

LCFS Credit Transfer Form_10282011-v1

The Low Carbon Fuel Standard (LCFS) Credit Transfer Form is used by the Air Resources Board (ARB) to document and initiate transfers of LCFS credits between a Transferor (Seller) and a Transferee (Buyer). ARB will record the information herein and adjust the credit balances of both the Seller and Buyer after the form is received by ARB, as required under section 95488 of the LCFS Regulation.

Important: This form must be used and submitted each time a credit transfer agreement has been made, regardless of the number of credits transferred and the price per unit credit. Submit a Credit Transfer Form within 30 days of the actual trade. Only credits that have been "banked" in the LRT can be traded.

Instructions:

This LCFS Credit Transfer Form must be completed by the Seller and provided to the Buyer upon the transfer of a LCFS credit. The Buyer is responsible for submitting the form to ARB for timely account processing and recording.

The following information should be available prior to completing the form:

1. Seller and Buyer's organization names as they appear in the LCFS Reporting Tool.
2. Seller and Buyer's organization FEINs as they appear in the LCFS Reporting Tool.
3. Authorized representatives of both the Seller's and Buyer's organization (including name and contact information).
4. The number of credits transferred during a reporting period.

The information submitted is subject to ARB verification. The Seller and Buyer may be contacted by ARB to confirm the transactions reported.

Technical Requirements:

This form may be downloaded in Microsoft InfoPath format or in Microsoft Word format.

If InfoPath format is used, this form may be digitally signed below and submitted to ARB by clicking the button below. (You must have InfoPath to complete the form).

If Word format is used, this form should be completed, signed, and email as an attachment to Greg O'Brien at gobrien@arb.ca.gov with the subject heading LCFS Credit Transfer Form.

Submission instructions appear at the end of the form.

Section 1. Reporting Period

Enter the period in which the credit transfer is to be recorded.

2011 - Q1

2011 - Q2

- 2011 - Q3
- 2011 - Q4
- 2012 - Q1
- 2012 - Q2

Section 2. Transferor (Seller) Details

Enter the Seller's company name and FEIN as registered in the LCFS Reporting Tool.

Seller Company Name: Seller Company FEIN:

Enter all company representative(s) who participated in the credit transfer. If the credit transfer was mediated by a broker, please indicate "broker" and enter the broker's information below. At least one company representative is required.

(For InfoPath users, click "Add More Sellers" below to enter more names. Word users may attach additional names on a separate page).

Seller Representative: (First Name and Last Name)

Seller Phone Number: (123-456-7890)

Seller Email:

Broker (Check here if the Seller is being represented by a broker or other credit transfer facilitator)

Note: Brokers/facilitators must include submittal of a copy of authorization to act on behalf of the Buyer/Seller or both.

Section 3. Transferee (Buyer) Details

Enter the Buyer's organization name and FEIN as registered in the LCFS Reporting Tool.

Buyer Company Name: Buyer Company FEIN:

Enter all company representative(s) who participated in the credit transfer. If the credit transfer was mediated by a broker, please indicate "broker" and enter the broker's information below. At least one company representative is required.

(For InfoPath users, click "Add More Buyers" below to enter more names. Word users may attach additional names on a separate page).

Buyer Representative: (First Name and Last Name)

Buyer Phone Number: (123-456-7890)

Buyer Email:

Broker (Check here if the Seller is being represented by a broker or other credit transfer facilitator)

Note: Brokers/facilitators must include submittal of a copy of authorization to act on behalf of the Buyer/Seller or both.

Section 4. Credit Transfer Details

Enter the credit transfer information below. For multiple transfers between the Seller and Buyer, complete a separate form for each transfer.

Proposed Credit Transfer Date:

(mm/dd/yyyy)

Number of Credits Transferred: (in units of 1MT)

Average Price Per Unit Credit: (excluding any fees)

ID numbers of credits (if available through ARB) _____

Quarter in which credits were generated _____

Section 5. Review and Confirm

Review the information entered. Enter a signature for each Seller and Buyer listed in sections 2 and 3. By signing, each person below declares that all information provided herein are true and correct, and to the best of his/her knowledge and belief.

Note: The buyer and seller representatives need to have an account in the LRT and have "Signatory Authority" in the LRT in order to use the LCFS Credit Transfer Form. The regulated party LRT administrators can set up any representative of the company with this authority.

Seller Confirmation

Seller Representative Signature(s)

Signed Date

Buyer Confirmation

Buyer Representative Signature(s)

Signed Date

How to Submit This Form:

Sellers:

Upon agreement to transfer a credit, complete the form and provide a signed copy to the Buyer.

If you are using Microsoft InfoPath to fill out this form, you may digitally sign and date the form. ***You should save the form and email it to the Buyer as an attachment (do not change the file format of .xml).***

Alternatively, if you are using a Word version of the form, you will need to print the form, sign it, and provide the original copy to the Buyer.

Buyers:

Upon receiving the form, confirm the information provided by the Seller. If you received a Microsoft InfoPath version of the form, you may digitally sign the form and click the button below to email the form to ARB (you must also have InfoPath on your computer).

Alternatively, if you received a hard copy or Word version of the form from the Seller, you will need to sign it and email the form containing both the Seller and Buyer signatures.

Email the completed form attachment to Greg O'Brien gobrien@arb.ca.gov with the subject heading LCFS Credit Transfer Form.

For ARB Internal Use Only

Form ID:

Date Received: _____

Date Recorded: _____

Staff Name: