** [REDACTED]

**Street Address:** [REDACTED] **City:** [REDACTED] **State:** [REDACTED] **Zip:** [REDACTED]

**Person Completing Form:** [REDACTED] **Phone Number:** [REDACTED] **Email Address:** [REDACTED]

**PART II. EARLY ACTION PROJECT INFORMATION**

**Early Action Project Name:** Hidden View Dairy **EAOP Project ID Number:** CAR 489

**Location/Street Address:** 1498 W. State Road 14 **City:** Rensselaer **State:** IN **Zip:** 47978

**Latitude:** 41.0276 **Longitude:** -87.0750

**Offset Project Operator (OPO):** Environmental Credit Corp. **Authorized Project Designee (APD), if applicable:**

**Date Project Listed with EAOP:** 08/28/2009 **Project Commencement Date:** 01/01/2007 **Date of Early Action Quantification Methodology:** 9/29/2010

**Early Action Quantification Methodology:**

CAR U.S. Livestock Project **Version:**  1.0  2.0  2.1  2.2  3.0  
 CAR Urban Forest Project **Version:**  1.0  1.1  
 CAR U.S. Ozone Depleting Substances Project **Version:**  1.0  
 CAR Forest Project **Version:**  2.1  3.0  3.1  3.2

(CAR = Climate Action Reserve)

**PART III. VERIFICATION BODIES**

*Provide the names of all verification bodies associated with the early action project.*

**Name of Verification Body (1):** SES, Inc. **Name of Verification Body (2):**

**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: 6/1/2009	End Date of Reporting Period: 12/31/2009	Vintage of Issued Credits: 2009
2.	Start Date of Reporting Period: 1/1/2010	End Date of Reporting Period: 12/31/2010	Vintage of Issued Credits: 2010
3.	Start Date of Reporting Period: 1/1/2011	End Date of Reporting Period: 12/31/2011	Vintage of Issued Credits: 2011
4.	Start Date of Reporting Period: 1/1/2012	End Date of Reporting Period: 12/31/2012	Vintage of Issued Credits: 2012
5.	Start Date of Reporting Period:	End Date of Reporting Period:	Vintage of Issued Credits:
6.	Start Date of Reporting Period:	End Date of Reporting Period:	Vintage of Issued Credits:

**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: Derek Six
TITLE: CEO		DATE SIGNED: 5/13/2013