



Welcome Rater Company

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Projects List -> Test Retrofit Project -> Phase 1 ->

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CF-6R Forms

HERS Verifications	Required CF-6R	Status	Last Modification	HERS Provider	Registration Number	Registration Date
Low Leakage Ducts:	<a href="#">Input Form</a>	Incomplete				
Refrigerant Charge Test or CID:	<a href="#">Input Form</a>	Incomplete				
Airflow Verification:	<a href="#">Input Form</a>	Incomplete				
Fan Wattage Verification:	<a href="#">Input Form</a>	Incomplete				

Save

Add "Installation Date" field here