

APPLICATION FOR LISTING AN EARLY ACTION PROJECT				
ARB Staff Use Only	ARB Project ID Number:	ARB Form Tracking Number:	Date Application Received:	
	Date Application Processed:	Date Application Reviewed:	Date Application Approved:	
<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? Notes: <ol style="list-style-type: none"> <li>A holder of early action offset credits may apply to ARB for listing only if neither the OPO nor APD has listed the project.</li> <li>The person completing this form should be an employee of the OPO or APD or a holder of early action offset credits.</li> </ol> <div style="float: right;"> <input checked="" type="checkbox"/> OPO  <input type="checkbox"/> APD  <input type="checkbox"/> Holder         </div>				
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:		
<b>PART II. EARLY ACTION PROJECT INFORMATION</b> Early Action Project Name: Windy Ridge Dairy <div style="float: right;">EAOP Project ID Number: CAR488</div>				
Location/Street Address: 1652 N. 1100 W.		City: Fair Oaks	State: IN	Zip: 47943
Latitude: 41.0378		Longitude: -87.2572		
Offset Project Operator (OPO): Environmental Credit Corp.		Authorized Project Designee (APD), if applicable:		
Date Project Listed with EAOP: 09/03/2009	Project Commencement Date: 02/01/2006	Date of Early Action Quantification Methodology: 09/29/2010		
<b>Early Action Quantification Methodology:</b> <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) <div style="float: right;">           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         </div>				

**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**

	Reporting Period Start Date:	Reporting Period End Date:	Vintage Year of Issued Credits:	Submitted For ARB Offset Credit Issuance?
1.	06/01/2009	12/31/2009	2009	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.	01/01/2010	12/31/2010	2010	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	01/01/2011	12/31/2011	2011	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	01/01/2012	12/31/2012	2012	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.				<input type="checkbox"/> Yes <input type="checkbox"/> No
6.				<input type="checkbox"/> Yes <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: Derek Six
TITLE: CEO	DATE SIGNED: 08/02/2013