

## Wall Rating Program Licensee Application (WF-1)

8797 N. Lombard St., Portland, OR 97203 | (866) 465-2523 | info@coolroofs.org | www.coolroofs.org

Wall Rating Program Primary	Contact Information (1-6)					
1. Company Name		2. Contact Name				
3. Contact Address (including C	City, State, and Zip Code)					
4. Contact Phone	5. Contact Email		6. Company Website			
7. Additional Contacts Please list the name, phone number, a contact box(es) for each contact.	and email of each additional conta	act below. Check the	applicable	Wall Rating Program Contact	Wall Billing Contact	
Name						
Phone	Email					
Name						
Phone	Email					
	Control person for each plant.	icancina for lavel	It is the total	alahal salas af y	wall mus divote	
9. <b>Annual Wall Product Sales V</b> for your company and is not limit					van products	
Less than \$1 mi	llion					
Between \$1-\$10						
Between \$10-\$3						
Between \$35-\$1						
Greater than \$10						
10. Founding Member						
Check this box if you are 50% discount on CRRC p	a Founding Member of the CF product rating fees for the first oming a Founding Member, go	10 products rated i	in the first yea	ar of program ope		

Revised July 17, 2025

Approved by Board on January 27, 2022

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CRRC WF-1 Licensee Application

	Licensee Sales						
Application Submittal Month	>\$100M	\$35-100M	\$10-35M	\$1-10M	<\$1M	Accredited Manuf. Test Lab (AMTL	
January	\$9,800	\$7,000	\$5,000	\$3,250	\$1,750	\$1,500	
February	\$8,983	\$6,417	\$4,583	\$2,979	\$1,604	\$1,375	
March	\$8,167	\$5,833	\$4,167	\$2,708	\$1,458	\$1,250	
April	\$7,350	\$5,250	\$3,750	\$2,438	\$1,313	\$1,125	
May	\$6,533	\$4,667	\$3,333	\$2,167	\$1,167	\$1,000	
June	\$5,717	\$4,083	\$2,917	\$1,896	\$1,021	\$875	
July	\$4,900	\$3,500	\$2,500	\$1,625	\$875	\$750	
August	\$4,083	\$2,917	\$2,083	\$1,354	\$729	\$625	
September	\$3,267	\$2,333	\$1,667	\$1,083	\$583	\$500	
October	\$2,450	\$1,750	\$1,250	\$813	\$438	\$375	
November	\$1,633	\$1,167	\$833	\$542	\$292	\$250	
December	\$817	\$583	\$417	\$271	\$146	\$125	
<ul><li>12. I hereby attest that:</li><li>a) I consent to receiving electhat I can unsubscribe fro</li><li>b) The above information is</li></ul>	m the CRRC No	ews listserv at any		from the CRRO	C News listserv	v. I understand	
Signature of Responsible Pers	on		Date				
Printed Name of Responsible Person			Title				