



## Clean Transportation Fuel Program (CTFP) Account Registration Form

### Instructions

Organizations must register for an account in the CTFP Application, Reporting, and Compliance System (ARCS) to participate in the New Mexico CTFP. To qualify to establish an account in the CTFP-ARCS an organization must be a fuel reporting entity qualifying under 20.2.92.401 through 20.2.92.404 NMAC, an aggregator under 20.2.92.103(C)(4) NMAC, a Fuel Supply Equipment owner under 20.2.92.303 NMAC, or a project operator under 20.2.92.306 NMAC. This form must be signed and dated by the Primary Account Administrator, Secondary Account Administrator, and a Responsible Official for the organization as defined by 20.2.92 NMAC. All signatures must be either wet-ink, or digital certificates. This form must be uploaded as part of your CTFP-ARCS registration, along with a cover letter on organization letterhead listing related organizations and indicating your eligibility to participate in the New Mexico CTFP.

### Section 1. Organization Information

Company Name:

Company FEIN:

Physical Address:

City: State/Province: Country: Zip:

Check here if mailing address is the same as above

Mailing Address:

City: State/Province: Country: Zip:

### Responsible Official Contact

Name: Title:

Telephone: Email:



New Mexico Environment Department  
Climate Change Bureau  
Clean Transportation Fuel Program



**Section 2. Primary Account Administrator Certification**

As the person administering an organizational account in the CTFP – ARCS system on behalf of the above organization, I, being first duly sworn, upon oath, state:

- I am an authorized representative of the organization identified in this document, and have the proper authority to take actions and administer this organizations participation in the New Mexico Clean Transportation Fuel Program.
- I have all the necessary authority to carry out the duties and responsibilities contained in 20.2.92 NMAC on behalf of the organization identified in this document.
- The organization identified in this document shall be fully bound by my representations, actions, inactions, or submissions and by any order or decision issued to me by NMED or a court regarding the account.

**Primary Account Administrator Signature**

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

Signed and sworn to before me on \_\_\_\_\_ by \_\_\_\_\_, as

[Date]

[Name]

[Job Title]

, of

[Organization Name]

[Signature of Notarial Official]

Title of Office:

Commission Number:

Commission Expiration Date:



New Mexico Environment Department  
 Climate Change Bureau  
 Clean Transportation Fuel Program



**Section 3. Secondary Account Administrator Certification**

As the person administering an organizational account in the CTFP – ARCS system on behalf of the above organization, I, being first duly sworn, upon oath, state:

- I am an authorized representative of the organization identified in this document, and have the proper authority to take actions and administer this organizations participation in the New Mexico Clean Transportation Fuel Program.
- I have all the necessary authority to carry out the duties and responsibilities contained in 20.2.92 NMAC on behalf of the organization identified in this document.
- The organization identified in this document shall be fully bound by my representations, actions, inactions, or submissions and by any order or decision issued to me by NMED or a court regarding the account.

**Secondary Account Administrator Signature**

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

Signed and sworn to before me on \_\_\_\_\_ by \_\_\_\_\_, as  
 [Date] [Name]

[Job Title], of [Organization Name]

[Signature of Notarial Officer]

Title of Office:

Commission Number:

Commission Expiration Date:



New Mexico Environment Department  
Climate Change Bureau  
Clean Transportation Fuel Program



**Section 4. Responsible Official Certification**

As a responsible official of the organization identified in this document, I, being first duly sworn, upon oath, state:

- I am a Responsible Official for the organization identified in this document, as defined in 20.2.92 NMAC.
- I am designating the individuals identified as Primary Account Representative and Secondary Account Representative in this document to represent the organization identified in this document to represent the organization in regard to all matters relating to the New Mexico Clean Transportation Fuel Program.
- The organization identified in this document shall be fully bound by the Primary Account Representatives and Secondary Account Representatives representations, actions, inactions, or submissions and by any notice of noncompliance, decision or order lawfully issued pursuant to 20.2.92 NMAC.
- By submitting this form, the organization identified in this document accepts responsibility for the information provided to NMED through the CTFP - ARCS.

**Responsible Official Signature**

Printed Name:

Signature:

Date:

State of

County of

Signed and sworn to before me on

[Date]

by

[Name]

, as

[Job Title]

, of

[Organization Name]

[Signature of Notarial Officer]

Title of Office:

Commission Number:

Commission Expiration Date: