	PLANNING VALIDATION/ VERIFICATION/ CERTIFICATION	**Document No**	CDM-P-01c
		Version	4.2
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1.0	**Purpose**	
	To lay down a procedure for the selection of members of the validation and verification/ certification teams and members of technical review teams	
2.0	**Scope**	
	All CDM/ 6.4 / GHG validation and verification/ certification activities.	
3.0	**Responsibility and Authority**	
	Manager Validation & Verification (V&V)	
4.0	**Policy**	
	For each validation or verification/ certification KBS complies with team competence requirements and ensures that:	
	- At least one person qualified in the technical area who will participate in the validation or verification/ certification team as validator, verifier, team leader or technical expert	
	- At least one person qualified in the technical area who will participate in the technical review team, technical reviewer may be qualified himself/ herself or supported by a technical expert.	
5.0	**Procedure**	
	Planning process comprises of following steps:	
	Step 1: Selection of team and its agreement with the client	
	Step 2: Preparation of validation/ verification plan	
	Step 3: Planning site visits	
5.1	**Selection of team and its agreement with the client**	
	A) Once the contract is signed with the client, Manager V&V identifies the Validation/Verification team members from KBS approved and qualified list of personnel which includes team leader, validator/ verifier, technical expert, local expert.	
	B) The technical review team is also identified having a technical reviewer himself/ herself qualified in the technical area or supported by a technical expert(s) in the technical area(s) independent from the team identified for validation/ verification.	
	C) Each member is requested to prior to accepting the assignment to submit a declaration in **CDM-D-17** to Manager V&V confirming the following:	
	I. Availability for validation or verification/certification activity and role assigned.	
	II. Maintaining confidentiality	
	III. No Conflict of interest and remaining impartial towards the project	
	IV. No Participation in consultancy, identification, development, financing, training related to this project	
	V. No Professional relationship with Activity Participant / Project Participants/ CME / Project Developer of this project activity or PoA / CPA / VPA, other than third party conformity assessments, within last two years.	

    VI.   No Association with Project implementers/installation companies/ O&M Contractors/Entities involved in Monitoring activities related to project activity/PoA/CPA/VPA

D) In case of CDM projects (**not applicable for A6.4 projects and other GHG projects**), Manager V&V ensures that none of the persons who were involved in any capacity be it Team Leader, Validator, Technical Expert or Local Expert in a large-scale PA/PoA Validation, RCP of Large-scale PA/ PoA or CPA inclusion validation, whether in KBS or any other DOE/VVB included as team members for the large-scale PA/ PoA verification activity contracted by KBS.

E) While selecting members of a validation or verification/ certification team, the following aspects are considered (documented in **CDM-F-14**):

    I.   Complexity of the project activity or PoA.

    II.   Risks associated with the project activity or PoA.

    III.   Technological and regulatory aspects.

    IV.   Size and location of the facility.

    V.   Type and amount of field work necessary for the validation or verification/certification process.

F) For project activities under sectoral scope 16, a validation team include personnel qualified and permitted to practice law in the host Party of that project activity. The validation team also include expertise in environmental, health and safety (person having education/ auditing experience) financial matters.

G) In advance of the validation/ verification, Manager V&V provides the activity participants the name and tasks of the validation/ verification team members and sufficient background information about the team members in the form of either **CDM-F-32** or Detailed Curriculum Vitae (CV) along with the **CDM-F-33** to inform and allow the client to object the appointment of any team member with sufficient justification. KBS reconstitutes the team in response to any valid objection. Team is considered acceptable in case there is no response from client within three calendar days of team intimation.

    I.   If a project is dormant[1] and the appointed team members for those projects' lefts organization, new team is constituted only if the project becomes active.

    II.   If there is any change in the team during validation or verification/certification, the change in team is also intimated to client in **CDM-F-33** form taking to account of section C above

H) If there is no objection from the client for the selected team, Project Mandate Form **CDM-F-14** is shared with the allocated team to initiate the validation/ verification-certification activity.

I) In case, where part of the validation/verification team visit on site, the Team Leader ensures that this part of the team has the required competence for undertaking validation & verification functions keeping in mind the technical areas within the A6.4/CDM/ GHG sectoral scope, complexity and geographical and language aspects. Cases wherein the team members having past experience in host countries in same technical area and site visit has been skipped in accordance with VVS for project activities/PoAs, local expert may be excluded from team with

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[1] *If the client doesn't respond to the audit findings within 180 days of submission of findings to the client, the project will be treated as dormant project. Also if subsequent to 180 days of publication of PDD/MR, no communication received from the client for the project, the projects shall be treated as dormant.*

appropriate justifications. Local experts may also not required to be on-site in case language is not an issue for the team.

J) For a project activities/ PoAs having multiple sites, team leader will be present at one or more sites, as appropriate, and technical expert/s shall visit each site.

5.2	**Preparation of validation/ verification plan**

The assessment team develops a strategic analysis of risk assessment to evaluate materiality thresholds, test estimates and assess GHG related activity characteristics as per CDM-F-25 **(both project level and organization level)** and develops the evidence gathering plan. (**except for projects under CDM**)

Team leader reviews and approves the strategic risk assessment analysis and evidence gathering plan to proceed with validation or verification plan.

The Team Leader develops a validation or verification plan (**CDM-D-28**) and defines and documents the task allocation among the team member that may include:

a) validation or verification objectives;

b) validation or verification scope;

c) validation or verification criteria;

d) complexity of the project activity;

e) risks associated with the project activity;

f) technical and regulatory aspects;

g) size and location of the facility;

h) amount and type of evidence (qualitative and quantitative) necessary to achieve the agreed level of assurance;

i) methodologies for determining representative samples;

j) risk of potential errors, omissions or misrepresentations;

k) materiality

l) validation or verification activities and schedules

The validation or verification plan can be revised, as necessary during the course of the validation or verification process and the same is communicated to all concerned.

Amendments to the validation/verification plan and evidence-gathering plan will be reviewed and approved by the team leader in the following circumstances

a) change in scope or timing of validation/verification activities;

b) change in evidence-gathering procedures;

c) change in locations and sources of information for evidence-gathering;

d) when the validation/verification process identifies new risks or concerns that could lead to material misstatements or nonconformities.

5.3	**Site Visit**

In a general practice – KBS recommends having the on-site visit for all type of project services, but the site visit decisions are executed based on the accreditation project standard requirements.

For Validation: It is mandatory to conduct an on-site inspection at validation for the proposed A6.4 project if:

a) Its estimated annual average of GHG emission reductions or net GHG removals is more than 100,000 t CO2 eq; or

b) There is pre-project information that is relevant to the requirements for registration of the project and may not be traceable after the implementation of the project;

c) The project is deemed to have high risk of uncertainty in terms of the achievement of GHG emission reductions or net GHG removals as estimated in the PDD, to be determined in accordance with the relevant guidance to be provided by the Supervisory Body.

For Verification: It is mandatory to conduct an on-site inspection at verification for the registered A6.4 project if:

a) It is the first verification for the DOE with regard to this project.

b) More than three years have elapsed since the last on-site inspection conducted for verification for the project; or

c) The project has achieved more than 300,000 t CO2 eq of GHG emission reductions or net GHG removals since the last verification when an on-site inspection was conducted

For cases that than above, it is optional to conduct an on-site inspection at validation/ verification. If KBS does not conduct an on-site inspection as a means of validation/ verification, it describes the alternative means used and justify that they are sufficient for the purpose of validation/ verification. If Team conducts a remote inspection as an alternative means to an on-site inspection, the team shall follow the guidance for remote assessments.

6.0	**Records**
	CDM-D-28: Onsite Validation-Verification Audit Plan **CDM-F-32:** Team Member Background Details Form **CDM-F-33**: Team Intimation Form **CDM-F-14**: Team Identification and Allocation Project Mandate Form CDM-F-25: Strategic risk analysis and evidence gathering plan

Revision History:

Version	Reason of Change	Prepared by QM (Date)	Approved by MD (Date)
2.0	Fresh issue to align the procedure with AS Version 6.0	04-12-2014	04-12-2014
2.1	Section 3.2 amended, and form F-32 linked with procedure.	22-09-2016	22-09-2016
2.2	Amended as corrective action proposed during internal audit.	03-04-2017	03-04-2017
2.3	Amended based on the corrective action implemented for NC raised during surveillance audit.	04-05-2018	04-05-2018
2.4	Revised in line with requirements of ISO 14064-3:2019, IAF MD 6:2014, ISO 14065:2013	01-03-2020	01-03-2020
2.5	Revised for corrective actions taken in response to NCs of Performance assessment	04-03-2022	04-03-2022
2.6	Revision in section 5.1 to bring more clarity for selection of team during Verification for large scale PA/PoA	13-04-2022	13-04-2022
2.7	Definition of Dormant project defined for more clarity	08-07-2022	08-07-2022
2.8	Revision in section 5.1 and 5.4 for proposed Corrective action to NC raised during Performance Assessment of year 2023	01-05-2023	01-05-2023
2.9	Inclusion of site visit requirements of various GHG schemes for proposed Corrective action to NC raised during internal audit of year 2023	01-09-2023	01-09-2023
3.0	CCB and CDM specific requirements included for team composition	26-04-2024	26-04-2024
4.0	Revision based on A6.4 Accreditation Standard Version 01.0	10-09-2024	28-09-2024
4.1	**Inclusion of strategic risk analysis process in type 2 project process**	**20-01-2025**	**17-02-2025**
4.2	**Strategic risk analysis made applicable for 6.4 projects. Typo error corrected**	**02-04-2025**	**03-04-2025**