

**OREGON CLEAN FUELS PROGRAM  
AFP ACCOUNT ADMINISTRATOR DESIGNATION**

(Version 2.0)



State of Oregon  
Department of  
Environmental  
Quality

**Instructions:** Please download this form and complete all entries offline (typed) to authorize an account administrator to submit information and data for alternative fuel production facilities and fuel pathway evaluation and certification. Scan and upload the completed form in Step 2 of the registration process in the LCFS Alternative Fuel Portal (AFP). Two physical signatures are required to complete this form.

As \_\_\_\_\_ with authority to legally bind \_\_\_\_\_,  
(Title\*) (Fuel Production Company)

I, \_\_\_\_\_, authorize  
(Name of Signer)

\_\_\_\_\_  
(Name of Account Administrator) (Title) (Affiliation/Company)

to submit documents through the AFP for all CFP registered facilities of

\_\_\_\_\_  
(Fuel Production Company) (Company ID\*\*)

\_\_\_\_\_  
(Company Address) (City)

\_\_\_\_\_  
(State or Province) (Country) (Zip or Postal Code)

**Signature of Owner/Officer/Managing Partner:**

\_\_\_\_\_  
Signature (INK ONLY) Date Print Name

**Signature of Designated Account Administrator:**

\_\_\_\_\_  
Signature (INK ONLY) Date Print Name

\* Only Owners, Officers, or Managing Partners responsible for the company's fuel production facilities and having authority to legally bind the company should complete and sign this form.

\*\*A US EPA RFS2 4-digit ID or LCFS 4-character ID.