

RFS Independent Third-Party On-Site Audit Report (RFS2201): Instructions for Completing

Who must report

• All independent third-party auditors that have conducted an on-site audit in a calendar quarter.

Reporting requirements

- <u>40 CFR 80.1451(g)(2)(vii)</u> sets forth the reporting requirements for this form.
- Complete this form as a separate entry for each facility for which an on-site audit was conducted during the calendar quarter.
- If a report field does not apply, enter the value "NA". **Do NOT leave any field blank**.

Reporting deadlines

• Independent third-party auditors must report on a quarterly basis as follows:

		Quarterly Report	
Calendar Quarter	Time Period Covered	Deadline	
Quarter 1	January 1 – March 31	June 1	
Quarter 2	April 1 – June 30	September 1	
Quarter 3	July 1 – September 30	December 1	
Quarter 4	October 1 – December 31	March 31	

How to submit reports

- Please check the RFS reporting web site for updated instructions and templates: <u>https://www.epa.gov/fuels-registration-reporting-and-compliance-help/reporting-fuel-programs</u>
- For information on submitting this report using EPA's Central Data Exchange (CDX) visit: <u>https://www.epa.gov/fuels-registration-reporting-and-compliance-help/user-guides-otaqdcfuel-central-data-exchange-cdx</u>

Field Instructions

Field No.	Field Name	Units	Field Formats, Codes & Special Instructions
1	Report Form ID		AAAAAAA; Character. Enter RFS2201.
2	Report Type		 A; <i>Character</i>. Specify if this report is original or if it is being resubmitted. Submit only one original report; any corrections or updates should be marked as a resubmission. O = Original R = Resubmission
3	СВІ		 A; <i>Character</i>. Specify if the data contained within the report are claimed as Confidential Business Information (CBI) under 40 CFR Part 2, subpart B, except the information that cannot be claimed as CBI per 40 CFR 80.1402. Y = Confidential Business Information N = Non-Confidential Business Information
4	Report Date		MM/DD/YYYY ; <i>Character</i> . Enter the date this report is completed.



Age	Agency				
Field No.	Field Name	Units	Field Formats, Codes & Special Instructions		
5	Compliance Year		YYYY ; <i>Character</i> . Enter the compliance year the report covers.		
6	Calendar Quarter		AA ; <i>Character</i> . Enter the calendar quarter under the compliance year this report covers:		
			Q1 : Quarter 1 (January – March)		
			Q2 : Quarter 2 (April – June)		
			Q3 : Quarter 3 (July – September)		
			Q4 : Quarter 4 (October – December)		
7	Independent Third- Party Auditor		AAAA ; <i>Character</i> . Enter the EPA-assigned four- character ID for the independent third-party auditor.		
	Company ID		character in for the independent unite-party additor.		
8	Independent Third-		AAAA; <i>Character (125 Max).</i> Enter the registered		
	Party Auditor Company Name		name of the independent third-party auditor.		
9	Audited Party		AAAA; Character (125 Max). Enter the registered		
	Company Name		name of the audited party.		
10	Audited Party Company ID		AAAA. <i>Character</i> . Enter the EPA-assigned four-digit company ID of the audited party.		
11	Audited Party Facility		AAAAA. Character. Enter the EPA-assigned five-digit		
	ID		facility ID or reporting ID of the audited facility.		
12	Date for any On-Site		MM/DD/YYYY. Date. Enter the date for the on-site		
	Audit		audit performed by the independent third-party auditors		
			at the audited facility.		
			AAAA; <i>Character (1000 Max)</i> . Enter any necessary		
13	Comments		comments or recordkeeping information. Enter "NA" if there are no comments.		
			uiere are no comments.		

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