Washington State Climate Commitment Act

Evaluation of Conflict of Interest for Offset Projects

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DEPARTMENT OF ECOLOGY
State of Washington

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Contact Information

Climate Pollution Reduction Program

Ecology Headquarters
Phone: 360-407-6800
Email: CCAOffsets@ecy.wa.gov
Website: https://ecology.wa.gov/About-us/Contact-us

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Ecology Staff Use Only	
Date Evaluation Received:	OPR Tracking Number:

Section 1.0: Verification Body Information

Verification Body Name:

California Air Resource Board (CARB) ID (if applicable):

Contact Person:

Contact Phone Number:

Contact Email Address:

Section 2.0: Offset Project Information

Offset Project ID Number:

Ecology Project ID Number (if known):

Offset Project Name:

Offset Project Registry Listing Project:

Compliance Offset Protocol:

☐ Livestock Projects

☐ Ozone Depleting Substances Projects

☐ U.S. Forest Projects

☐ Urban Forest Projects

Version:

☐ Ecology Version 1.0

☐ April 25, 2014

☐ November 14, 2014

☐ June 25, 2015

Is this Conflict of Interest (COI) Evaluation being submitted for a verification which will cover just one or multiple reporting periods? If multiple, below indicate the start date of the first reporting period being verified and the end date of the last reporting period being verified.

☐ One

☐ Multiple

Crediting Period Start Date:

_____

Reporting Period Start Date:

_____

Reporting Period End Date:

_____

Section 3.0: Offset Project Operator

Section 3.1 OPO		
OPO Name:	OPO CITSS ID#:	
Mailing Address:	City:	State, Zip Code:
Contact Person:	Phone Number:	Email Address:

Section 3.2 Authorized Project Designee (APD)		
APD Name:		
Mailing Address:	City:	State, Zip Code:
Contact Person:	Phone Number:	Email Address:

Section 3.3 Technical Consultant (TC)		
TC Name:		
Mailing Address:	City:	State, Zip Code:
Contact Person:	Phone Number:	Email Address:

Are there other Technical Consultants used by the Offset Project Operator or Authorized Project Designee for whom Conflict of Interest must be evaluated? (If yes, you may provide their information on separate, attached paper.)

☐ Yes ☐ No

Section 4.0: Attachments

Organizational Chart and Business Description:

- Attach an organizational chart of the verification body and any parties related to the verification body. A "related party" means any direct parent company, direct subsidiary, or sister company.
- Along with the organizational chart, describe the primary nature of the work of both the verification body and any parties related to the verification body.

Conflict of Interest Mitigation Plan (if applicable). If the potential for a conflict of interest risk is 'medium'; attach a mitigation plan. According to WAC 173-446-545(5)(a), the mitigation plan must include the following:

- A demonstration that any individuals (in the verification body, on the verification team, or subcontractors) with potential conflicts of interest have been removed and insulated from the team that will be providing verification services for the offset project.
- An explanation of any changes made to the verification body or verification team in order to remove the potential conflict(s) of interest. A demonstration that any unit with potential conflicts has been divested or moved into an independent entity or any subcontractor with potential conflicts has been removed.
- A demonstration that any organizational unit with potential conflicts of interest has been divested or moved into an independent party.
- A description of any other circumstances that specifically address other sources for potential conflicts of interest.

Section 5.0: Offset Verification Team

Independent Reviewer

Independent Reviewer Name: _____

CARB ID (if known): _____

List any personal, employment, or family relationships with management or employees of the OPO, APD, or TC(s):

_____

_____

_____

_____

_____

Alternate or Assistant Independent Reviewer

Alt. or Assistant Independent Reviewer Name: CARB ID (if known):

List any personal, employment, or family relationships with management or employees of the OPO, APD, or TC(s):

Lead Verifier

Lead Verifier Name: CARB ID (if known):

List any personal, employment, or family relationships with management or employees of the OPO, APD, or TC(s):

Other

Name: _____

CARB ID (if known): _____

Verification Role:

☐ CARB-Accredited Verifier

☐ Technical Expert

☐ Other (Specify): _____

Employment:

☐ Verification Body Staff

☐ Subcontractor

List any personal, employment, or family relationships with management or employees of the OPO, APD, or TC(s):

_____

_____

Other

Name: _____

CARB ID (if known): _____

Verification Role:

☐ CARB-Accredited Verifier

☐ Technical Expert

☐ Other (Specify): _____

Employment:

☐ Verification Body Staff

☐ Subcontractor

List any personal, employment, or family relationships with management or employees of the OPO, APD, or TC(s):

_____

_____

Section 6.0: Relationship of Verification Body to OPO/APD/TC

Do the offset verification body and any of the OPO or APD or TC(s) share any senior management staff or board of directors membership, or has any senior management staff of the OPO or APD or TC(s) been employed by the offset verification body, or vice versa, within the last three years? (If yes, provide the following information for each individual and instance).

☐ Yes ☐ No

Name:

_____

☐ Shared ☐ Previous VB ☐ Previous OPO/APD/TC

VB Position Title: OPO/APD/TC Position Title:

_____ _____

Name:

_____

☐ Shared ☐ Previous VB ☐ Previous OPO/APD/TC

VB Position Title: OPO/APD/TC Position Title:

_____ _____

Has any staff member of the verification body provided any type of incentive to the OPO or APD or TC(s) to secure a verification services contract?

☐ Yes ☐ No

List any personal, employment, or family relationships between the OPO or APD or TC(s) and any members of the verification body who are not part of the verification team:

_____

_____

_____

Section 7.0: Offset Verification Services

Does this verification conform to the Rotation of Verification Bodies requirement pursuant to WAC 173-446-535(1)? (If no, the conflict of interest in Section 10 must be deemed to be high.)

☐ Yes ☐ No

Has a member of the offset verification team or the verification body, including subcontractors, provided offset verification services for the OPO or APD or TC(s)?

☐ Yes ☐ No

If answered "yes" above, provide the following information for each instance:

Names	Describe Services Provided	Reporting	Dates of Services

Section 8.0: Non-Offset Verification Services

1. Has a member of the offset verification team, verification body, or a related party provided any of the following non-offset verification services either within or outside Washington for the OPO or APD or TC within the last five years, in accordance with WAC 173-446-545(2)(c)?

   Designing, developing, implementing, reviewing, or maintaining an inventory or offset project information or data management system for air emissions, unless such services were part of providing offset verification services;

   ☐ Yes ☐ No

   Developing a forest management plan or timber harvest plan, unless such development was part of providing offset verification services;

   ☐ Yes ☐ No

   Developing GHG emission factors or other GHG-related engineering analysis, including developing or reviewing a Washington State Environmental Policy Act (SEPA) GHG analysis that includes offset project specific information;

   ☐ Yes ☐ No

   Designing energy efficiency, renewable power, or other projects which explicitly identify GHG emission reductions and/or GHG removal enhancements as a benefit;

   ☐ Yes ☐ No

   Designing, developing, implementing, internally auditing, consulting, or maintaining an offset project resulting in GHG emission reductions and/or GHG removal enhancements;

   ☐ Yes ☐ No

   Owning, buying, selling, trading, or retiring shares, stocks, or ecology offset credits or registry offset credits from the offset project;

   ☐ Yes ☐ No

   Dealing in or being a promoter of ecology offset credits or registry offset credits on behalf of an offset project operator, its authorized project designee, if applicable, or its technical consultant(s);

   ☐ Yes ☐ No

Preparing or producing GHG-related manuals, handbooks, or procedures specifically for the offset project operator, its authorized project designee, if applicable, or its technical consultant(s);

☐ Yes ☐ No

Appraisal services of carbon or GHG liabilities or assets;

☐ Yes ☐ No

Brokering in, advising on, or assisting in any way in carbon or GHG-related markets;

☐ Yes ☐ No

Developing any health, environment or safety policies for the offset project operator, its authorized project designee, if applicable, or its technical consultant(s);

☐ Yes ☐ No

Bookkeeping or other services related to accounting records or financial statements;

☐ Yes ☐ No

Any service related to information systems, including International Organization for Standardization 14001 Certification for Environmental Management (ISO 14001 Certification), unless those systems will not be reviewed as part of the offset verification process;

☐ Yes ☐ No

Appraisal and valuation services, both tangible and intangible;

☐ Yes ☐ No

Fairness opinions and contribution in-kind reports in which the verification body has provided its opinion on the adequacy of consideration in a transaction, unless the information reviewed in formulating the Offset verification statement will not be reviewed as part of the
offset verification services;

☐ Yes ☐ No

Any actuarially oriented advisory services involving the determination of amounts recorded in financial statements and related accounts;

☐ Yes ☐ No

Any internal audit service that has been outsourced by the offset project operator, its authorized project designee, if applicable, or its technical consultant(s) that relates to the offset project operator's, authorized project designee's, if applicable, and their technical consultant(s)' internal accounting controls, financial systems, or financial statements, unless the systems and data reviewed during those services, as well as the result of those services will not be part of the offset verification process;

☐ Yes ☐ No

Any services related to internal accounting controls, financial systems, or financial statements, unless the systems and data reviewed during those services, as well as the result of those services will not be part of the offset verification process;

☐ Yes ☐ No

Acting as a broker-dealer (registered or unregistered), promoter, or underwriter on behalf of the offset project operator, its authorized project designee, if applicable, or its technical consultant(s);

☐ Yes ☐ No

Any legal services;

☐ Yes ☐ No

Expert services provided to the offset project operator, its authorized project designee, if applicable, or its technical consultant(s) or a legal representative for the purpose of advocating for the interests of the offset project operator, its authorized project designees, if applicable, or its technical consultant(s) in litigation or in a regulatory or administrative proceeding or investigation, unless solely providing factual testimony.

☐ Yes ☐ No

2. Has or will a member of the verification team, the verification body, or a related entity in the past, present, or future provided or intend to provide the OPO or APD or TC any non-offset verification services not listed above either within or outside Washington? Past services only include services provided within the last five years. Include work by subcontractors on the verification team.

☐ Yes ☐ No

3. If you answered "yes" above, provide the following information for each person and instance (attach extra sheets if needed):

Date of Services	Name of Person	Nature of Services	Location of Services	Dollar Value	Related To
					☐
					☐
					☐
					☐
					☐

4.a. Total value of non-offset verification services provided over the last five years, calculated as a percentage of the fee for the proposed offset verification services:

_____

b. Proposed fee for verification services:

_____

c. Sum of fees charged for all non-offset verification services in last five years:

_____

5. Provide an explanation of how the amount and nature of non-offset verification service previously provided is such that a member of the offset verification team's credibility and lack of bias should not be under question. (Attach additional sheets if necessary).

6. Within the previous three years, has any member of the verification body or a related entity or any member of the offset verification team provided to an ozone depleting substances (ODS) destruction facility a third-party certification of a facility to meet the requirements set forth by the United Nations Environment Programme Ozone Secretariat's Technology and Assessment Panel (TEAP) for ozone depleting substances destruction?

☐ Yes ☐ No ☐ N/A

Section 9.0: Other Conflict of Interest Circumstances

Identify any other circumstances known to the verification body or to the OPO, its APD if applicable, or its TC(s), that could result in a conflict of interest. (Attach additional pages if needed.)

Section 10.0: Conflict of Interest Self-Evaluation

Based on my assessment, I believe my verification body's potential for a Conflict of Interest is:

☐ High ☐ Medium ☐ Low

Section 11.0: Verification Body Signature

In signing this form, I certify under penalty of perjury of the laws of Washington that the information provided in the Conflict of Interest self-evaluation is true, accurate and complete. I further certify that I am duly authorized to represent and legally bind the verification body on all matters related to this form.

Signature:	Printed Name:
Title:	Date:

Background for Evaluation of Conflict of Interest Form

WAC 173-446-545, a section of the Cap-and-Invest Program Rule, provides the conflict of interest requirements for offset verification bodies and specifies the information that must be submitted by an offset verification body prior to providing any offset verification services under the Cap-and-Invest Program. The verification body must evaluate the potential for conflicts of interest as a result of relationships between (1) itself, its verifiers (including subcontracted verification team members), and any related parties, and (2) the Offset Project Operator (OPO), the Authorized Project Designee (APD) (if applicable), and the Technical Consultants (TCs). This form is designed to assist accredited offset verification bodies comply with the requirements of WAC 173-446-545. The information contained in this form should be submitted to Ecology and the appropriate Offset Project Registry. A copy must also be provided to the OPO and the APD (if applicable).

Verification bodies must also submit a Notice of Offset Verification Services prior to beginning the offset verifications services. The information in that form is submitted to both Ecology and the Offset Project Registry.

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 Ecology and the appropriate Offset Project Registry.

If the verification body is using subcontractors to assist with offset verification services, it must also provide the required information for all subcontractors.

Detailed Instructions for Evaluation of Conflict of Interest Form

Respond fully and in detail to all of the questions. If the verification body has no existing or prior relationship to the OPO or APD or TC(s), answer “no” or “does not apply” where appropriate. Attach extra sheets and/or expand sections if necessary.

If the verification body is using subcontractors to assist with offset verification services, it must also provide the required information for all subcontractors. For the purposes of submitting this information, a related party means any direct parent company, direct subsidiary, or sister company.

Section 1.0: Verification Body Information

- Provide the name and CARB accreditation number (if applicable) of the verification body submitting the information contained in this form. Also provide the name, phone number, and e-mail address of the verification body employee who should be contacted with any questions regarding the submitted information.

Section 2.0: Offset Project Information

- Provide the offset project's name and, if available, identification numbers. Both the approved Offset Project Registry and Ecology will issue identification numbers.
- Indicate the Offset Project Registry listing the offset project and the Compliance Offset Protocol used for the project. Also indicate the protocol version (i.e., the date as specified in the Cap-and-Invest rule)
- Provide the start and end dates for both the project's reporting period, as well as the start date of its crediting period.

Section 3.0: Offset Project Operator, Authorized Project Designee & Technical Consultant

- Provide contact information for the Offset Project Operator (OPO) and Authorized Project Designee (APD), if applicable, for which the verification body intends to perform offset verification services. Every project will have an OPO. If a project does not have an APD, mark the box indicating the project does not have an APD and leave blank the remaining fields in Section 3.2.
- If there are no technical consultants (TCs) for the project, mark the box indicating the project has no technical consultants and leave the part's remaining fields blank. If there are multiple technical consultants, the form may be expanded or the information provided on separate, attached paper.
- For the OPO and, as applicable, the APD and TC(s), provide the entity's name, its mailing address, and the name, phone number, and email of the contact person for the entity.

Section 4.0: Attachments

- Submit the following documents with the completed COI form electronically:
- An organizational chart of the verification body and any parties related to the verification body, and a brief description of the primary nature of work for the verification body and any parties related to the verification body.
- If a Medium potential for Conflict is identified, submit the required Mitigation Plan. A Mitigation Plan is a demonstration by the body that any potential conflict of interest will be avoided, neutralized, or mitigated. A medium potential for conflict generally occurs between two individuals (one at the verification body and one at the OPO or APD) or between an individual and an organization. At a minimum, the Plan must include a demonstration that any potentially conflicted individuals have been removed or insulated from the team that will be providing verification services for the offset project, an explanation of any changes in organizational structure that have been made to remove the potential conflict(s), and any other circumstances that specifically address other sources for the potential conflict(s).

- Note: It is important to disclose all possible business or personal relationships that may introduce a potential conflict of interest. Should any conflicts come to light later, the verification body could be subject to liability and the possibility of losing their registration with Ecology's program. Likewise, an offset verifier may be subject to revocation of their accreditation if it violates the requirements of WAC 173-446-545. Consequences to the OPO and APD include the possibility of having their verification statement(s) voided, which would require a re-verification for the Reporting Period(s) during which the conflicted individual(s) participated in verification services. The same is true for undisclosed subcontractor conflicts. The verification body must fully investigate potential subcontractor conflicts of interest because the verification body alone bears the responsibility for the COI evaluation.
- Note: The verification body must monitor and immediately disclose to the Offset Project Registry any potential conflict that arises after commencement, in accordance with WAC 173-446-545(7).

Section 5.0: Offset Verification Team

- Provide the requested information for each member of the offset verification team, including the independent reviewer. At minimum, the offset verification team must consist of a lead verifier and independent reviewer. The independent reviewer and lead verifier must be accredited as lead verifiers in CARB's Compliance Offset Program, or another offset verification standard approved by Ecology, in accordance with WAC 173-446-540(1)(c)
- Provide the names of the individuals who will comprise the offset verification team.
- For each member of the offset verification team, other than the independent reviewer(s), indicate whether they are verification body staff or a subcontractor. The independent reviewer may not be a subcontractor.
- For members of the offset verification team who are neither the independent reviewer nor the lead verifier, indicate their role. If the role is "other", specify.
- For all verifiers on the offset verification team, including both the independent reviewer and lead verifier, include their CARB-issues accreditation number, if applicable.
- For all members on the offset verification team, indicate any personal, employment, or family relationships with management or employees of the OPO or APD or TC(s). For purposes of the COI evaluation, "employment" means the condition of having been paid for work as documented in a W-2 form.
- If the offset verification team has more members than can fit on the form, expand the form or attach additional sheets as needed to list all individuals, including their name, verification role (with CARB ID# if applicable), employment, and any personal or family relationships with management or employees of the OPO, APD, or TC.

- If during offset verification services, a verification team member is added, an updated COI Evaluation must be approved before the new verification team member participates in offset verification services, in accordance with WAC 173-446-545(6)(c).

Section 6.0: Relationship of Verification Body to OPO/APD/TC

- Indicate if there is or has been any shared management staff or board of directors' membership between verification body (VB) and the OPO or APD or TC(s) within the last three years. If so, disclose the name(s), position titles, and nature of relationship(s):
  - "Shared" – named individual is currently a senior management staff or board member at both the VB and OPO or APD or TC;
  - "Previous VB" – named individual was previously senior management staff at the VB and is currently senior management staff at the OPO or APD or TC
  - "Previous OPO/APD/TC" – named individual was previously senior management staff at the OPO or APD or TC and is currently senior management staff at the VB
- Indicate whether any member of the verification body has provided any type of incentive to the OPO or APD or TC to secure an offset verification services contract.
- List any personal, employment, or family relationships between the OPO, the APD, or TC with any members of the verification body who are not part of the offset verification team. For COI Evaluation purposes, a "member" includes any officer, employee, contractor, or subcontractor of the verification body or related parties of the verification body, and also includes any individual with majority equity share in the verification body or its related parties. "Related parties" includes any direct parent company, direct subsidiary, or sister company.
- If there are more shared individuals than will fit on the form, attach additional sheets for the other individuals, providing their names, position titles and nature of relationship as described above.

Section 7.0: Offset Verification Services

- Indicate whether any member of the offset verification team or any member of the verification body has provided offset verification services for the OPO or APD or TC(s) under any other voluntary or regulatory program. If yes, identify the individual(s), describe the services performed, including the Reporting Period, and list the approximate dates the verification services were performed.
- If there are more instances than will fit on the form, attach additional sheets for providing the name(s) of the team member(s) providing verification services, a brief description of the services performed including the Reporting Periods verified, and the dates of actual service.

Section 8.0: Non-Offset Verification Services

- Section 1 – if you answer "yes" to any of the questions, your potential for a conflict is deemed "High" and the verification body will not be allowed to perform offset verification services for this OPO or APD or TC. The questions listed in this part come from WAC 173-446-545(2)(c)(i)-(xxi) of the Cap-and-Invest Regulation.
- Section 2– Have or will any other non-offset verification services (not listed in Section 1, above) be performed by any member of the verification body for the OPO or APD or TC – either inside or outside of California? This includes but is not limited to current work, proposals, or any kind of non-offset verification services. Past services only include services provided within the last five years.
- Section 3 – If you answered yes to Section 2, provide the following information and include work by any subcontractor(s) on the verification team.
    - Identify the dates of service, the name(s) of the team member(s) providing the services, a brief description of the nature of service, the location where the service occurred, the dollar value for all past services and whether the work was related to GHG reductions and GHG removal enhancements.
    - If there are more instances than will fit on the form, attach additional sheets for providing the dates of service, the name(s) of the team member(s) providing the services, a brief description of the nature of service, the location where the service occurred, the dollar value for all past services and whether the work was related to GHG reductions and GHG removal enhancements.
- Section 4 – Provide the sum of all fees charged for of all non-offset verification services performed during the last five years identified above, and the proposed fee for offset verification services provided to the OPO or APD, then calculate the total value of non-verification services provided in the last five years as a percentage of the fee for the proposed offset verifications services (divide the value reported under "Sum of fees…" by the value reported under "Proposed fee…" and multiply by 100%)
- Section 5 – Attach a sheet(s) with an explanation detailing how the amount and nature of non-offset verification services previously provided for an OPO or APD or TC would not call into question the credibility of the offset verification team and how a lack of bias would be maintained. Be as detailed as possible.

Section 9.0: Other Conflict of Interest Circumstances

- Indicate any possible circumstance(s) that could result in COI between the verification body and the OPO or APD or TC(s). Where possible, indicate why the identified circumstance(s) should not affect the offset verification services.

Section 10.0: Conflict of Interest Self-Evaluation

- After reviewing the Regulations and filling out this form, select the appropriate potential for conflict of interest. If your potential for COI is high, your verification body will NOT be able to perform offset verification services for this offset project. If the potential for COI is medium, you MUST attach a mitigation plan to your COI evaluation.

Section 11.0: Verification Body Signature

- The individual signing this should be an official from the offset verification body who is authorized to sign a legally binding document on behalf of the verification body. The person signing this form may be a lead verifier, office manager, or other company official.