



Skylights

Manufacturer's certification statement

In relation to the Tax Relief, Unemployment Insurance Reauthorization and Job Creation Act (H.R. 4853) signed into law on December 17, 2010

This Manufacturer's Certification Statement can be relied upon by a taxpayer for verification that certain VELUX products eligible for the tax credits identified in the Tax Relief, Unemployment Insurance Reauthorization and Job Creation Act. The IRS requires the manufacturer be identified:

VELUX America, Inc. P.O. Box 5001, Greenwood, SC 29648 as the manufacturer of VELUX products covered by this certification. Following IRS guidelines and under advisement by our tax advisors, VELUX has determined the following products are eligible for federal tax credits for energy efficient building products as prescribed in the Tax Relief, Unemployment Insurance Reauthorization and Job Creation Act.

VELUX products eligible for tax credits

| Product | Model/Glazing (all sizes) |
|--|--|
| VELUX SUN TUNNEL™ skylight tubular daylight device | TGF/0000, TGR/0000, TMF/0000, TMR/0000, TGF/1000, TGR/1000, TMF/1000, TMR/1000, TMR/0030, TMR/1030 |
| VELUX skylights | FCM/04, FCM/05, FCM/06, FCM/07, FCM/08, FCM/10, FS/04, FS/05, FS/06, FS/08, FS/10, QPF/04, QPF/05, QPF/06, QPF/08, VCE/04, VCE/06, VCE/08, VCE/10, VCM/04, VCM/05, VCM/06, VCM/08, VCM/10, VS/04, VS/05, VS/06, VS/08, VS/10, VSE/04, VSE/06, VSE/08, VSE/10 |

Under penalties of perjury, I declare that I have examined this certification statement, and to the best of my knowledge and belief, the facts are true, correct, and complete.

Tim Miller

President, VELUX America Inc.

The taxpayer should retain this certification statement as part of their tax records. As in all tax matters, the taxpayer is advised to consult their tax professional. VELUX America, Inc. assumes no liability regarding the homeowner's ability to obtain tax credits.

For your records (homeowner to complete this section)

Taxpayer's name: _____

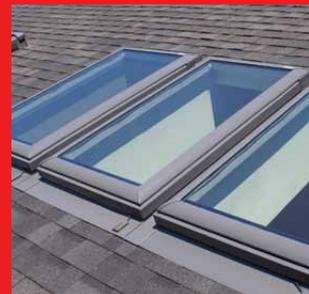
Product: _____

Price paid for product: _____

Date of purchase: _____

Date of installation at primary residence: _____

Manufacturer's certification statement



For VELUX SUN TUNNEL™ skylights and VELUX skylights purchased and installed between 1/1/11 -12/31/11.*