

Washington State Climate Commitment Act

CITSS Request to Change Account Representatives/Account Viewing Agents Form

Form Number ECY 070-686



Publication Information

This document is available on the Department of Ecology's website at:
<https://apps.ecology.wa.gov/publications/summarypages/070686.html>

Contact Information

Air Quality Program

Ecology Headquarters

Phone: 360-407-6296

Email: CCAAuctions@ecy.wa.gov

Website: <https://ecology.wa.gov/About-us/Contact-us>

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CITSS Request to Change Account Representatives/ Account Viewing Agents Form

Use this form to request a change to:

- Primary Account Representative (PAR)
- Alternate Account Representatives (AARs)
- Account Viewing Agents (AVAs)

The PAR and AARs have the authority to represent the entity in CITSS and the Auction Platform. Account Viewing Agents can view entity account information but cannot make changes.

Changes to account representatives and viewing agents must have already been entered in CITSS and be pending Ecology approval. Replacement of the PAR, or the addition of new AARs or AVAs entered in CITSS will not become effective until this form authorizing the proposed change(s) is approved by Ecology. ***If you are solely proposing to swap the active PAR with an active AAR, you do not need to complete this form.***

An active account representative, current director or officer, and all proposed new account representatives and viewing agents must sign and date the attestations provided below.

Ecology accepts electronic signatures that meet the [Washington State Office of Chief Information Officer Electronic Signature Guidelines](#), which includes the following electronic signature types: digitized signatures, digital signatures, print and scan signatures.

Ecology requires all documents submitted electronically. You can submit forms electronically using one of these three options:

1. **DocuSign (recommended):** Email RegistrarCCA@ecy.wa.gov to request Ecology to send you the form to complete and sign through DocuSign. Include your **CITSS ENTITY ID** in the email.
2. **Box.com:** Upload completed and signed forms to Ecology's [Entity Account Management folder](#).
 - If the above link does not work, copy and paste the following URL into your browser: <https://ecy.app.box.com/f/cc6338ca1ba54a3ba2a8f20f0807dc6d>
 - Include your **CITSS ENTITY ID** in the filename.
3. **Email:** Send the completed and signed form to RegistrarCCA@ecy.wa.gov.
 - Ecology recommends users password protect files and encrypt the email.
 - After sending the email, call the CCA help desk at 360-407-6296 to provide the password.
 - Include your **CITSS ENTITY ID** in the filename.

If you have questions or need assistance submitting your form, contact Ecology staff at RegistrarCCA@ecy.wa.gov or call the CCA help desk at 360-407-6296.

Entity Account Information

CITSS Entity ID Number: _____

Legal name: _____

Operating name: _____

Section 1.0 Proposed Changes to Account Representatives and Viewing Agents

The following table is used to identify requested changes to the PAR, AARs, and AVAs. An account held by an individual market participant must have a PAR, but is not required to have an AAR as a second representative. All other entity accounts must have a PAR and at least one AAR. All accounts may designate up to four AARs and five AVAs.

Entity accounts must have a PAR at all times. When the user who is the current PAR is proposed to be retired or changed to another role, another user must be designated to replace the current PAR.

Complete the table by listing the names of all current and proposed representatives and viewing agents. It is only necessary to provide the 12-digit CITSS User Reference Code for individuals being added or changing roles.

Name	User Reference Code	Current Role	Role Change

Section 2: Washington Residency Information (if applicable)

This section applies to covered and opt-in entity accounts. Does the Primary Account Representative or at least one Alternate Account Representative have a primary address in Washington? This requirement does not apply to General Market Participant accounts. General Market Participants can select “not applicable.”

- 1. Yes, the Primary Account Representative or at least ONE Alternate Account Representative has a primary address in Washington.
- 2. No, none of the account representatives designated have a primary address in Washington.
- 3. Not applicable for General Market Participant accounts.

If you selected option 2, you must have a registered agent who resides in Washington, or have previously filed a foreign registration statement pursuant to RCW 23.95.510. See the Washington Secretary of State website for information on registered agents: <https://www.sos.wa.gov/corps/faq--registered-agents.aspx>. Identify your registered agent located in Washington by completing the additional information requested below. If you selected option 1, you do not need to identify a registered agent. If you have already shared your registered agent information with Washington Department of Ecology, you do not need to complete this section.

Name of Registered Agent: _____

Agent Address: _____

Agent City, State, Zip: _____

Section 3.0: Attestations for New Account Representatives (if applicable)

The following attestation page(s) must be completed by users who are added to an account as a Primary or Alternate Account Representative, which includes new users and Account Viewing Agents with a role change to PAR or AAR. Users with a current role of PAR or AAR do not need to complete this section.

This form provides a total of five Attestation Pages. In most cases, you will not need to use all five of the attestations. ***In Section 4 of this form, the Director or Officer verifying the content of this form must confirm the number of Attestation Pages included.***

Entity Account Information

CITSS Entity ID Number: _____

Legal name: _____

Operating name: _____

Account Representative Attestation Page 1

1. I certify under penalty of perjury under the laws of the state of Washington that I am authorized to make this submission on behalf of the party that owns the compliance instruments held in the account. I certify under penalty of perjury under the laws of the state of Washington that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify under penalty of perjury under the laws of the state of Washington that the statements and information submitted to Ecology are true, accurate, and complete. I consent to the jurisdiction of Washington state, its courts, and the pollution control hearings board for purposes of enforcement of the laws, rules, and regulations pertaining to chapters 173-446 WAC and 70A.65 RCW. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

2. I certify under penalty of perjury under the laws of the state of Washington that I was selected as the primary account representative or an alternate account representative, as applicable, by an agreement that is binding on all parties who have an ownership interest with respect to compliance instruments held in the account. I certify that I have all the necessary authority to carry out the duties and responsibilities contained in chapters 70A.65 RCW and 173-446 WAC on behalf of such parties and that each such party shall be fully bound by my representations, actions, inactions, or submissions and by any order or decision issued to me by ecology or a court or the pollution control hearings board regarding the account.

New Role: PAR AAR

Print name: _____

User Reference Code: _____

Employer name: _____

Title: _____

Signature: _____

Date: _____

Entity Account Information

CITSS Entity ID Number: _____

Legal name: _____

Operating name: _____

Account Representative Attestation Page 2

1. I certify under penalty of perjury under the laws of the state of Washington that I am authorized to make this submission on behalf of the party that owns the compliance instruments held in the account. I certify under penalty of perjury under the laws of the state of Washington that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify under penalty of perjury under the laws of the state of Washington that the statements and information submitted to Ecology are true, accurate, and complete. I consent to the jurisdiction of Washington state, its courts, and the pollution control hearings board for purposes of enforcement of the laws, rules, and regulations pertaining to chapters 173-446 WAC and 70A.65 RCW. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

2. I certify under penalty of perjury under the laws of the state of Washington that I was selected as the primary account representative or an alternate account representative, as applicable, by an agreement that is binding on all parties who have an ownership interest with respect to compliance instruments held in the account. I certify that I have all the necessary authority to carry out the duties and responsibilities contained in chapters 70A.65 RCW and 173-446 WAC on behalf of such parties and that each such party shall be fully bound by my representations, actions, inactions, or submissions and by any order or decision issued to me by ecology or a court or the pollution control hearings board regarding the account.

New Role: PAR AAR

Print name: _____

User Reference Code: _____

Employer name: _____

Title: _____

Signature: _____

Date: _____

Entity Account Information

CITSS Entity ID Number: _____

Legal name: _____

Operating name: _____

Account Representative Attestation Page 3

1. I certify under penalty of perjury under the laws of the state of Washington that I am authorized to make this submission on behalf of the party that owns the compliance instruments held in the account. I certify under penalty of perjury under the laws of the state of Washington that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify under penalty of perjury under the laws of the state of Washington that the statements and information submitted to Ecology are true, accurate, and complete. I consent to the jurisdiction of Washington state, its courts, and the pollution control hearings board for purposes of enforcement of the laws, rules, and regulations pertaining to chapters 173-446 WAC and 70A.65 RCW. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

2. I certify under penalty of perjury under the laws of the state of Washington that I was selected as the primary account representative or an alternate account representative, as applicable, by an agreement that is binding on all parties who have an ownership interest with respect to compliance instruments held in the account. I certify that I have all the necessary authority to carry out the duties and responsibilities contained in chapters 70A.65 RCW and 173-446 WAC on behalf of such parties and that each such party shall be fully bound by my representations, actions, inactions, or submissions and by any order or decision issued to me by ecology or a court or the pollution control hearings board regarding the account.

New Role: PAR AAR

Print name: _____

User Reference Code: _____

Employer name: _____

Title: _____

Signature: _____

Date: _____

Entity Account Information

CITSS Entity ID Number: _____

Legal name: _____

Operating name: _____

Account Representative Attestation Page 4

1. I certify under penalty of perjury under the laws of the state of Washington that I am authorized to make this submission on behalf of the party that owns the compliance instruments held in the account. I certify under penalty of perjury under the laws of the state of Washington that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify under penalty of perjury under the laws of the state of Washington that the statements and information submitted to Ecology are true, accurate, and complete. I consent to the jurisdiction of Washington state, its courts, and the pollution control hearings board for purposes of enforcement of the laws, rules, and regulations pertaining to chapters 173-446 WAC and 70A.65 RCW. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

2. I certify under penalty of perjury under the laws of the state of Washington that I was selected as the primary account representative or an alternate account representative, as applicable, by an agreement that is binding on all parties who have an ownership interest with respect to compliance instruments held in the account. I certify that I have all the necessary authority to carry out the duties and responsibilities contained in chapters 70A.65 RCW and 173-446 WAC on behalf of such parties and that each such party shall be fully bound by my representations, actions, inactions, or submissions and by any order or decision issued to me by ecology or a court or the pollution control hearings board regarding the account.

New Role: PAR AAR

Print name: _____

User Reference Code: _____

Employer name: _____

Title: _____

Signature: _____

Date: _____

Entity Account Information

CITSS Entity ID Number: _____

Legal name: _____

Operating name: _____

Account Representative Attestation Page 5

1. I certify under penalty of perjury under the laws of the state of Washington that I am authorized to make this submission on behalf of the party that owns the compliance instruments held in the account. I certify under penalty of perjury under the laws of the state of Washington that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify under penalty of perjury under the laws of the state of Washington that the statements and information submitted to Ecology are true, accurate, and complete. I consent to the jurisdiction of Washington state, its courts, and the pollution control hearings board for purposes of enforcement of the laws, rules, and regulations pertaining to chapters 173-446 WAC and 70A.65 RCW. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

2. I certify under penalty of perjury under the laws of the state of Washington that I was selected as the primary account representative or an alternate account representative, as applicable, by an agreement that is binding on all parties who have an ownership interest with respect to compliance instruments held in the account. I certify that I have all the necessary authority to carry out the duties and responsibilities contained in chapters 70A.65 RCW and 173-446 WAC on behalf of such parties and that each such party shall be fully bound by my representations, actions, inactions, or submissions and by any order or decision issued to me by ecology or a court or the pollution control hearings board regarding the account.

New Role: PAR AAR

Print name: _____

User Reference Code: _____

Employer name: _____

Title: _____

Signature: _____

Date: _____

Entity Account Information

CITSS Entity ID Number: _____

Legal name: _____

Operating name: _____

Section 4.0: Authorization for Changes to Account Representatives/Account Viewing Agents

This form authorizes replacement of the PAR and/or the addition of new AARs or AVAs.

- The changes proposed in this form have already been entered in CITSS and are pending Ecology approval.

4.1 Attestation by the active PAR or an active AAR

I certify under penalty of perjury under the laws of the state of Washington that I am authorized to make this submission on behalf of the party that owns the compliance instruments held in the account. I certify under penalty of perjury under the laws of the state of Washington that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify under penalty of perjury under the laws of the state of Washington that the statements and information submitted to Ecology are true, accurate, and complete. I consent to the jurisdiction of Washington state, its courts, and the pollution control hearings board for purposes of enforcement of the laws, rules, and regulations pertaining to chapters 173-446 WAC and 70A.65 RCW. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

Print name: _____

User Reference Code: _____

Employer name: _____

Title: _____

Signature: _____

Date: _____

Entity Account Information

CITSS Entity ID Number:_____

Legal name:_____

Operating name:_____

4.2 Director or Officer Verification

This form authorizes replacement of the PAR and/or the addition of new AARs or AVAs. This section must be completed by an individual provided in the most recent disclosures of the list of the entity’s Directors and Officers, who is responsible for the conduct of the PAR, AAR, and AVAs.

I certify under penalty of perjury under the laws of the state of Washington that I am authorized to make this submission on behalf of the party that owns the compliance instruments held in the account. I certify under penalty of perjury under the laws of the state of Washington that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify under penalty of perjury under the laws of the state of Washington that the statements and information submitted to Ecology are true, accurate, and complete. I consent to the jurisdiction of Washington state, its courts, and the pollution control hearings board for purposes of enforcement of the laws, rules, and regulations pertaining to chapters 173-446 WAC and 70A.65 RCW. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

Print Name:_____

Employer Name:_____

Title:_____

Signature:_____

Date:_____

Number of Account Representative Attestation Pages:___