

Aggregator Designation Form

Instructions: This form is used by the Washington State Department of Ecology (Ecology) to approve the designation of a third-party aggregator by another party that is eligible to participate in the Clean Fuels Standard as a credit generator or regulated party. Ecology must approve the designation of an aggregator in order for the aggregator to report and generate credits or deficits on behalf of the company designating them. The information submitted is subject to Ecology verification. Both the designating organization and the aggregating organization must submit the signed and completed form to CFS@ecy.wa.gov. The aggregating organization must also upload the signed and completed form to WFRS-CBTS by visiting their Organization Profile and clicking “Add Designator(s)”.

Section 1. Designating Organization

Company Name: _____

Physical Address: _____

City: _____ State/Province: _____ Country: _____ Zip: _____

Check here if mailing address is the same as above

Mailing Address: _____

City: _____ State/Province: _____ Country: _____ Zip: _____

Legal Contact

If the designating organization does not have legal counsel, please list a person from the organization with authority to accept legal responsibility for the organization.

By checking this box and signing below, I acknowledge my role as the legal contact for the designating organization.

Name: _____ Title: _____

Telephone: _____ Email: _____ Fax: _____

Signature: _____ Date: _____

Primary Contact

Check here if the Primary Contact is the same as the Legal Contact above.

By checking this box and signing below, I acknowledge my role as the primary contact for the designating organization.

Name: _____ Title: _____

Telephone: _____ Email: _____ Fax: _____

Signature: _____ Date: _____

Organization Information

Organization is, or can be, registered in the CFS as a(n):

- Credit Generator
- Importer of Blendstocks
- Importer of Finished Fuels

Check boxes of fuels which will generate credits:

- Alternative jet fuel
- Clear gasoline
- Any blend of gasoline and ethanol
- Clear diesel
- Any blend of diesel and biodiesel or renewable diesel
- Biodiesel
- Ethanol
- Renewable diesel
- Renewable gasoline or its constituents
- Renewable naphtha
- Renewable propane
- Fossil CNG

- Bio-based CNG
- Fossil LNG
- Bio-based LNG
- LPG
- Bio-based LPG
- Electricity
- Hydrogen

Please check one of the boxes below, describe the nature of credit/deficit generation you are designating in the space provided below, and list the quarter and year designation begins:

- All credits/deficits are designated to the aggregating organization.
- A portion of credits/deficits are designated to the aggregating organization.

Nature of credit/deficit generation and/or portion of credits designated to the aggregating organization:

Quarter/Year Designation Begins: _____

Designating Organization Signature

By checking this box and signing below, I designate the aggregating organization to report on our behalf and understand that the submission of such reports may lead to the generation of credits or deficits that will be deposited in their WFRS-CBTS account. I also understand that this designation does not relieve our obligation to provide accurate information to the aggregating organization which relies upon factual, operational and technical data and information from the designating organization, and that we maintain our responsibility to ensure that the information provided to the designated aggregating organization on our behalf remain accurate. I further understand that if the aggregating organization is found in violation of Chapter 173-424 WAC, Ecology may also hold the designating organization responsible for those violations.

Name: _____ Title: _____

Telephone: _____ Email: _____ Fax: _____

Signature: _____ Date: _____



Section 2. Aggregating Organization

Company Name: _____

Company Webpage: _____

Physical Address: _____

City: _____ State/Province: _____ Country: _____ Zip: _____

Check here if mailing address is the same as above

Mailing Address: _____

City: _____ State/Province: _____ Country: _____ Zip: _____

Legal Contact

If the aggregating organization does not have legal counsel, please list a person from the organization with authority to accept legal responsibility for the organization.

By checking this box and signing below, I acknowledge my role as the legal contact for the aggregating organization.

Name: _____ Title: _____

Telephone: _____ Email: _____ Fax: _____

Signature: _____ Date: _____

Primary Contact

Check here if the Primary Contact is the same as the Legal Contact above.

By checking this box and signing below, I acknowledge my role as the primary contact for the aggregating organization.

Name: _____ Title: _____

Telephone: _____ Email: _____ Fax: _____

Signature: _____ Date: _____

Aggregating Organization Signature

By checking this box and signing below, I understand that I am accepting the designation to be the aggregating organization and accept the CFS responsibility as the Aggregator under WAC 173-424-140(3). I also understand that by submitting reports on behalf of the designating organization, we will generate the credits/deficits in our WFRS-CBTS account. Further, I understand that this designation transfers the obligation to keep records under WAC 173-424-400 to our organization and that we are responsible for ensuring that the reporting is accurate and will be responsible for those violations.

Name: _____ Title: _____

Telephone: _____ Email: _____ Fax: _____

Signature: _____ Date: _____

To request an ADA accommodation, contact Ecology by phone at 360-407-6831 or email at ecyADAcordinator@ecy.wa.gov, or visit <https://ecology.wa.gov/accessibility>. For Relay Service or TTY call 711 or 877-833-6341.

