**REQUEST FOR SERVICES (ISO14064-1, CFO)**

|  |
| --- |
| **A. GENERAL INFORMATION** |
| 1. Name of Client |  |
| 2. Postal Address |  |
| 3. Web site |  |
| 4. Contact Person  | NamePositionE-mailTelephoneFax. |
| NamePositionE-mailTelephoneFax. |
| 5. Consultancy (if any) | Name of Consultancy Organization :Name of Contact person :PositionE-mailTelephoneFax. |
| 6. Audit Language | □ Thai □ English |
| **B. INFORMATION FOR GHG VERIFICATION** |
| 7. The verification programme and associated specified requirements for the verification | □ ISO 14064-1:2018 □ CFO, which is a specific scheme, developed by TGO□ Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 8. The proposed claim (environmental information declared by the client) to be verified | GHG inventory report covered (dd-mm-yyyy to dd-mm-yyyy): |
| 9. **Name of Organization to be verify, and number of premise to be verify**  |  |
| 10. Description of the organization 's operationsPlease provide the short description of the facilities and operations to be included in the verification.* 1. the activities in each Location/boundary:
	2. Physical infrastructure, activities, and processes of the organization:
	3. The sector of organization’s activities
 | The activities in each Location/boundary:  |
| Physical infrastructure, activities, and processes of the organization: |
| The sector of organization’s activities □ Sector 1: Power Generation and Electric Power Transactions □ Sector 2: General Manufacturing Industries□ Sector 3: Oil and Gas Exploration, Extraction, Production and Refining, and pipeline distribution, including Petrochemicals□ Sector 4: Metals Production□ Sector 5: Aluminum Production□ Sector 6: Mining and Mineral Production□ Sector 7: Pulp, Paper and Print□ Sector 8: Chemical Production□ Sector 9: Carbon Capture Storage□ Sector 10: Transport□ Sector 11: Waste handling and disposal□ Sector 12: Agriculture, Forestry and Other Land Use□ Sector 13: General services activities**Noted: Verification of the CFO will be carried out within the accredited scope by NSC/TGO.** |
| **11. How were organizational boundaries determined?** | □ Control Approach - Financial Control□ Control Approach - Operational Control□ Equity Share Approach |
| **12. Please list the types of GHGs to be included in the verification** |  □ Carbon dioxide (CO2)  □ Methane (CH4) □ Nitrous oxide (N2O)  □ Hydrofluorocarbon (HFCs) □ Perfluorocarbons (PFCs)  □ Sulphur hexafluoride (SF6) □ Nitrogen Trifluoride (NF3)  Additional GHG □ HCFC-22  □ …………………………………….Noted : Types of GHG to be verified for CFO consists of Carbon dioxide (CO2) , Methane (CH4) , Nitrous oxide (N2O) , Hydrofluorocarbon (HFCs) , Perfluorocarbons (PFCs) , Sulphur hexafluoride (SF6), Nitrogen Trifluoride (NF3) including additional GHG (HCFC-22). |
| **13. What are your main GHG sources and sinks/reservoirs?** |  |
| (Please specify the main GHG sources and sinks/reservoirs for each location as specified in No. 10.1 in the following tables and separate the tables (GHG source and GHG sink) for each location.)

|  |  |
| --- | --- |
| **GHG Source** | **Description of Physical Infrastructure/Unit or Process** |
| Source 1 |  |
| Source 2 |  |
| Source 3 |  |
| Source 4 |  |
| Source 5 |  |
| Source 6 |  |
| Source 7 |  |
| Source 8 |  |
| Source 9 |  |
| Source 10 |  |

|  |  |
| --- | --- |
| **GHG Sink/Reservoir** | **Description of Physical Infrastructure/Unit or Process** |
| Sink/Reservoir 1 |  |
| Sink/Reservoir 2 |  |
| Sink/Reservoir 3 |  |
| Sink/Reservoir 4 |  |
| Sink/Reservoir 5 |  |
| Sink/Reservoir 6 | [Attach a list if more space is required] |

 |
| **14. Description of how GHG inventory reports was prepared and how GHG data and any other relevant information was collected:*** In case of CFO, The documentation (such as GHG Inventory Report, GHG Calculation sheet, Slide Presentation) shall be provided by using the valid form as required by TGO (<http://thaicarbonlabel.tgo.or.th/>).
* In case of ISO14064-1, The documentation (such as GHG Inventory Report, GHG Calculation sheet) shall be provided as required by ISO14064-1.
 |  |
| **15. Who is the intended user of the verification statement?**  |  |
| **16. The objectives and scope of verification, criteria , the level of assurance and materiality threshold:** | **16.1 the objectives of verification** 1. To assess the conformance with applicable verification criteria, including the principles and requirements of relevant standards or GHG programmes (see item 7), within the scope of the verification;
2. To assess the organization's GHG inventory of GHG emissions and removals;
3. To assess any significant changes in the organization's GHG inventory since the last reporting period;
4. To assess the organization's GHG-related controls.
 |
| **16.2 the scope of verification** 1. GHG sources, sinks or reservoirs within the organizational boundaries (see item 11, 13)
2. Types of GHG (see item 12)
3. GHG reporting period (see item 8, 18)
 |
| **16.3 the verification criteria** (see item 7) |
| **16.4 Level of assurance (Please specify)****□ Reasonable** **□ Limited** |
| **16.5 Materiality threshold (Please specify)** **□ 5%** **□ ………………………………**Noted : Materiality threshold of 5 percent shall be applied for CFO. |
| **17. Approximate GHG emissions (Tonnes CO2e):**   |  |
| **18. GHG reporting period covered** **(dd-mm-yyyy to dd-mm-yyyy):**  |  |
| **C. OTHER INFORMATION**  |
| **19. How would you assess your company’s level of preparedness for the verification?** | **19.1 (Please specify)**  **□ New for this verification**  **□ Continues verification** |
| **19.2 (Please specify)**  **□ Report is in progress**  **□ Report is complete** |
| **20. Proposed date/timeframe for verification:** |  |
| **21. Are there additional GHG services your company may wish to pursue?** (e.g. Clean Development Mechanism (CDM), Verified Carbon Standard (VCS), Gold Standard, etc.) |  |
| **22. MANAGEMENT SYSTEM STATUS** |  |
| i. Has your organization established documentation/procedures related to the GHG data and information management? | □ Yes□ No |
| ii. Is your organization certified to any management system? If yes, please clarify. | □ Yes□ No |
| **23. Health and Safety**  |  |
|  i. Are there any health and safety requirements for visiting the site? If yes, please give details. | □ Yes□ No |
| **D. AFFIRMATION** |
| I state that the above information is true and correct and that I am duly authorized to sign this application. I agree to provide any information as needed for verification of the company to be assessed as well as conform to the standards that our company pursues and achieves verification.Name: Signature:Title: Date:  |

Please complete and return this application to:

**Ms. Mattana Khemthong , Ms. Nannapas Phungpool**

**Validation and Verification Section 1 (VVS1)**

**E-mail:** **mattana@masci.or.th** **,** **nannapas@masci.or.th**

Phone: 02-617-1727 ext. 310

Mobile: 089-4928811

We will process your application and provide you with our proposal via e-mail.