11/2/2026 9:40:55 AM

WORK ORDER

Rachael Kay

9344 Blue Ridge Hwy
Blue Ridge, GA 30513
(706) 994-4275

Customer #: 206334
Order #: 566931
Location #: 282572
Zone: B-017-MON-
Terms: Net 30

Tech: _____

Map Code:
Service Code: Propane Service connect to furnace
Description: 11/11/26 P/U leased 120 T/I 250Ag w/200G @ 2.499 extend yard line Call 706-994-3405 or 706-994-4275 COD-CLT

Date Ordered: 11/2/2026	Scheduled Date:	Est. Completion:	Start:	Stop:

Name:
Contract:
Manufact:
Notes:
Instructions:

Last Service: 7/8/2026
SC Renewal:
Model:

Last Tune Up:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes

PROPANE GAS PIPING SYSTEM CHECK

Folger Gas Propane — GAS CHECK

Customer Account #: 206334
Name: 9344 BLUE RIDGE HWY
Address: 9344 BLUE RIDGE HWY
BLUE RIDGE GA 30513

Date: 11/11/26
Instructions: P/U LEASED 120 T/I 250 AG W/200G @2.499 EXTEND YD LINE COD CLT
Order #: 566931

Disclaimer: This inspection covers gas equipment and appliances visible and readily accessible to the service technician and represents the conditions existing on the date of inspection. It does not cover latent or manufacturing defects, the internal workings of sealed equipment or structural components, and cannot be construed to cover future or unforeseen happenings.

Appliance Check:

Appliance	Stove	Furnace				
Manufacturer	GE	Interherm				
Model #	JGBS66REKMIGE 070ABW					
Serial #	LL23396P	MIB0603006O9				
Burner/Combustion Chamber	☑ Ok	☑ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Manual Shutoff	☑ Ok ☐ N/A	☑ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Sediment Trap	☑ Ok	☑ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Pilot Safety System	☑ Ok ☐ N/A	☑ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Electronic Ignition System	☑ Ok ☐ N/A	☑ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Venting System	☑ Ok ☐ N/A	☑ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Combustion Air	☑ Ok	☑ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Taken Out of Service	☐ Yes ☑ No	☐ Yes ☑ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

Container Check:

Size	Serial #	Container Fitting Leak Test	Manufacturer	Manufacture Date	Location	Tank Condition
250	M2 609434	Good	Trigas	2026	AG	Good

Regulator(s):

	Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin				☐ Correct ☐ Incorrect		
1st	Rego	LV3403TR	10/2025	☑ Correct ☐ Incorrect		
2nd	Rego	LV3403B4	02/2024	☑ Correct ☐ Incorrect	12.0	13.7

Piping System Leak Test:

Start Pressure	End Pressure	Time Held	Pass
100 PSI / ____ WC	100 PSI / ____ WC	10 Mins / ____ Mins	☑ Yes ☐ No

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass
____ PSI	____ PSI	____ Mins	☐ Yes ☐ No

Comments: _____

Customer Acknowledgment: I acknowledge, by checking each of the following items, that:
- ☑ I have informed the service technician of all gas-burning appliances, gas lines, and unused piping not connected to any gas appliance on my property.
- ☑ I have been informed of what deficiencies, repairs &/or alterations, if any, were made to my gas system or appliances.
- ☑ I have been told what to do if I smell a gas odor or otherwise suspect a gas leak and have been shown how to turn the gas supply off at the tank or cylinder.
- ☑ I have smelled propane gas and can detect its odor.
- ☑ I have been told to consider installing one or more gas detectors.
- ☑ I have received safety information and told to read it and share it with all family members.
- ☑ I am satisfied with the service work performed.

Service Technician (Print) Brandon Payne	Service Technician (Signature) Brandon Payne	Date 11/11/26
Customer (Print)	Customer (Signature)	Date

Folger Gas LLC PROPANE

www.folgergas.com

RINNAI WORK ORDER

Customer Acct #: 206334

Name RACHAEL KAY

Address 9344 BLUE RIDGE HWY

BLUE RIDGE GA 30513

Date: 11/11/26

Instructions: P/U LEASED 120 T/I 250AG W/200G @2.499 EXTEND YD LINE COD CLT

Order #: 566931

DESCRIPTION OF WORK

COMMENTS:

SERVICED BY:

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
				100.00/hr	
				100.00/hr	

FOR OFFICE USE ONLY

Performed leak check _____ Yes _____ No

Gas check attached _____ Yes _____ No

Leak check Initial _____

Start Pressure	End Pressure	Time Held	System OK

% in Tank

AMOUNT REC'D

$_____

☐ CASH ☐ CHECK #_____

☐ CREDIT CARD

#_____

EXP. DATE_____

* I have received the Consumer Safety information & material.
* I am satisfied with the work performed.
* Customer agrees to pay all costs of collection, agency fees, court costs, and reasonable attorney fees in the event of default on payment.
* Signing agrees to _____ year contract for discount.

_____

CUSTOMER SIGNATURE

Retail Price	Contract Price	
_____ Rinnai $	$	
Standard Vent Kit $	$	
Standard Install $	$	
Total $	$	
Tank Set	**New Cust Special**	
L.P. Gas /Gal 3.199	L.P. Gas /Gal 2.499	
Gallons 200	Gallons 200	
FRCC $9.79	FRCC $9.79	9.79
Fuel Total 639.80	Fuel Total 499.80	499.80
Tank Lease/YR 99.00	1st yr Lease FREE	FREE
Total Materials		
Sub-Total		
Sales Tax		
Tank Set Fee $250	Tank Set Fee 20.00	20.00
Safety Inspection $129.95	$29.95	29.95
Total Labor		
Total charges		
Prepay Bal On Account		
Safe Appliance Savings		585.73
Safe Appliance Rebate		450.00
TOTAL BALANCE DUE		