



Greenhouse Gas Emissions Report Verification Program: Verification Body Application

This application is for a verification body that wants to provide services to verify greenhouse gas emissions reports as required by the Clean Air Rule (Chapter 173-442 WAC) and the Greenhouse Gas Reporting Rule (Chapter 173-441 WAC).

Submit this application with the required documentation. Ecology will notify you if your application is approved or if additional information is required. If you have questions about this form, contact car@ecy.wa.gov. You can download this form from www.ecology.wa.gov and search for this form.

1. Email completed application and required documentation to car@ecy.wa.gov.
2. Mail a signed copy of the completed application to:

Washington State Department of Ecology
 Air Quality Program
 Clear Air Rule Verification Program
 P.O. Box 47600
 Olympia, WA 98504-7600

Part I. General Information

Verification Body Name (as you want it listed on the Ecology website):

Type of Verification Body:

- Corporation
 Limited Liability Company
 Limited Partnership
 General Partnership
 Limited Liability Partnership
 Other (specify):

Mailing Address:

City:

State:

Zip Code:

Country:

Physical Address (if different from above):

Contact Name and Title (authorized representative):

Contact Email Address:

Contact Phone Number:

Verification Body's Website:

Part II. Additional Information

External Accreditations

If you answer no to both questions below, then email car@ecy.wa.gov for a special review.

Accredited in CARB's Mandatory Reporting of GHG Emissions Program: Yes No

If yes, attach supporting documentation:

Executive Order Number:

Accreditation Expiration Date:

Accredited in ANSI's Accreditation Program for GHG Validation/Verification Bodies: Yes No

If yes, attach supporting documentation:

Accreditation Number:

Accreditation Expiration Date:

Sector Accreditations: : None Manufacturing Power generation

Mining and mineral production Metals production Chemical production Waste

Oil and gas extraction, production, and refining, including petrochemicals

Verification Staff Information

List the employees and subcontractors who will provide verification services for the verification body. An organization must employ at least two lead verifiers. The first person listed below must be the contact person. All individuals listed below, including those not applying for verifier certification, must submit the "Greenhouse Gas Emissions Report Verification Program: Individual Application."

Staff Name	Role (verifier, lead verifier, other)	CARB Accreditation Number (if applicable)
(contact person listed in Part I)		

Judicial Proceedings, Enforcement Actions, or Administrative Actions

Has the verification body had any judicial proceedings, enforcement actions, or administrative actions filed against it in the past five years?

Yes No

If yes, fill in the table below and attach documentation to support your description of the matter.

Date	Court or administrative body that handled the matter	Brief description of the matter

List of Attachments

Check each box and attach the 5 items to this application.

 Professional Liability Insurance

Documentation of a minimum of \$4 million (U.S.) of professional liability insurance must be attached. General or umbrella liability policies cannot be used for the professional liability insurance minimum.

 Technical Training

The verification body must show that the body has procedures or policies to support staff technical training as it relates to verification.

Methods to Prevent Conflict of Interest

The verification body must document that it has policies and mechanisms in place to prevent conflicts of interest, and to identify and resolve potential conflict of interest situations if they arise:

 Identification of Services

Identification of services provided by the verification body, the industries that the body serves, and the locations where those services are provided

 Organization Chart

A detailed organization chart that includes the verification body, its management structure, and any related entities

 Internal Conflict of Interest Policy

The organization's internal conflict of interest policy that identifies activities and limits to monetary or non-monetary gifts that apply to all employees

Part III. Certification Statement

The contact person listed in Part I must complete this section.

I certify under penalty of perjury under the laws of the state of Washington that:

- The information contained in this application is true, accurate, and complete.
- I am authorized to represent and legally bind the applicant on matters related to Chapter 173-441 WAC.

Signature:

Date:

Printed Name:

Title:

To request ADA accommodation, call (360) 407-6800, 711 (relay service), or (877) 833-6341 (TTY).