

APPLICATION FOR LISTING AN EARLY ACTION PROJECT

ARB Staff Use Only	ARB Project ID Number:	ARB Form Tracking Number:	Date Application Received:	ARB Staff Use Only
	Date Application Processed:	Date Application Reviewed:	Date Application Approved:	

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 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: The B6 Dairy Farm BioFactory(R) Project EAOP Project ID Number: CAR593

Location/Street Address: 3350S & 2350E City: Jerome State: ID Zip: 83338

Latitude: [REDACTED] Longitude: [REDACTED]

Offset Project Operator (OPO): Cargill, Inc. Authorized Project Designee (APD), if applicable:

Date Project Listed with EAOP: 02/24/2012 Project Commencement Date: 07/16/2009 Date of Early Action Quantification Methodology: 08/20/2008

Early Action Quantification Methodology:

<input checked="" type="checkbox"/> CAR U.S. Livestock Project Version:	Version:	<input type="checkbox"/> 1.0	<input type="checkbox"/> 2.0	<input checked="" 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 type="checkbox"/> CAR Forest Project Version:		<input type="checkbox"/> 2.1	<input type="checkbox"/> 3.0	<input type="checkbox"/> 3.1	<input type="checkbox"/> 3.2	
<input type="checkbox"/> CAR Coal Mine Methane Project Version:		<input type="checkbox"/> 1.0	<input type="checkbox"/> 1.1			
<input type="checkbox"/> VCS VMR0001*						
<input type="checkbox"/> VCS VMR0002*						

(*Note: See instructions for full name.)
 (CAR = Climate Action Reserve; VCS = Verified Carbon Standard)

PART III. VERIFICATION BODIES

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

Name of Verification Body (1): First Environment 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

Provide below each reporting period for the early action project which have been issued early action credits.

	Reporting Period Start Date:	Reporting Period End Date:	Vintage Year(s) of Issued Credits:	Listing with ARB? (New, Previous, No)
1.	01/01/2010	12/31/2010	2010	<input checked="" type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
2.	01/01/2012	12/31/2012	2012	<input checked="" type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
3.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
4.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
5.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
6.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
7.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
8.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
9.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
10.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
11.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
12.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
13.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No

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: Christopher Schaffer
TITLE: Trader	DATE SIGNED: 10/13/2014

APPLICATION FOR LISTING AN EARLY ACTION PROJECT

ARB Staff Use Only	ARB Project ID Number:	ARB Form Tracking Number:	Date Application Received:	ARB Staff Use Only
	Date Application Processed:	Date Application Reviewed:	Date Application Approved:	

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 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: The B6 Dairy Farm BioFactory(R) Project EAOP Project ID Number: CAR593

Location/Street Address: 3350S & 2350E City: Jerome State: ID Zip: 83338

Latitude: Longitude:

Offset Project Operator (OPO): Cargill, Inc. Authorized Project Designee (APD), if applicable:

Date Project Listed with EAOP: 02/24/2012 Project Commencement Date: 07/16/2009 Date of Early Action Quantification Methodology: 08/20/2008

Early Action Quantification Methodology:

<input checked="" type="checkbox"/> CAR U.S. Livestock Project Version:	<input type="checkbox"/> 1.0 <input type="checkbox"/> 2.0 <input checked="" 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 type="checkbox"/> CAR Forest Project Version:	<input type="checkbox"/> 2.1 <input type="checkbox"/> 3.0 <input type="checkbox"/> 3.1 <input type="checkbox"/> 3.2
<input type="checkbox"/> CAR Coal Mine Methane Project Version:	<input type="checkbox"/> 1.0 <input type="checkbox"/> 1.1
<input type="checkbox"/> VCS VMR0001*	
<input type="checkbox"/> VCS VMR0002*	

(*Note: See Instructions for full name.)
 (CAR = Climate Action Reserve; VCS = Verified Carbon Standard)

PART III. VERIFICATION BODIES*Provide the names of all verification bodies associated with the early action project.*

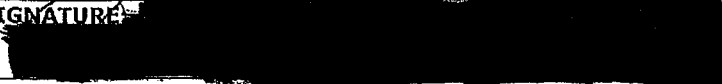
Name of Verification Body (1): First Environment Inc.	Name of Verification Body (2):
Name of Verification Body (3):	Name of Verification Body (4):
Name of Verification Body (5):	Name of Verification Body (6):

PART IV. REPORTING PERIODS*Provide below each reporting period for the early action project which have been issued early action credits.*

	Reporting Period Start Date:	Reporting Period End Date:	Vintage Year(s) of Issued Credits:	Listing with ARB? (New, Previous, No)
1.	01/01/2013	12/31/2013	2013	<input checked="" type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
2.				<input checked="" type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
3.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
4.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
5.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
6.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
7.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
8.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
9.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
10.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
11.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
12.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
13.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No

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: Christopher Schaffer
TITLE: Trader	DATE SIGNED: 04/07/2015

APPLICATION FOR LISTING AN EARLY ACTION PROJECT

ARB Staff Use Only	ARB Project ID Number:	ARB Form Tracking Number:	Date Application Received:	ARB Staff Use Only
	Date Application Processed:	Date Application Reviewed:	Date Application Approved:	

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 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: The B6 Dairy Farm BioFactory(R) Project EAOP Project ID Number: CAR593

Location/Street Address: 3350S & 2350E City: Jerome State: ID Zip: 83338

Latitude: Longitude:

Offset Project Operator (OPO): Cargill, Inc. Authorized Project Designee (APD), if applicable:

Date Project Listed with EAOP: 02/24/2012 Project Commencement Date: 07/16/2009 Date of Early Action Quantification Methodology: 08/20/2008

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 Coal Mine Methane Project Version: 1.0 1.1

VCS VMR0001*

VCS VMR0002*

(*Note: See instructions for full name.)
 (CAR = Climate Action Reserve; VCS = Verified Carbon Standard)

PART III. VERIFICATION BODIES

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

Name of Verification Body (1): First Environment 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

Provide below each reporting period for the early action project which have been issued early action credits.

	Reporting Period Start Date:	Reporting Period End Date:	Vintage Year(s) of Issued Credits:	Listing with ARB? (New, Previous, No)
1.	01/01/2014	12/31/2014	2014	<input checked="" type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
2.				<input checked="" type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
3.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
4.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
5.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
6.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
7.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
8.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
9.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
10.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
11.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
12.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No
13.				<input type="checkbox"/> New <input type="checkbox"/> Prev. <input type="checkbox"/> No

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: Christopher Schaffer
TITLE: Trader <i>TRADER.</i>	DATE SIGNED: 07/10/2015