

CHIPPEWILL CONDOMINIUM ASSOCIATION FIREPLACE QUESTIONNAIRE

DO YOU HAVE A FIREPLACE YES _____ NO _____

HOW MANY FIREPLACES ARE LOCATED IN YOUR UNIT _____

DO YOU USE YOUR FIREPLACE YES _____ NO _____

DO YOU HAVE YOUR FIREPLACE CLEANED ON A REGULAR BASIS
YES _____ NO _____

IF YOU ANSWERED NO ON THE PREVIOUS QUESTION, WHEN WAS THE LAST TIME YOUR
FIREPLACE WAS CLEANED BY A FIREPLACE CLEANING COMPANY?

PLEASE PROVIDE THAT INFORMATION IN THE SPACE BELOW

Name of company that performed work and/or copy of receipt:

Date of cleaning: _____

PLEASE PROVIDE YOUR NAME AND ADDRESS IN THE SPACE BELOW

Name: _____

Address: _____

THE ASSOCIATION'S MASTER INSURANCE POLICY IS REQUESTING THE ABOVE INFORMATION
AND IT IS RECCOMENDED THAT YOU HAVE YOUR FIREPLACE CLEANED AT LEAST ONCE A YEAR,
IF YOU USE IT, DURING THE COURSE OF THE YEAR FOR YOUR OWN SAFETY.

PLEASE COMPLETE AND RETURN THIS FORM BY 2/20/2020. YOU MAY DROP IT OFF AT THE
MAINTENANCE OFFICE LOCATED OFF THE POOL, FAX IT TO CASE BOWEN AT 614.799.8338; OR
EMAIL IT BACK TO CASE BOWEN AT info@casebowen.com

THIS INFORMATION IS REQUIRED BY THE ASSOCIATION'S MASTER INSURANCE POLICY IN
ORDER TO RENEW THE POLICY IN 2020. **IT IS VERY IMPORTANT THAT UNIT OWNERS TAKE THE
TIME TO COMPLETE THE FORM AND RETURN IT TO THE ASSOCIATION BY 2/20/2020.**

ATTACHED IS A LIST OF COMPANIES THAT PERFORM INSPECTIONS AND CHIMNEY CLEANINGS.

THANK YOU FOR YOUR PROMPT COOPERATION ON THIS MATTER.

SINCERELY,

THE CHIPPEWILL BOARD OF DIRECTORS

CC: ATTACHMENT