**QUESTIONNAIRE**

**For**

**Project Validation/Verification**

**Please e-mail the filled Questionnaire to** [**vvb@ampereco.com**](mailto:vvb@ampereco.com)

*(to be sent by post / e-mailed after providing complete information)*

1. **DETAILS OF APPLICANT**

**Applicant 01**

|  |  |
| --- | --- |
| Name of Organization (s) designated as project owner |  |
| Is the organization designated as Invoice recipient / Service recipient |  |
| Does the company require to be included in the agreement with the VVB |  |
| Company registration no. |  |
| Postal Address of the company who is the owner and requires to be included in the agreement with the VVB |  |
| Web-site (if any) |  |
| Contact person (1) |  |
| Position |  |
| Telephone |  |
| Fax No. |  |
| E-mail |  |
| Contact person (2) |  |
| Position |  |
| Telephone |  |
| Fax No. |  |
| E-mail |  |

**Applicant 02**

|  |  |
| --- | --- |
| Name of Organization (s) designated as Invoice recipient / Service recipient |  |
| Does the company require to be included in the agreement with the VVB |  |
| Company registration no. |  |
| Postal Address of the company who is the Invoice recipient / Service recipient and requires to be included in the agreement with the VVB |  |
| Web-site (if any) |  |
| Contact person (1) |  |
| Position |  |
| Telephone |  |
| Fax No. |  |
| E-mail |  |
| Contact person (2) |  |
| Position |  |
| Telephone |  |
| Fax No. |  |
| E-mail |  |

1. **SERVICE(S) REQUESTED (Please indicate information as applicable)**

|  |  |
| --- | --- |
| GHG emission reduction / removal / accounting scheme (CDM / VCS / Gold Standard/ GCC/ ICR/ CORSIA)  *Please note in case of any additional labeling requirements related to the selected GHG scheme, the same to be specified.* |  |
| Type of service required -Validation & Registration /  (Please fill up items C,D & F ) |  |
| If VCS validation project is project listed in the VCS pipeline? If yes provide date of listing |  |
| Verification & Certification  (Please fill up items C, D, E & F ) |  |
| Combined Validation and Verification  (Please fill up items C, D, E & F) |  |
| GHG accounting  (Pls. mention specific programme) |  |
| Review and Submission of new methodology  (Please fill up item F & G) |  |
| Request for deviation  (Please fill up item E) |  |

1. **INFORMATION ON PROJECT (VALIDATION / VERIFICATION / PoA / CPA addition)**

|  |  |
| --- | --- |
| Title of project |  |
| Scale of project (large / small/micro) |  |
| Type of project |  |
| Location (s) of project (village, district, state) |  |
| Commissioning date of project / proposed commissioning date of project. |  |
| Is it bundled project activity? |  |
| Has project applied or registered for any other carbon crediting mechanism apart from one mentioned in this form? If yes provide details. |  |
| Have the Letters of Approval from the host country (DNA)? If yes, please attach the copy of the same. If no, when is it expected? and Annex 1 party been obtained? |  |
| Is Annex 1 participation mandatory for obtaining Host Country Approval in this project case? If yes, what is the status of the same.? |  |
| Pls. provide Information about those providing consultancy or advisory to the project. |  |
| Description of the project activity  (Please attach the PDD or PIN)  *Details of start date, ownership of carbon rights, project area, location, agreement with end user / communities, implementation status, methodology applied, Carbon estimates, monitoring status etc. can be provided.* |  |
| Is the proposed project a bundled project, if yes please give details of the number of participants, project site locations and PP name. *if space is insufficient, please submit as attachment)* |  |
| In case of PoA validation, please describe if the VPA/CPA is a real case? |  |
| In case of PoA validation, please submit the PoA-DD and VPA-DD |  |
| For renewal of crediting period, please disclose the end date of crediting period |  |
| Is any ODA (official developmental assistance) funding done or proposed to be done for this project? |  |
| Please specify the methodology (ies) used (including the version no.) |  |
| Please specify related laws and regulations that are applicable to the project |  |
| When do you wish the engagement (validation/verification) to commence? |  |

1. **DETAILS OF TECHNICAL AREA OF PROJECT ACTIVITY (VALIDATION / VERIFICATION / PoA / CPA addition/renewal/ Request for Deviation / Project Registration changes) –**

|  |  |  |
| --- | --- | --- |
| **Type of technical area for the project activity** | **Write “YES” if applicable** | **Mention the technology of the project activity** |
| TA 1.1 Thermal energy generation |  |  |
| TA 1.2 Renewables |  |  |
| TA 2.1 Energy distribution |  |  |
| TA 2.2: Heat distribution |  |  |
| TA 3.1: Energy demand |  |  |
| TA 4.1: Cement and Lime |  |  |
| TA 5.1: Chemical process industries |  |  |
| TA 5.2 Caprolactam, nitric acid, adipic acid |  |  |
| TA 6.1: Construction. |  |  |
| TA 7.1: Transport |  |  |
| TA 8.1: Mining and mineral Production |  |  |
| TA 9.1 Aluminum and Magnesium production |  |  |
| TA 9.2 Iron, steel and  Ferro-alloy production |  |  |
| TA 10.1 Fugitive emissions  from oil and gas |  |  |
| TA 11.1: Emissions of  Fluorinated gases |  |  |
| TA 11.2. Refrigerant  gas production |  |  |
| TA 12: Solvent Use |  |  |
| TA 13.1: Solid waste and  wastewater |  |  |
| TA 13.2: Manure |  |  |
| TA 14.1: Afforestation  And reforestation  (includes REDD+ projects) |  |  |
| TA 15.1: Agriculture |  |  |
| TA 16: Carbon Capture and storage of CO2 in geological formations |  |  |

1. **INFORMATION ON PROJECT (VERIFICATION AND CERTIFICATION)**

|  |  |
| --- | --- |
| Title of the registered project : |  |
| Date of project registration and the registration number |  |
| Please specify the technical area for which the project has been registered : (refer section C above) |  |
| Please specify the methodology (ies) used in the registered project (including version no.) |  |
| Description of the deviation from the registered PDD *(Applicable for request for deviation only)*  (if space is insufficient*, please submit as attachment)* |  |
| Monitoring period for which verification is requested  (DD/MM/YY – DD/MM/YY) |  |
| Verification services requested for - initial / first / second / third/ fourth etc monitoring period/ verification.  (pls. indicate as applicable) |  |
| In case of PoA verification, identify the VPAs/CPAs included in the monitoring report |  |
| For combined verification & renewal of crediting period, disclose the applicability of conducting both engagements simultaneously |  |

1. **SUBMISSION OF NEW METHODOLOGY**

|  |  |
| --- | --- |
| Please describe the project activity for using the new methodology *(if space is insufficient, please submit as attachment)* |  |
| Please describe the methodology *(if space is insufficient, please submit as attachment)* |  |

1. **MANAGEMENT SYSTEM STATUS**

|  |  |
| --- | --- |
| Has your organization established documentation/procedures related to the project activity operation and maintenance? | (Yes/No) |
| Is your organization certified to any management system: | (Yes/No) |
| If yes, please specify : |  |

1. **Document Availability**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Information Category** | **Description** | **Available Now** | **Will be Available (Date)** | **Not Available** |
| **Main Document** | **Project Design Document (PDD) or Monitoring Report (MR) of the project.** |  | Date: |  |
| **Technology Specifications** | **Technical specifications or datasheets for key GHG emission reduction/removal equipment.** |  | Date: |  |
| **Legal and Regulatory Compliance** | **Relevant declaration or agreements required for the project** |  | Date: |  |
| **Monitoring Data (If applicable)** | **Data gathered from monitoring for the project in the current or assigned period of activity.** |  | Date: |  |
| **Emission Reduction or Estimates** | **Ex-ante estimates or GHG emission reductions/removals.**  **As well as, Supporting calculations or spreadsheets.** |  | Date: |  |
| **Stakeholder Consultation (If applicable)** | **Documentation of stakeholder consultation processes.** |  | Date: |  |
| **Other Relevant Information** | **List any other relevant reports, studies, or data:** |  | Date: |  |

1. **VALIDITY**

The Agreement shall be valid until any of the following events occur, whichever is earlier:-

|  |
| --- |
| (i) Until the registration / verification of the Project by the GHG Program Board; or |
| (ii) The Project has been given negative opinion by Ampere; or |
| (iii) The Project has been withdrawn by the Company from the registry of subject / verification process; or |
| (iv) The Company does not pursue the relevant carbon offset standard’s process by properly coordinating with Ampere and remain dormant for more than six (6) months before the project is uploaded to the registry of subject for registration / verification or later; or |
| (v) The Project application for registration / verification is rejected by GHG program/standard. |

**Declaration by Client:**

We hereby certify that the information provided is true to the best of my knowledge and belief, and there is no conflict of interest between Ampere, client, and responsible party whether on personnel level or company level.

In addition, we are obligated to disclose any information that would affect the validity of the engagement (validation/verification)

Name:

Date:

**For use of Ampere personnel only:**

Received information on (DD/MM/YY):

Is the information provided in order and complete: Yes / No

Based on the information provided, can we submit the proposal: Yes / No

Signature of the authorized person

Name:

Date:

**CONTRACT REVIEW CHECKLIST**

|  |  |  |
| --- | --- | --- |
| Question | Answer (Yes/No) and Explanation | Additional Notes |
| Is Ampere accredited in the sectoral scope(s) of the project activity or PoA to be validated or verified/certified |  |  |
| Does Ampere have sufficient human resources, internal or external, with the required competence to undertake the validation or verification/certification |  |  |
| In case of validation, does Ampere have the competent personnel or is able to acquire them to analyze, review, and validate the additionality analysis of the project? |  |  |
| Has any of Ampere’s personnel previously worked / been in contact with the project stakeholders (owner, consultant, developer, funding entity) |  |  |
| Does Ampere have no impartiality issues with the conduct of the validation or verification/certification, and all impartiality requirements are met; |  |  |
| Consideration related to client’s operation shall be taken into account: |  |  |
| 1. safety conditions |  |  |
| 1. language |  |  |
| 1. Project Complexity |  |  |
| 1. time required to complete the validation or verification/certification |  |  |
| 1. location(s) of the client's operations |  |  |