

**Forest Project**

**Monitoring Report**

The Monitoring Report must be completed for every reporting period after project registration. It is also required that the Forest Project Calculation Worksheet be submitted with this report. The Forest Project Calculation Worksheet is available at: <http://www.climateactionreserve.org/how/protocols/adopted/forest/resources/>

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| **Forest Owner**  |  |
| **Project Number** |  |
| **Project Name** |  |
| **Name of Individual Completing Report** |  |
| **Date of Form Completion** |  |
| **Current Reporting Period** |  |
| **Initial Reporting Period** |  |
| **Completion date of last site visit verification** |  |
| **Date of next planned site visit verification** |  |

**I. Ownership**

**1. Has the Forest Owner changed since the last reporting period?**

[ ]  No.

[ ]  Yes. Please explain, including the nature of the ownership interest, new Forest Owner’s full legal name and contact information. Please include recorded copies of relevant documents demonstrating any change of Forest Owner as well as any assignment and assumption agreement. (See Section 7 of the Restrictive Covenant and Project Implementation Agreement)

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**2. Has the Forest Owner acquired additional landholdings within the project’s Assessment Area?**

[ ]  No.

[ ]  Yes. Please explain how these landholdings demonstrate sustainable long-term harvesting practices:

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**II. Natural Forest Management**

**1. Specify how the project currently meets (or is in progress of meeting) the following requirements under “Natural Forest Management” (Refer to Section 3.10.2 of the Forest Project Protocol for additional information):**

* 1. *Native species:* Does the project currently consist of at least 95% native species based on the sum of carbon in the standing live pool? [ ]  YES [ ]  NO

If no, provide evidence that demonstrates the project is making continuous progress toward this requirement.

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* 1. *Composition of Native Species:* Does any one tree species currently exceed the ‘Composition of Native Species’ percentage in the Assessment Area Data File?
	[ ]  YES [ ]  NO
	2. If yes, please provide evidence that demonstrates the project is showing continuous progress towards native species requirements:

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* 1. *Sustainable Management:* Indicate how the project meets this requirement:

[ ]  Third party certification. Please provide certificate identification

[ ]  Operating under a renewable long-term management plan that demonstrates harvest levels which can be permanently sustained over time and that is sanctioned and monitored by a state or federal agency. Please provide documentation.

[ ]  Employment of uneven-age silivicultural practices and canopy retention. Please explain and provide documentation.

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[ ]  Not applicable, no commercial harvesting is occurring within the Project Area

* 1. *Structural Elements (Standing and Lying Dead Wood)*:
		1. *Standing Dead Wood*: What is the estimated tonnes per acre of standing dead wood (in units of CO2e metric tonnes)?

Does this meet the minimum requirements? [ ]  YES [ ]  NO

If not, provide evidence that demonstrates the project is making continuous progress toward this requirement.

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* + 1. *Lying Dead Wood:* Explain how is the project ensuring that lying dead wood exists within the project at levels required by the protocol?

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* 1. *Distribution of Age Classes:* Does the project incorporate even-aged management as a predominant silviculture method? [ ]  YES [ ]  NO (No further action is needed)

If the answer is yes, provide evidence that demonstrates the project has met or is showing continuous progress toward meeting the required distribution of age classes.

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**III. Carbon Stocks**

1. **Please provide an updated estimate of the current reporting period’s carbon pools.**

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| **Carbon Pool** | **Previous Reporting Period - Gross CO2e per Acre** | **Previous Reporting Period – Total CO2e** | **Current Reporting Period - Gross CO2e per Acre** | **Current Reporting Period – Total CO2e** |
| Standing Live Trees |  |  |  |  |
| Standing Dead Trees |  |  |  |  |
| Soil carbon (optional) |  |  |  |  |
| Net Onsite Carbon Stocks (CO2e) |  |  |  |  |
| Confidence Deduction |  |  |  |  |
| Sequential Sampling Adjustment Factor (if applicable) |  |  |  |  |
| **Final Reported Onsite Carbon Stocks (CO2e)** |  |  |  |  |

1. **Has the inventory methodology been modified since the project was registered?**

[ ]  No.

[ ]  Yes. Please explain and provide evidence that this modification has been approved by the Reserve.

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1. **What is the confidence deduction for the forest carbon inventory (this should not change between site visit verifications)?**

**IV. Permanence**

1. **If you suspect that a reversal may have occurred during the current reporting period, please explain the nature of the suspected reversal.**

 [ ]  Avoidable Reversal, please respond to question #2.

[ ]  Unavoidable Reversal, please respond to question #3.

1. **Unavoidable Reversals. Please explain the nature of the reversal or suspected reversal:**
	1. When did the reversal or suspected reversal occur (month, day, year)?
	2. What is the estimated quantity of the reversal or suspected reversal (in units of CO2e metric tonnes):
	3. When will carbon stocks be verified (month, day, year)?
2. **Avoidable Reversals. Please explain the nature of the reversal or suspected reversal:**

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* 1. When did the reversal or suspected reversal occur (month, day, year)?
	2. What is the estimated quantity of the reversal or suspected reversal (in units of CO2e metric tonnes):
	3. When will carbon stocks be verified occur (month, day, year)?
1. **Has this project been terminated due to the reversal or suspected reversal?**

[ ]  No. Please explain:

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[ ]  Yes. Please explain:

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1. **Has the project’s reversal risk rating changed since the last verification?**

[ ]  No.

[ ]  Yes.

1. Please explain:

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1. **Summarize the reversal risk rating by category:**

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| **Risk Category** | **Contribution** |
| Financial Failure |  |
| Illegal Forest Biomass Removal | 0% (Default Value) |
| Conversion |  |
| Over-harvesting |  |
| Social | 2% (Default Value) |
| Wildfire  |  |
| Disease or Insect Outbreak | 3% (Default Value) |
| Other Catastrophic Events | 3% (Default Value) |
| Additional Contribution Per the Project Implementation Agreement |  |

1. **Project reversal risk rating:**

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|  | **Previous Reporting Period** | **Current Reporting Period** |
| **Reversal Risk Rating** |  |  |

1. **If the reversal risk rating has increased, have additional contributions been made to the Buffer Pool?**

[ ]  Yes.

[ ]  No. Please explain:

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**VI. GHG Reductions and Removals**

**Is this monitoring report being verified through a desktop verification for issuance of CRTs?**

[ ]  No. When is the next planned verification date for this project (month, day, year)?

[ ]  Yes.

*I have completed this form and believe it contains the most accurate data and information possible.*

Forest Owner Signature

Name:

Title:

Organization:

Date: