**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): | | Click or tap here to enter text. | | | | |
| 1. Project Name (as it appears in the Climate Forward Program software): | | Click or tap here to enter text. | | | | |
| 1. Project ID # (as it appears in the Climate Forward software): | | **CF** Click or tap here to enter text. | | | | |
| 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): | | Click or tap here to enter text. | | | | |
| 1. Form Completed By (name, organization): | | Click or tap here to enter text. | | | | |
| * 1. Contact Information (physical address, phone, email): | | Click or tap here to enter text. | | | | |
| * 1. Date Form Submitted: | | Click or tap here to enter text. | | | | |
| 1. Technical Consultant, if applicable (Organization/Individual Name): | | Click or tap here to enter text. | | | | |
| * 1. Contact Information: | | Click or tap here to enter text. | | | | |
| 1. Other Parties with Material Interest, if applicable (Organization/Individual Name): | | Click or tap here to enter text. | | | | |
| * 1. Role (E.g., technical consultant, project financing): | | Click or tap here to enter text. | | | | |
| * 1. Contact Information: | | Click or tap here to enter text. | | | | |
| **Project Details** | | | | | | |
| 1. Project site location (including latitude and longitude, county/jurisdiction, country): | | Click or tap here to enter text. | | | | |
| 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): | | Click or tap here to enter text. | | | | |
| 1. Baseline description (explanation of pre-project scenario): | | Click or tap here to enter text. | | | | |
| **Forecasted Mitigation Units (FMUs) Use and Confirmation Timeline** | | | | | | |
| 1. Estimated total FMUs to be generated by project during the initial confirmation: | Click or tap here to enter text. | | | | | |
| 1. Anticipated confirmation start date month/year (e.g., “June of 2026”): | Click or tap here to enter text. | | | | | |
| 1. What is the intended use of the Forecasted Mitigation Units (FMUs) generated from this project? Select multiple uses if applicable. | California Environmental Quality Act (CEQA) compliance requirement or similar requirement. Please specify: Click or tap here to enter text.  Environmental Benefit. Provide details of use: Click or tap here to enter text.  To be determined. Please explain, e.g. ‘Have not yet found a buyer’: Click or tap here to enter text.  See the [Climate Forward FAQ](https://climateforward.org/resources/faqs) for more information. Intended FMU uses outside of the listed eligible use-cases should seek pre-approval from the Reserve and may not be eligible for registration. | | | | | |
| 1. I acknowledge that the anticipated FMU use for this project fits within the appropriate use-cases | Yes  No | | | | | |
| **Project Eligibility and Implementation** | | | | **Yes** | **No/NA** | |
| 1. Location: 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. Are any treatment areas located, in part or in total, on federal land? | | | |  |  | |
| 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: Click or tap here to enter text. | | | | | | |
| * + 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: 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): Click or tap here to enter text.    2. Describe the basis for the start date, i.e., the initiation of fuel reduction treatments: Click or tap here to enter text.    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:** Click or tap here to enter text.   **\*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: Is the project being implemented and maintained because of any law, statute, regulation, court order, or other preexisting legally binding mandate? | | | |  |  | |
| 1. Payment stacking: 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: 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: Click or tap here to enter text. | | | | | | |
| 1. Ownership: 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: 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: Click or tap here to enter text. | | | | | | |
| 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):Click or tap here to enter text. | | | | | | |

***End of form***