State of California
California Environmental Protection Agency
California Air Resources Board
APPLICATION FOR LISTING AN EARLY ACTION PROJECT

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:

1. A holder of early action offset credits may apply to ARB for listing only if neither the OPO nor APD has listed 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

OPO/APD/Holder Name: ▓▓▓▓	CITSS ID Number (if known): ▓▓▓▓		
Mailing Address (if different):	City:	State:	Zip:
Street Address: ▓▓▓▓	City: ▓▓▓▓	State: ▓▓▓	Zip: ▓▓▓

Person Completing Form: ▓▓▓▓	Phone Number: ▓▓▓▓	Email Address: ▓▓▓▓

PART II. EARLY ACTION PROJECT INFORMATION

Early Action Project Name: Brook View Dairy		EAOP Project ID Number: CAR419	
Location/Street Address: 10560 Freeport Ave.	City: Freeport	State: MI	Zip: 49325
Latitude: 42.774546	Longitude: -85.319548		
Offset Project Operator (OPO): TerraPass Inc.	Authorized Project Designee (APD), if applicable:		

Date Project Listed with EAOP: April 17, 2009	Project Commencement Date: April 1, 2008	Date of Early Action Quantification Methodology: September 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):	Name of Verification Body (2):
SES, Inc.	LRQA Americas Sustainability, 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

	Reporting Period Start Date:	Reporting Period End Date:	Vintage Year of Issued Credits:	Submitted For ARB Offset Credit Issuance?
1.	1/1/2012	12/31/2012	2012	☒ Yes ☐ No
2.	1/1/2011	12/31/2011	2011	☒ Yes ☐ No
3.	1/1/2010	12/31/2010	2010	☐ Yes ☒ No
4.	1/1/2009	12/31/2009	2009	☐ Yes ☒ No
5.	10/1/2008	12/31/2008	2008	☐ Yes ☒ No
6.				☐ Yes ☐ 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: Erin Craig
TITLE: CEO	DATE SIGNED: August 28, 2013

APPLICATION FOR LISTING AN EARLY ACTION PROJECT

ARB Staff Use Only	Date Application Received:	ARB Tracking Number:	Date Application Reviewed:	ARB Staff Use Only

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:
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**

OPO/APD/Holder Name:	CITSS ID Number (if known):
▮▮▮▮▮▮▮	▮▮▮▮▮

Mailing Address (if different):	City:	State:	Zip:

Street Address:	City:	State:	Zip:
▮▮▮▮▮▮▮	▮▮▮▮▮	▮▮	▮▮▮

Person Completing Form:	Phone Number:	Email Address:
▮▮▮▮▮	▮▮▮▮▮	▮▮▮▮▮

PART II. EARLY ACTION PROJECT INFORMATION

Early Action Project Name:	EAOP Project ID Number:
Brook View Dairy	**CAR419**

Location/Street Address:	City:	State:	Zip:
10560 Freeport Ave.	**Freeport**	**MI**	**49325**

Latitude:	Longitude:
42.774546	**-85.319548**

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

Date Project Listed with EAOP:	Project Commencement Date:	Date of Early Action Quantification Methodology:
April 17, 2009	**April 1, 2008**	**September 29, 2010**

Early Action Quantification Methodology:

	Version:
☒ CAR U.S. Livestock Project	☐ 1.0 ☐ 2.0 ☐ 2.1 ☐ 2.2 ☒ 3.0
☐ CAR Urban Forest Project	☐ 1.0 ☐ 1.1
☐ CAR U.S. Ozone Depleting Substances Project	☐ 1.0
☐ CAR Forest Project	☐ 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):	Name of Verification Body (2):
SES, Inc.	**LRQA Americas Sustainability, Inc.**

Name of Verification Body (3):	Name of Verification Body (4):

Name of Verification Body (5):	Name of Verification Body (6):

SSD/CCPEB #59 (12/12)
Email information contained in this form to
ghgoffsetverification@arb.ca.gov
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PART IV: REPORTING PERIODS

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

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: Erin Craig
TITLE: CEO	DATE SIGNED: March 25, 2013

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:
1. A holder of early action offset credits may apply to ARB for listing only if neither the OPO nor APD has listed 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

OPO/APD/Holder Name:	CITSS ID Number (if known):

Mailing Address (if different):	City:	State:	Zip:

Street Address:	City:	State:	Zip:

Person Completing Form:	Phone Number:	Email Address:

PART II. EARLY ACTION PROJECT INFORMATION

Early Action Project Name:	EAOP Project ID Number:
Brook View Dairy	CAR419

Location/Street Address:	City:	State:	Zip:
10560 Freeport Ave.	Freeport	MI	49325

Latitude:	Longitude:
42.774546	-85.319548

Offset Project Operator (OPO):	Authorized Project Designee (APD), if applicable:
Origin Climate Inc.	n/a

Date Project Listed with EAOP:	Project Commencement Date:	Date of Early Action Quantification Methodology:
April 17, 2009	April 1, 2008	September 29, 2010

Early Action Quantification Methodology: **Version:**

☒ 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): SES, Inc.	Name of Verification Body (2): LRQA Americas Sustainability, 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

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.	1/1/2012	12/31/2012	2012	☐ New ☒ Prev. ☐ No
2.	1/1/2011	12/31/2011	2011	☐ New ☒ Prev. ☐ No
3.	1/1/2010	12/31/2010	2010	☒ New ☐ Prev. ☐ No
4.	1/1/2009	12/31/2009	2009	☐ New ☐ Prev. ☒ No
5.	10/1/2008	12/31/2008	2008	☐ New ☐ Prev. ☒ No
6.				☐ New ☐ Prev. ☐ No
7.				☐ New ☐ Prev. ☐ No
8.				☐ New ☐ Prev. ☐ No
9.				☐ New ☐ Prev. ☐ No
10.				☐ New ☐ Prev. ☐ No
11.				☐ New ☐ Prev. ☐ No
12.				☐ New ☐ Prev. ☐ No
13.				☐ New ☐ Prev. ☐ 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: Mark Mondik
TITLE: Managing Director	DATE SIGNED: May 15, 2015