

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: Farm Power Lynden Anaerobic Digester EAOP Project ID Number: CAR794

Location/Street Address: 8491 Bob Hall Road City: Lynden State: WA Zip: 98264

Latitude: 48.949645 Longitude: -122.554504

Offset Project Operator (OPO): The Climate Trust Authorized Project Designee (APD), if applicable: Farm Power Lynden LLC

Date Project Listed with EAOP: January 31, 2011 Project Commencement Date: January 1, 2011 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 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	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.	January 1, 2011	July 31, 2012	2011, 2012	<input type="checkbox"/> New <input type="checkbox"/> Prev. <input checked="" type="checkbox"/> No
2.	August 1, 2012	July 31, 2013	2012, 2013	<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: Bruce Griswold
TITLE: Director, Short Term Origination and Qualified Facility Contracts	DATE SIGNED: October 29, 2015