**Protocol Concept Form:**

**New Protocol Concept**

|  |  |
| --- | --- |
| **Instructions:** To be completed for the purpose of submitting a **brand new protocol concept** for the Reserve’s consideration:  Please review the Reserve’s [criteria for protocol development](https://www.climateactionreserve.org/how/future-protocol-development/criteria/) and [past project concept submissions](https://www.climateactionreserve.org/how/future-protocol-development/past-concept-submissions/) prior to completing the form.  Please complete all fields for the applicable section as thoroughly as possible. All fields must be completed using best available data and estimates based on the proposed protocol design. This is an interactive Word form. All fields in the applicable section must be completed, even if the answer is also provided elsewhere; if a field is not applicable insert N/A in the space provided.  **Process for Review of Concept Submittal:** Reserve staff will review this form for completeness, to assess if this proposal satisfies all of the Reserve’s criteria for offset protocol development, and to determine whether it is appropriate for the Reserve to move forward with protocol development for this submission at this time. Reserve staff may reach out with requests for clarifications, additional information, and/or revisions to the concept form. Reserve staff aim to provide initial requests for clarifications within 10 days of concept submission, but this timeline may vary based on staff resources and protocol complexity. We appreciate your patience during our review process. Once all requests for clarification have been satisfied, Reserve staff will convene internally and make a final decision on whether to: not move forward with the concept proposal at this time; move forward with further exploration of the concept via the development of an issue paper; or initiate the protocol development process for the concept. The Reserve may also request that the submitter provide a redlined version for the protocol adaption.  Submit completed form to [reserve@climateactionreserve.org](mailto:reserve@climateactionreserve.org). Please note, you MUST be a Reserve account holder to submit a concept form for review. | |
| **Account Holder** (Account Holder name as it appears in the Reserve software)**:** |  |
| **Proposed Protocol Concept Name:** |  |
| **Additional parties involved:**  Please list any individuals who may be in contact with the Reserve in relation to this project, along with their affiliation to the project. |  |
| **Form Completed By** (name, organization)**:** |  |
| * 1. **Contact Information** (phone, email)**:** |  |
| * 1. **Date Form Submitted:** |  |
| **Proposed protocol sector:** | **Industrial Gases & Processes**  **Waste Handling and Methane Destruction**  **Natural Climate Solutions (Forestry and Other Non-Agriculture)**  **Natural Climate Solutions (Agriculture)**  **Fuels and Energy**  **Other:** |
|  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **New Protocol Concept** | | | |
| 1. **Do you want to create a new project type that is not currently available at the Reserve?**   *If no, please utilize the* [*concept submittal form*](https://www.climateactionreserve.org/how/future-protocol-development/) *for an adaptation for a new jurisdiction or for new project activity.* | **Yes** | | No |
| **Protocol Information** | | | |
| 1. Briefly describe the type of project activity the protocol would address. |  | | |
| 1. What is the specific project activity or technology that results in emission reductions? |  | | |
| 1. Is this project activity/technology proprietary, patented, or otherwise protected? | **Yes** | | No |
| 1. What jurisdiction(s) (i.e., countries or regions) would this protocol be applicable to? |  | | |
| 1. What is the primary greenhouse gas(es) that will be reduced and/or sequestered? |  | | |
| **Protocol Additionality** | | | |
| 1. Is the project activity required by any existing local, state/jurisdiction, or federal regulations? If yes, please describe. | **Yes** | | No |
| 1. Describe the local, state, jurisdictional, federal, or other mandates or regulations pertinent to the project activity (i.e., laws and regulations related to air and water quality, endangered, species and natural resource protection, etc., see Section 2.4.6 of the Program Manual for additional information). |  | | |
| 1. What party will have ownership of the credits? If applicable, describe land tenure. |  | | |
| 1. Please describe what is considered common practice or business-as-usual for this activity or sector: |  | | |
| 1. Are there high-quality datasets to evaluate “business-as-usual” activities for the sector in which the methodology activity occurs? If so, what are the sources? If not, please describe the proposed approach and sources of supporting data for establishing such business-as-usual activities. | **Yes**  **Explain:** | No  **Explain:** | |
| 1. The Reserve assesses additionality through a performance standard test. Please indicate how this project activity would comply: | Emissions Rate Threshold:  Practice or Technology Threshold:  Other condition: | | |
| 1. Are there any non-financial barriers to implementation typically faced by this type of project? If so, please describe. | **Yes**  **Explain:** | | No |
| 1. How will this project activity maintain permanence of emission reductions or sequestration? (e.g., destruction, signed 100-year Program Implementation Agreement, etc.) |  | | |
| **Quantification** | | | |
| 1. Are there any existing quantification methodologies for this type of project? If so, do the methodologies rely on modeling, direct measurement, or both? Please provide references. | **Yes**  Description of Existing Quantification Method and References:  **Will quantification require the following? Check all that apply:**  Modeling  Direct Measurement  Other: | | No |
| 1. Describe the potential leakage for this project type and the likelihood of such leakage? (See Section 2.5.2 of the Program Manual for definition of leakage) |  | | |
| **Environmental and Social Safeguards** | | | |
| 1. Please describe any notable positive environmental, social, or economic impacts besides GHG reductions that may result from project implementation under this protocol, and whether they align with any specific [SDGs.](https://sdgs.un.org/goals#goals) |  | | |
| 1. Is there any risk that this protocol may directly or indirectly result in negative environmental, social, or economic impacts? Please describe any possible risks in the space provided. | **Yes**  **Explain:** | | No |
| 1. Have you engaged with any of the following local stakeholder groups that may be impacted by implementation of this project activity? Select all that apply. | **Government Representative**  **GHG accounting expert**  **GHG project development**  **GHG/Environmental markets**  **Environmental advocacy**  **Academic research**  **Local jurisdiction community member/resident**  **Industry/Commercial Producer**  **Other:** | | |
| 1. Please provide a list of potentially critical stakeholders for this project activity, including government bodies, relevant NGOs and academic institutions, and potentially impacted local communities. |  | | |
| **Market Potential** |  | | |
| 1. How many sites or facilities in the jurisdiction could initiate this kind of project? |  | | |
| 1. Please describe the geographies in which this project type is likely to be located. |  | | |
| 1. What is the estimated capital cost associated with the kind of project (in $USD)? |  | | |
| 1. What is the potential volume of emission reductions from a single project (tCO2e/year)? |  | | |
| 1. Please provide a best estimate of the total market potential volume of emission reductions from projects using this methodology. |  | | |
| 1. What is the approximate cost per tCO2e reduced by this type of project (in $USD)? |  | | |
| 1. Please list any entities you have engaged with that have expressed interest in a protocol of this type (e.g., project developers, offset credit buyers, landowners): |  | | |
| 1. Is there an existing protocol that could be used for this type of project, and if so, what are the barriers to use or limitations of that protocol? How would the proposed protocol differ? | **Yes**  **Explain:** | No | |
| **Timeline** | | | |
| 1. What is your desired timeline for protocol adoption?   *Note: Estimated timeline for protocol adaptation is 6 months and requires Board Approval (meetings 4 times per year)* |  | | |
| **Other** | | | |
| 1. Do you have funding available to support the protocol development process? | **Yes** | No | |
| 1. Is there additional information you would like share about this concept? Please provide any supporting documents (e.g., issue papers, research papers, etc.) that further describes the proposed project activity. These may be submitted via PDF or through a link. |  | | |

***End of form***