

**Benoure Plumbing & Heating, Inc.**  
**34 Commerce Avenue**  
**S. Burlington, VT 05403**  
**Phone 802-864-7156**  
**Fax 802-864-7167**

Date of Inspection:  
8 / 18/2010

**Heating and Venting System Documentation Form**

Name of Owner of Inspected Unit: Champlain Apartments

Address of Inspected Unit: 202 Howard Unit # 2

**Heating System(s) Type:**

*(Check all that Apply)*

- Space Heater
- Warm Air Furnace
- Wall Mount Furnace
- Boiler
- Gas Fireplace
- Other

**Fuel Type:**

- Natural Gas
- Oil
- Propane

**Venting System(s):**

*(Check all that Apply)*

- Direct Vent
- B-Vent
- Masonry \*
- Other

*\*All masonry chimneys lined or unlined need to be inspected by qualified chimney sweep*

Model # of Boiler/Furnace/Fireplace: WM CGS-4-Pin

Location of Heating System: Basement

System Passed      System Failed      If System Failed, Next Appt:     /     /    

Company Conduction Inspection:  
**Benoure Plumbing & Heating, Inc.**

Person Conducting Inspection:  
*(Please Print)*  
 Dan Crossman

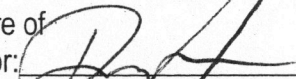
Licensure for plumbing & heating?

Yes    License # :PM-3945

Certification for gas equipment?

Yes    Cert #: GN-2081

I have inspected the heating and venting system (s) and certify that it is/they are installed properly and is/are operating safely at this time.

Signature of Inspector: 

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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TEST            47  
 DATE            08/17/10  
 TIME            13:02:54

C.

COMBUSTION		
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FUEL	NAT	GAS
O2 %		9.9
CO2 %		6.3
CO ppm		17
FLUE °F		267.9
INLT °F		75.6
NETT °F		192.3
EFF (G)		83.2
LOSSES		16.8
XAIR %		90.0
CO/CO2	0.0002	
CO AIR FREE	32	
PRS	hPA	0.01

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 Customer  
 .....  
 Appliance  
 .....  
 Ref.  
 .....