**Climate Forward Reduced Emissions from Megafires**

**Project Submittal Form**

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| **Instructions:** Please complete all fields as thoroughly as possible. If the project in question is still in the planning or development phase, all fields must be completed using best available data and estimates based on the proposed project design. This is an interactive Word form. Upon completion, please save this form as a PDF prior to uploading it to the Reserve. This will lock your answers and protect the document from any further changes. All fields must be completed, even if the answer is also provided elsewhere; if a field is not applicable, insert N/A in the space provided. Upon approval, this form will become public. | | | | | | |
| 1. **Account Holder (as it appears in the Climate Forward Program software):** | |  | | | | |
| 1. **Project Name (as it appears in the Climate Forward Program software):** | |  | | | | |
| 1. **Project ID # (as it appears in the Climate Forward software):** | | **CF** | | | | |
| 1. **Methodology Version (must be an approved version of the Reduced Emissions from Megafires Forecast Methodology as listed on the** [**Climate Forward**](https://climateforward.org/) **webpage):** | |  | | | | |
| 1. **Form Completed By (name, organization):** | |  | | | | |
| * 1. **Contact Information (physical address, phone, email):** | |  | | | | |
| * 1. **Date Form Submitted:** | |  | | | | |
| 1. **Technical Consultant, if applicable (Organization/Individual Name):** | |  | | | | |
| * 1. **Contact Information:** | |  | | | | |
| 1. **Other Parties with Material Interest, if applicable (Organization/Individual Name):** | |  | | | | |
| * 1. **Role (E.g., technical consultant, project financing):** | |  | | | | |
| * 1. **Contact Information:** | |  | | | | |
| **Project Details** | | | | | | |
| 1. Project site location (including latitude and longitude, county/jurisdiction, country): | |  | | | | |
| 1. Project description (please provide one to two paragraphs summarizing the project, including but not limited to the fuel reduction activities undertaken or planned, the acreage of treatment areas, forest types and pre- and post-treatment conditions, any coordination with additional landowners, agencies, or organizations): | |  | | | | |
| 1. Baseline description (explanation of pre-project scenario): | |  | | | | |
| **Forecasted Mitigation Units (FMUs) Use** | | | | | | |
| 1. What is the intended use of the Forecasted Mitigation Units (FMUs) generated from this project? Select multiple uses if applicable. | California Environmental Quaity Act (CEQA) compliance requirement or similar requirement (please specify: **)**  Conversion to Climate Reserve Tonnes (CRTs)  Environmental Benefit. Provide details of use: | | | | | |
| **Project Eligibility and Implementation** | | | | **Yes** | **No/NA** | |
| 1. **Location:**     1. Is the project located in an approved geographic area, namely Arizona, California, Colorado, Idaho, Montana, Nevada, New Mexico, Oregon, South Dakota, Utah, Washington, and/or Wyoming? | | | |  |  | |
| * 1. Has the project area been under forest cover for at least 20 years? | | | |  |  | |
| * 1. Does the project take place in any part of an area where an existing or previously existing carbon project was located for which carbon credits were issued or that received direct compensation for climate benefits? | | | |  | |  |
| * + 1. If yes, please describe the existing or previously existing project type, the status of that project (i.e., ongoing, completed, terminated), and the nature of the financial recognition for climate benefits: | | | | | | |
| * + 1. **If the project is being developed on an area that is currently registered as a forest carbon project and/or is associated with a project under another methodology/protocol, has the Reserve provided approval to stack projects and guidance for quantification adjustments that may be required as a result?** | | | |  | |  |
| 1. **Social Safeguards:**    1. Have or will the fuel treatment activities been disclosed to local resource management groups involved in planning and implementing activities that reduce wildfire impact in the general vicinity of the project, such as resource conservation districts, fire safety councils, and/or government agencies? | | | |  | |  |
| * 1. Has or will a fuels management plan been prepared that indicates proposed management activities over time and space for a planning period of at least five years into the future from the project start date? Note that this management plan needs to be submitted to the Reserve by the time of confirmation. | | | |  | |  |
| 1. **Start Date and Crediting Period:**    1. Project Start Date\* (MM/DD/YYYY):    2. Describe the basis for the start date, i.e., the initiation of fuel reduction treatments:    3. **Specify the crediting period start and end dates in DD/MM/YYYY- DD/MM/YYYY format. Note that the crediting period length must be 40 years:**   **\*If the project consists of multiple fuel reduction activities, note that all activities must be completed within three years of the initiation of the first activity. Also note that the project must be submitted to the Reserve for listing within one year of the start date.** | | | | | | |
| 1. **Additionality:**     1. Is the project being implemented and maintained because of any law, statute, regulation, court order, or other preexisting legally binding mandate? | | | |  |  | |
| 1. **Payment stacking**    1. Has the project received or does the project plan to receive additional funding to support fuel reduction activities or other aspects of project development, i.e., ‘enhancement payments,’ such as local, state or federal grants? | | | |  |  | |
| * + 1. If yes, has pre-approval been obtained from the Reserve to stack payments? | | | |  | |  |
| 1. **Regulatory Compliance:**    1. Is the project activity in compliance with all local, state, and/or federal laws and regulations or permitting requirements? | | | |  | |  |
| * 1. Describe any local, state, or federal laws, regulations, best management practices, or permitting requirements that apply to the project area: | | | | | | |
| 1. **Ownership:**     1. Is the project proponent a fee owner of land on which all or a portion of the project activities are taking place? | | |  | |  | |
| * + 1. If no, will the project proponent have an agreement in place granting exclusive claim to the GHG reductions resulting from the project (to be authorized to sign the “Attestation of Title”) at the time of project confirmation? | | |  | |  | |
| * 1. Does the project extend across multiple ownerships? | | |  | |  | |
| * + 1. If yes, has the project proponent notified all fee owners on whose lands fuel treatment activities are occurring that the project is being submitted to the Reserve? | | |  | |  | |
| 1. **Double Counting:**     1. Has this project (i.e., the current set of project activities) been submitted to another registry or program? | | |  | |  | |
| 1. If yes, please specify the registry or program it has been submitted to: | | | | | | |
| * 1. Have any GHG reductions associated with the project ever been registered or claimed by another program prior to registering with the Reserve? If yes, please complete and return a [Registry Project Transfer Attestation](https://www.climateactionreserve.org/wp-content/uploads/2009/03/Project-Transfer-Form-06-15-09.pdf) form. | | |  | |  | |
| * 1. Have any GHG reductions from the project ever been sold directly to a third party (i.e., sold without being registered with or claimed by another registry or program) prior to submitting to the Reserve? | | |  | |  | |
| 1. Additional documents: Are GIS layers in shapefile and KML format delineating the treatment area(s) also being submitted at this time per the methodology requirements? | | |  | |  | |
| 1. Additional information (if any): | | | | | | |

***End of form***