



Accredited Test Farm Application

2435 N. Lombard St., Portland, OR 97217 • Toll-free (866) 465-2523 • info@coolroofs.org • www.coolroofs.org

1. Company Name	2. Contact Name
3. Company Address	4. Contact Title
5. Website	6. Email Address
7. Phone Voice	8. Phone Fax
9. Exposure Facility Locations Please list the cities and states in which the exposure facilities are located to confirm that your company has facilities in the required climates: 1. Hot/Humid 2. Cold/ Temperate 3. Hot/Dry	10. Enclosures Please check the following boxes to ensure that all required items are enclosed with this application. <input type="checkbox"/> Signed Test Farm Agreement <input type="checkbox"/> Test Farm Logo License Agreement per CRRC-A-7 (if use of the logo is desired – otherwise supply a statement that the logo will not be used). <input type="checkbox"/> Accredited Laboratory Fee (\$1,000.00) <input type="checkbox"/> Verification of accreditation to ISO 17025. <input type="checkbox"/> Listing of exposure methods that an accrediting body has found the Test Farm capable of performing. <input type="checkbox"/> Statement that shows Test Farm has no significant ownership or commercial interest in a supplier or roofing product company and is not owned by such a company.
11. I hereby attest that: a) I consent to receiving electronic communication from the CRRC, including from the CRRC News listserv. I understand that I can unsubscribe from the CRRC News listserv at any time; and b) The above information is true and accurate.	
_____ Responsible Person's Signature	_____ Date
_____ Responsible Person's Name (printed)	_____ Title

An electronically delivered copy of this application will be as effective as the original signed application.

For CRRC Use Only

	Date	By
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