



Test Farm Notification Form

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The **Licensee** shall complete fields 1–8 of this form and send the form with the product test specimens to an Accredited Independent Testing Laboratory (AITL) for testing. The **Test Farm** shall complete fields 9–13 of this form and submit exposure placement and removal information to the CRRC Online Rating Portal (Portal). After completion of three-year exposure, the Test Farm shall send the weathered specimens and this completed form to the AITL indicated in the CRRC Portal.

1. Name of CRRC Licensee	2. CRRC Licensee ID
3. Contact Name	4. Company Address
5. Contact Email	6. Phone Number
7a. Product Brand and Model Name	8. Product Slope <input type="checkbox"/> Low-Slope ($\leq 2:12$ "; to be exposed at low-slope/5°S) <input type="checkbox"/> Steep-Slope ($> 2:12$ "; to be exposed at steep-slope/45°S) <input type="checkbox"/> Both (to be exposed at low-slope/5°S)
7b. CRRC ID number or CRRC Portal ID	

SECTION BELOW TO BE FILLED IN BY TEST FARM

9. Test Farm Name

10. Type of Notification (check one) Exposure Placement Exposure Removal

11. Exposure Information				
Manufacturer's Unique Product Sample ID	Exposure Climate Zone	Exposure Period		Aged Sample Damage Comments
		Start Date	Stop Date	
1	Hot/Humid			
2				
3				
4	Temperate/Cold			
5				
6				
7	Hot/Dry			
8				
9				

12. General Comments

13a. **[EXPOSURE PLACEMENT]** The undersigned certifies that, to the best of his/her knowledge, the data contained herein are true and accurate:

_____	_____
Responsible Person's Signature	Date
_____	_____
Responsible Person's Name (printed)	Title

13b. **[EXPOSURE REMOVAL]** The undersigned certifies that, to the best of his/her knowledge, the data contained herein are true and accurate:

_____	_____
Responsible Person's Signature	Date
_____	_____
Responsible Person's Name (printed)	Title

An emailed or electronically-delivered copy of this form or of a signature of a party will be effective as an original.