

FOR INTERNAL USE ONLY

Application No:

Date Received:

Approved Credit Ref #:_____

OURSAN RIDGE CONSERVATION BANK CREDIT PURCHASE APPLICATION

Please be sure to include the following with your application:

1. A check payable to EBMUD for the non-refundable \$1,000 application fee.

2. A .pdf copy of the Agency-approved Biological Opinion for your project.

PURCHASER:

Company Name:	
Contact Person:	
Phone:	E-mail:
Signature:	
SITE INFORMATION:	
Property / Project Address:	
Assessor's Parcel Number(s):	
Total Project Size (sq. ft. or acres):	
Public Agency(ies) Requiring Mitigation:	
Project File Number:	

Number and Type of Credits Requested:

CREDIT TYPE	NO. OF CREDITS (sold in increments of 0.01)	AGENCY REQUIRING CREDITS (specify no. of credits required by each)
Alameda Whipsnake		
California Red-legged Frog		

REGULATORY AGENCY JURISDICTION:

Indicate regulatory agency(ies) requiring mitigation for project

US FWS

CDFW	Ţ
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PROJECT DESCRIPTION (please provide as much information as possible):

ADDITIONAL COMMENTS TO SUPPORT APPLICATION: