



CERTIFICATION OF ELIGIBLE BUILDING ENVELOPE COMPONENT

Manufacturer:

Ideal Roofing Company Ltd.
1418 Michael Street
Ottawa, Ontario
K1B 3R2
Canada
1-800-267-0860 / Fax: (613) 746-0445

Project Identification:

Homeowner: _____ *

Address: _____ *

City, State & Zip Code: _____ *

Phone Number: _____ *

Email address: _____ *

Roofing Contractor: _____ *

Roof Color: _____ *

Roof Slope: _____ *: 12

Finish Properties:

Initial Solar Reflectance (ISR): _____

Solar Reflectance after 3 Years: _____

Initial Emissivity: _____

This certification should be completed and sent back to Ideal Roofing for authorization.

Ideal Roofing Authorized person: _____

Date: _____

* To be completed by customer.