

APPLICATION FOR LISTING AN EARLY ACTION PROJECT

ARB Staff Use Only	Date Application Received:	ARB Tracking Number:	Date Application Reviewed:	ARB Staff Use Only
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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: Double A Dairy EAOP Project ID Number: CAR 956

Location/Street Address: 305 County Line Road City: Jerome State: ID Zip: 83338

Latitude: 42°51'14.19"N Longitude: 114°28'18.88"W

Offset Project Operator (OPO): Camco International Group, Inc. Authorized Project Designee (APD), if applicable:

Date Project Listed with EAOP: 17 April 2012 Project Commencement Date: 22 December 2011 Date of Early Action Quantification Methodology: 29 September, 2010

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 type="checkbox"/> 2.1 <input type="checkbox"/> 2.2 <input checked="" 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

(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): Agri-Waste Technology, 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: 22 December 2011	End Date of Reporting Period: 21 December 2012	Vintage of Issued Credits: 2011, 2012
2.	Start Date of Reporting Period:	End Date of Reporting Period:	Vintage of Issued Credits:
3.	Start Date of Reporting Period:	End Date of Reporting Period:	Vintage of Issued Credits:
4.	Start Date of Reporting Period:	End Date of Reporting Period:	Vintage of Issued Credits:
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: Charles Purshouse
TITLE: Vice President	DATE SIGNED: 21 June 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?				<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):			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:	
Double A Dairy			CAR956	
Location/Street Address:		City:	State:	Zip:
305 County Line Road		Jerome	ID	83338
Latitude:		Longitude:		
42°51'14.19"N		114°28'18.88"W		
Offset Project Operator (OPO):		Authorized Project Designee (APD), if applicable:		
Camco International Group, Inc.				
Date Project Listed with EAOP:	Project Commencement Date:	Date of Early Action Quantification Methodology:		
17 April 2012	22 December 2011	29 September, 2010		
Early Action Quantification Methodology:				
<input checked="" type="checkbox"/> CAR U.S. Livestock Project <input type="checkbox"/> CAR Urban Forest Project <input type="checkbox"/> CAR U.S. Ozone Depleting Substances Project <input type="checkbox"/> CAR Forest Project (CAR = Climate Action Reserve)		Version: <input type="checkbox"/> 1.0 <input type="checkbox"/> 2.0 <input type="checkbox"/> 2.1 <input type="checkbox"/> 2.2 <input checked="" type="checkbox"/> 3.0 Version: <input type="checkbox"/> 1.0 <input type="checkbox"/> 1.1 Version: <input type="checkbox"/> 1.0 Version: <input type="checkbox"/> 2.1 <input type="checkbox"/> 3.0 <input type="checkbox"/> 3.1 <input type="checkbox"/> 3.2		
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):		
Agri-Waste Technology, 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: 22 December 2012	End Date of Reporting Period: 21 December 2013	Vintage of Issued Credits: 2012, 2013
2.	Start Date of Reporting Period:	End Date of Reporting Period:	Vintage of Issued Credits:
3.	Start Date of Reporting Period:	End Date of Reporting Period:	Vintage of Issued Credits:
4.	Start Date of Reporting Period:	End Date of Reporting Period:	Vintage of Issued Credits:
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	
<p>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.</p>	
SIGNATURE: 	PRINTED NAME: Charles Purshouse
TITLE: Vice President	DATE SIGNED: 2 July 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: Double A Dairy EAOP Project ID Number: CAR956

Location/Street Address: 305 County Line Road City: Jerome State: ID Zip: 83338

Latitude: 42.853942 Longitude: -114.471911

Offset Project Operator (OPO): Camco International Group, Inc. Authorized Project Designee (APD), if applicable:

Date Project Listed with EAOP: 04/17/2012 Project Commencement Date: 12/22/2011 Date of Early Action Quantification Methodology: 09/29/2010

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 type="checkbox"/> 2.1 <input type="checkbox"/> 2.2 <input checked="" 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): Agri-Waste Technology, 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.	12/22/2011	12/21/2012	2012	<input type="checkbox"/> New <input checked="" type="checkbox"/> Prev. <input type="checkbox"/> No
2.	12/22/2012	12/21/2013	2012, 2013	<input type="checkbox"/> New <input checked="" type="checkbox"/> Prev. <input type="checkbox"/> No
3.	12/22/2013	12/21/2014	2013, 2014	<input checked="" 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: Charles Purshouse
TITLE: Vice President	DATE SIGNED: 30 June 2015