



INVOICE

No 11394

HOME OWNED & OPERATED

P.O. BOX 506 • BAXLEY, GEORGIA 31515
2174 HATCH PARKWAY SOUTH • BAXLEY, GEORGIA 31513 • Tel. (912) 367-1151

NAME	<u>Southern Ground Esthetics</u>	ACCOUNT NO.	_____
MAIL ADDRESS	<u>12 Wilson Street</u>	DATE ORDERED	_____
CITY/STATE/ZIP	<u>Hazlehurst GA 31539</u>	DATE PROMISED	_____
PHONE	<u>931-200-1361</u>	DATE COMPLETED	<u>6-9-26</u>
LOCATION	<u>Tiffany Becker</u>	TERMS	_____

INSTRUCTIONS set 120 gallon tank + install tankless water heater

QTY.	TAG NO. AND DESCRIPTION OF APPLIANCE/MATERIAL	UNIT PRICE	SALES AMOUNT
1	Rinnai RE199e tankless water heater w/ isolation valves, serial # TJ.4A-143220		1500 00
100	gallon of propane	2 89	289 00
15'	1/2" coated copper tubing	3 99	59 85
1	1/2" cut off valve		16 95
2	1/2" flare nut	1 60	3 20
1	1/2" flare swivel		3 99
1	1/2" x 3/4" female adaptor		3 19
2	3/4" per male adaptor	2 69	5 38

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:

1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐

SERVICES PERFORMED

set 120 gallon tank, installed tankless water heater, ran gas line, ran pressure check

TOTAL MATERIAL

1881 56

TOTAL TIME

HOURS

LABOR

360 00

THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME

SERVICES PERFORMED

BY

Daniel

SUBTOTAL

SALES TAX

150 52

TOTAL DUE

2392 08

X CUSTOMER'S SIGNATURE

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

INSTALLATION OR TURN ON	REMOVAL OR TURN OFF	LEAK AND PRESSURE TEST	
		HIGH	LOW
SIZE: <u>120</u>	SIZE	START LOCK UP:	START LOCK UP:
S/N: <u>25A067310</u>	S/N:	TANK OFF PRESSURE:	TANK OFF PRESSURE:
GALLONS OR READING: <u>100 gal</u>	GALLONS OR READING:	AFTER 10 MINUTES:	AFTER 10 MINUTES:
		PRESSURE AS LEFT:	PRESSURE AS LEFT:

RECEIVED BY

DATE

SERVICES RECEIVED BY

WHITE/CUSTOMER'S COPY; YELLOW/POSTING COPY; PINK/FILE COPY

GASCheck - Gas Appliance System Check

Account Name _____ Invoice Number _____ Date 6/9/26
 Name Southern Ground Esthetics Company Sikes Propane, Inc.
 Address 12 Wilson Street Call Taken By _____
 City Hazlehurst State GA Zip 31539 Telephone (Cell) 931-200-1361 (Home) _____

Appliance Check

Appliance	<u>water heater</u>					
Manufacturer	<u>Rinnai</u>					
Model #	<u>RE199e</u>					
Serial #	<u>TJUA-143</u> <u>220</u>					
BTL's	<u>199,000</u>					
Burner / Com. Chamber	<u>ok</u>					
Man. Shutoff / Sed. Trap	<u>installed</u>					
Control / Pilot Safety System	<u>ok</u>					
Venting System	<u>ok</u>					
Age	<u>new</u>					
Taken Out Of Service Or Operation						

Container Check

Size	Serial #	Manufacturer	MFR. Date	Location	Container Condition	Relief Valve	Fittings Leak Check
<u>120</u>	<u>25A067310</u>	<u>American W.</u>	<u>2003</u>	<u>ok</u>	<u>ok</u>	<u>09-03</u>	<u>ok</u>

Pressure Test (If Applicable)

Start Pressure	End Pressure	Time Held	Pressure Held
<u>120 psi.</u>	<u>120 psi.</u>	<u>10 min.</u>	<u>0</u> <u>N</u>
			Work Order <u>0</u> <u>N</u>

Piping Check

Materials	Size	Cover / Protection
<u>coated copper</u>	<u>1/2"</u>	<u>ok</u>

System Leak Check

Start Pressure	End Pressure	Time Held	Pressure Held
<u>9 in. wc.</u>	<u>9 in. wc.</u>	<u>10 min.</u>	<u>0</u> <u>N</u>
			Work Order <u>0</u> <u>N</u>

Regulator Check

Type	Manufacturer	Date / Model	Vent Position / Protection
<u>Twin</u>	<u>Rago</u>	<u>05A2025 / LV404B39</u>	<u>n-c</u>

Safety Information Supplied:

Comments: Please note all repairs and corrections made along with any recommended actions.