CO₂ Testing Bulk Tobacco Barns

County:		Date:					
Site:			Grower/Agent/Specialist: (Circle one) (Agent/Specialist Name)				
Barn Designation	Barn Manuf	Heat Exchanger Brand	Heat Exch Age (yrs)	Fuel Type	Ambient CO ₂	CO ₂ @ 10 minutes	Barn Temperature (°F)
NOTES:							
NU 1 E 3.							



