

NEVADA CONSERVATION CREDIT SYSTEM CREDIT SITE VALIDATION CHECKLIST

This Credit Site Validation Checklist is used to express interest in generating credits within the Nevada Conservation Credit System, and provide basic information about a potential credit project in order to confirm the project is eligible to generate credits. The Credit Site Validation Checklist is filled out by the Credit Developer or a knowledgeable Technical Support Provider or Aggregator ('Authorized Agent') to the best of their ability, and submitted to the Sagebrush Ecosystem Technical Team (SETT).

The SETT will evaluate the proposed project and may follow-up with the Credit Developer to collect additional information. If the credit site validation criteria are met, the SETT will issue a Notice of Validation letter to indicate the proposed project will likely be eligible to sell credits, and may move forward with project design. The Notice of Validation letter is not a confirmation of the quantity of credits to be issued.

SIGNATURE

I am submitting this Credit Site Validation Checklist to indicate interest in generating credits within the Nevada Conservation Credit System. I recognize that not all projects may be eligible for participation. To be awarded credits under the Nevada Conservation Credit System, my project must fulfill all requirements described in the Nevada Conservation Credit System Manual. Credit estimates must be verified by the SETT. I attest that the information provided in this form is accurate to the best of my ability.

Credit Developer

Date

CREDIT SITE VALIDATION SUMMARY (SETT USE ONLY)								
Project ID		Date Received	WAFWA Zone		PMU	BSU		
CRE	DIT DEVELO	OPER CONTACT INFORM	NOITAN	AUTHORIZED AGENT'S CONTACT INFORMATION (IF APPLICABLE)				
Credit Developer Name	Provide fir	e first and last name of Credit Developer.		Contact Person Name & Title		ame of authorized agent		
Mailing Address	Provide mailing address for Credit Developer.		Mailing Address	Provide mailing address for authorized agent.				
Telephone		ovide telephone number where Credit eveloper can be reached (home, work or Ilular).		Telephone	Provide telephone number where authorized agent can be reached (home, work or cellular).			
Email	Provide e	Provide email address for Credit Developer.		Email	Provide email address	for authorized agent.		

PROJECT INFORMATION						
	Specify the county in which the proposed project site is located and general road access and/or place names. Provide the Township, Range and Section if possible. Attach a map showing the proposed project boundaries or provide a shapefile if available.					
	Map or shapefile of proposed credit project area is included					
Property Location						
Number of acres you are considering for enrollment in the Credit System	Provide the total number of acres of the proposed project site. An estimate or range is sufficient.					
	Briefly describe the current use of the proposed project site.					
Briefly describe the current use of the land you are planning to restore, enhance or manage for credits under this program						
Briefly describe the proposed credit project and anticipated benefits to greater sage-grouse	Briefly describe the proposed restoration, enhancement, or management activities and the anticipated benefits to greater sage-grouse. Specific actions will be informed by future project design and input from the Habitat Quantification Tool.					
Will this land be enrolled permanently or for a term contract, and if so for how long?	Indicate preference to participate in permanent conservation or a term contract (minimum 30 years in increments of 5 years). This Response is NOT a binding commitment. If not known, check "unsure". Provide additional clarification here if needed.					

	PROPERTY & OWNERSHIP	QUESTIONS				
Is the proposed project within the Sage-Grouse	Indicate whether the proposed project is within the Sage-Grouse Management Area. Credit projects must be located within the Sage-Grouse Management Area to be eligible to participate in the Credit System.					
Management Area?	Tes	\square_{No}	Unsure			
What is the land	Indicate the land ownership status of the area of the proposed project.					
ownership status of the area of the proposed	Private	State or Local Government				
project (check all that apply)?	Federal	Tribal, Allotted, Ceded, or I	ndian Land			
	Indicate how the Credit Developer will certify control of the surface, water, and sub-surface (mineral) rights of the proposed project area. Please attach a copy of proof of control.					
	I own the property and will provide proof in the form of an Owner's (Title) Policy					
How will the Credit Developer certify control	I do not have an Owner's (Title) Policy; I have control over the following and will provide copies of the appropriate documents showing proof of control					
of the land of the proposed project area?	Land Ownership (Deed)	Water Rights Sub-surfa	ce/Mineral Rights			
	I have a written Lease Agreement for any of the above (describe, including start and end dates for the lease):					
	Other agreement or legal conveyance for any of the above (describe):					
	Indicate if you have ever received an outside source of funding to implement conservation on your proposed project area. If yes, describe the funding source. This includes Farm Bill (i.e. EQIP) funds. This will not preclude you from participation in the Credit System. If yes, please specify here.					
Has the proposed project area ever received funding to implement a conservation project (e.g., Farm Bill funds) or participated in another credit market?	☐Yes (describe:)	□ _{No}	Unsure			
Is any of the proposed project area covered by a conservation easement, held by a conservation organization or agency, or otherwise had conservation values protected?	Indicate whether there are any existing restrictions on the property. Please provi provide additional clarification here if ne Yes (describe:)	de a copy of the Easement Documentation				



NEVADA CONSERVATION CREDIT SYSTEM ACKNOWLDGEMENT OF USE

I acknowledge that the Sagebrush Ecosystem Program (SEP, Program) requires the submittal of various forms of documentation pertaining to my project(s). I also acknowledge that the members of the SEP may take photos during scheduled visits for their own records. Accordingly, I acknowledge that all of the files and information I submit to the SEP and that the SEP collects becomes available for use by the SEP for the purposes of implementing the Program. Program implementation includes, but is not limited to, necessary registry, educational, promotional, and/or other lawful activities. I will hold the SEP free of liability for the exchange of this information and any other reasonable and necessary information incident to the requirements of the Program.

Name of Owner (Print):	Date:
Name of Authorized Agent (Print):	Date:
Signature:	Project: