Washington State Climate Commitment Act

Application for Listing an Ozone Depleting Substances Offset Project

Form ECY 070-704



Publication Information

This document is available on the Department of Ecology's website at: <u>https://apps.ecology.wa.gov/publications/summarypages/ECY070704.html</u>

Contact Information

Climate Pollution Reduction Program

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Ecology Staff Use Only		
Date Application Received:	OPR Tracking Number:	Date Application Reviewed:

Section 1.0: Entity Applying For Listing

Is this form being submitted by the Offset Project Operator (OPO) or by the Authorized Project Designee (APD)

090

🗆 APD

Notes:

- **1.** The person completing this form should be an OPO/APD Employee
- **2.** If the APD is submitting the form, the OPO should submit the form "Designation of Authorized Project Designee" simultaneously

Name of Person Completing Form:	Organization, if applicable	:
Date Form Completed:	Phone Number:	Email Address:

Section 2.0: Offset Project Information

Offset Project Name:

Offset Project Commencement Date:

First Reporting Period Start Date:

First Reporting Period End Date:

Section 3.0: OPO/APD Information

Section 3.1 OPO

OPO Name:	OPO CITSS ID#:	
Name of Person Completing Form:	Organization, if applicable	:
Date Form Completed:	Phone Number:	Email Address:

Section 3.2 APD

APD Name:		APD CITSS ID#:	
Mailing Address:	City:	State:	Zip:
Contact Person:	Phone Number:	Email Address	

Section 4.0: Destruction Facility Information

Name of Destruction Facility:	Street Address:	
City:	State:	Zip:

Is the destruction facility a RCRA-permitted hazardous waste combustor (HWC)? (If yes, skip the next question)

□ Yes

🗆 No

If the destruction facility is not a RCRA-permitted HWC, has it met the TEAP requirements for ODS Destruction?

 \Box Yes

□ No

Section 5.0: Others Involved in Project

Technical Consultants

Name:	Contact Person:
Phone Number:	Email Address:

Other Parties with Material Interest

Name:	Contact Person:
Phone Number:	Email Address:

Section 6.0: ODS for Destruction

List of all points of origin by U.S. state for ODS sourced for this project:

Indicate all ODS sources that will be destroyed under this project by checking the boxes below:

Refridgerant Destruction

□ CFC-11	CFC-12	CFC-13	CFC-113	CFC-114	□ CFC-115

Destruction of ODS Blowing Agent in Intact Building Foam

□ CFC-11 □ CFC-12 □ HCFC-22 □ HCFC-141b

Destruction of Concentrated ODS Blowing Agent in Appliance Foam

□ CFC-11 □ CFC-12 □ HCFC-22 □ HCFC-141b

Section 7.0: Other Questions (General)

Have any GHG reductions associated with the offset project ever been registered with or claimed by another registry or program, or sold to a third party prior to our listing?

🗆 No

□ Yes

If yes, identify the registry or program (vintage and reporting period) below:

Registry/Program:	Reporting Period(s):
Vintage(s):	Credits Issued:

Is this offset project being implemented and conducted as a result of any law, statute, regulation, court order, or other legally binding mandate?

🗆 No

If yes, explain:

Section 8.0: Other Questions (ODS-Specific)

Has an offset project data report been developed? If not, what will it be in place?

□ Yes	🗆 No	Date:

Has the offset project-specific recovery efficiency been determined (for appliance foam projects only)? If yes, what is the factor? If no, when will this factor be established?

🗆 Yes	🗆 No

Factor/Date:

Was, or will, any of the destroyed ODS be sourced from the U.S. government? If yes, how much?

□ Yes	□ No
Quantity:	
Was, or will, any of the destroyed ODS be o local law? If so, how much?	considered hazardous waste under U.S., state, or
□ Yes	□ No
Quantity:	
If yes, explain:	

Section 9.0: Attachment

On an attached separate piece of paper, provide an Offset Projection Description (one to two paragraphs)

Section 10.0: Attestations and OPO Signature

I certify under penalty of perjury under the laws of the State of Washington the GHG reductions and/or GHG removal enhancements for:

Project Name:

From Crediting Period Start Date: To Crediting Period End Date:

will be measured in accordance with the Compliance Offset Protocol for Ozone Depleting Substances Projects, November 14, 2014, and all information required to be submitted to Ecology is true, accurate, and complete.

□ Yes

🗆 No

Initial

I understand I am voluntarily participating in the Washington Cap-and-Invest Program, and by doing so, I am now subject to all regulatory requirements and enforcement mechanisms of this program and subject myself to the jurisdiction of Washington as the exclusive venue to resolve any and all disputes arising from the enforcement of provisions in this article.

Initial

For federally recognized tribes who elect to participate as offset project operators pursuant to RCW 70A.65.090(5), the following attestation may be submitted in lieu of the attestation required by (b)(iii) of this subsection: "I understand I am voluntarily participating in this program. The tribal government on whose behalf I am authorized to make this submission has entered into a written agreement, negotiated on an individual basis between ecology and the tribal government, that establishes a dispute resolution process and/or other compliance mechanisms in order to ensure the enforceability of all program requirements applicable to the tribe in its role as an offset project operator.

Initial

I understand that the offset project activity(ies) and implementation of the offset project must be in accordance with all applicable local, regional, and national environmental and health and safety laws and regulations that apply to the offset project location. I understand that offset projects are not eligible to receive Ecology or registry offset credits for GHG reductions and GHG removal enhancements.

Initial

In signing this form, I certify under penalty of perjury of the laws of Washington that the information contained in this form is true, accurate, and complete. I further certify that I am an Account Representative of the Offset Project Operator (OPO).

Signature:	Printed Name:
Title:	Date:

Background for Application of Listing an Ozone Depleting Substances Offset Project

Washington state's Cap-and-Invest regulation describes the requirements and process for an Offset Project Operator (OPO) or Authorized Project Designee (APD) to list an offset project with an approved Offset Project Registry. This form is designed to help an OPO or APD fulfill the requirements of Washington's Cap-and-Invest Regulation and Chapter 7 of the Compliance Offset Protocol Ozone Depleting Substances Projects, November 14,2014, and to list an ODS offset project. The information in this form should be submitted to the approved Offset Project Registry with which the OPO or APD would like their offset project listed.

Where to Submit Information Contained in This Form

Please complete the information on the form using your computer. Then either add an electronic signature to the form or print, sign, and scan the form. The completed and signed information and all supporting documentation should be submitted to the appropriate Offset Project Registry.

Detailed Instructions for Application of Listing an Ozone Depleting Substances Offset Project

Section 1.0: Entity Applying for Listing

- Indicate whether the Offset Project Operator (OPO) or Authorized Project Designee (APD) is submitting the information for project listing.
- Washington's Cap-and-Invest Trade Regulation requires that the OPO and, if applicable, the APD must register with Ecology for the Cap-and-Trade Program prior to listing a project. It also requires that neither the OPO nor APD is subject to any Holding Account restrictions imposed as part of an enforcement action. To register with Ecology, please visit the website for Compliance Instrument Tracking System Services (CITSS): <u>https://www.wci-citss.org/</u>
- List the name, organization, phone number, and email address of the person submitting the information. This person should be an employee of the OPO or APD, whichever entity is making the submission. The person submitting the information need not be the same person as the contact person listed for the OPO or APD in Section 3 and also need not be the person signing the form in Section 9.
- The person submitting the information should indicate the date the form is completed.

Section 2.0: Offset Project Information

• Provide the name for the offset project. Indicate the offset project commencement date and the start and end dates of the first reporting period; approximations are acceptable if precise dates are unknown.

Section 3.0: OPO/APD Information

- Enter contact information for the OPO and APD requesting the offset project listing. Every offset project will have an OPO. If an offset project does not have an APD, please mark the box indicating the offset project does not have an APD and leave the remaining fields blank.
- For both the OPO and, if applicable, the APD, enter the entity's name, its CITSS ID number, its mailing address, and the name, phone number, and e-mail of a contact person for the entity. DO NOT PROVIDE THE OPO's or APD's CONFIDENTIAL CITSS ACCOUNT NUMBER, which begins with the CITSS ID number followed by a hyphen and more numbers.

Section 4.0: Destruction Facility Information

- Provide the name and address of the destruction facility
- Answer the two questions regarding the destruction's facility RCRA permitting or compliance with TEAP requirements. If the first question is answered affirmatively, the second question should be skipped.

Section 5.0: Others Involved in the Project

 Identify the identification of technical consultants and other parties with a material interest in the offset project. Identify such entities and/or individuals. Attach additional sheets if necessary.

Section 6.0: ODS for Destruction

- List all the points of origin by U.S. State for ODS sourced for the offset project to be listed.
- Using the check boxes, indicate all the ODS sources that will be destroyed under this offset project.

Section 7.0: Other Questions (General)

- This part includes two question required by the Compliance Offset Protocol Ozone Depleting Substances Projects, November 14, 2014. Answer both questions.
- If the answer for the first question is "yes", provide further detail for the reductions claimed and/or credits that have been issued
- If the answer for the second question is "yes", provide an explanation.

Section 8.0: Other Questions: (ODS-Specific)

- This part includes four yes/no questions that are specific to ODS destruction projects. Answer all four questions by checking the appropriate box. The second question is applicable only for project destroying ODS for appliance foam. For projects not destroying appliance foam, do not answer the second yes/no question. Each of the four yes/no questions has a follow-up question which may need to be answered.
- If the first yes/no question is answered "no", answer the follow-up question by providing a date. If answered "yes", leave the Date field blank for the first follow-up question.
- If the second yes/no question is answered "yes", provide the recovery efficiency factor. If answered "no" provide a data for when the factor will be established.
- If the third yes/no question is answered "yes", indicate the quantity of ODS destroyed, or to be destroyed, from U.S. government sources. If answered "no", leave the Quantity field blank for the third follow-up question.
- If the fourth yes/no question is answered "yes", indicate the quantity of ODS destroyed, or to be destroyed, that is considered hazardous waste. If answered "no", leave the quantity field blank for the fourth follow-up question. An explanation for any hazardous waste destroyed is required.

Section 9.0: Attachment

• As required by the Compliance Offset Project Protocol Ozone Depleting Substances, November 14th, 2014, provide a description of the offset project. The description should be one to two paragraphs and provided on a separate sheet(s).

Section 10.0: Attestations and OPO Signature:

- Washington's of the Cap-and-Invest Regulation requires three attestations for listing an offset project. The required attestations are provided in this section. The person signing the form should initial each attestation (no typed or printed initials).
- The first attestation requires the applicant to provide the offset project name and the start and end dates of the crediting period to complete the statement. The offset project name should match the name entered in Section 2. The dates for the Offset Project's crediting period must also be provided. Please note that the dates provided in the attestation are for the crediting period, not for the first reporting period provided in Section 2. The crediting period dates may be approximate if precise dates are not known.
- The individual signing the document must be registered in CITSS as the OPO's Primary Account Representative or Alternate Account Representative. The individual signing the document may be an APD employee and/or representative; but to sign the document, the individual must be an Account Representative on the OPO's CITSS account.
- Please provide the individual's signature, printed name, corporate title, and date signed.