

**CERTIFIED HERS RATER AFFIDAVIT**

A project sponsor may require the assistance of a certified third party HERS Rater to perform prescribed tests and measurements to accurately assess the impact of energy measures implemented by the project sponsor in an unbiased manner. The scheduling and compensation for such assistance should be coordinated between the Project Sponsor and the Rater. TNMP is not involved in the business relationship between Project Sponsors and Raters and will not intervene in any disputes. Project Sponsors may only use “TNMP Registered Raters” for the prescribed tests and measurements mentioned above. A rater must complete this affidavit in order to become a “TNMP Registered Rater”.

**RATER NAME:**

\_\_\_\_\_

**COMPANY NAME OF THIRD-PARTY RATER:**

\_\_\_\_\_

**COMPANY ADDRESS:**

\_\_\_\_\_

\_\_\_\_\_

**I certify that:**

- 1) I am currently accredited by RESNET as a HERS Rater to perform duct pressurization, blower door, leakage to outside and other related tests.
- 2) I have not obtained, and will not receive, any cash payment, rebate, cash bonus, sales commission, or anything of value (except for the payment of the fee for testing or rating the home) from the Project Sponsor or any other entity.
- 3) I affirm that the company, employees, and immediate family of all owners and employees have no interest, direct or indirect, in projects for which we are retained to perform reviews or inspections.

\_\_\_\_\_  
Rater’s Printed Name

\_\_\_\_\_  
Rater’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Notary

Notary Public in and for the State of \_\_\_\_\_