Gate code 1992

C

11/4/2026 11:11:22 AM

WORK ORDER

Michael Jiles

249 New Water Way
Blairsville, GA 30512
(719) 651-5683

Customer #: 206582
Order #: 569925
Location #: 282874
Zone: B-011-MON-
Terms: Net 30

Tech:

Map Code:
Service Code: Propane Service
Description: 11/12/26 Final Hook and Hook Up Stove and Grill Call 719-651-5683 CCOF-SLM- DO NOT DRIVE ON NEW CONCRETE DRIVEWAY

Date Ordered: 11/4/2026	Scheduled Date:	Est. Completion:	Start:	Stop:

Name:
Contract:
Manufact:
Notes:
Instructions:

Last Service: 9/18/2026
SC Renewal:
Model:

Last Tune Up:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes

PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 206582

Name: MICHAEL JILES

Address: 249 NEW WATER WAY

BLAIRSVILLE GA 30512

Date: 11/12/26

Instructions: FINAL HOOK AND HOOK UP STOVE AND GRILL
CALL 719-651-5683 CCOF-SLM

Order #: 569925

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	Outdoor stove	Water heater	Grill	Stove		~~SPIRE~~
Manufacturer	Hibachise	Bradford Wht	Spire	Forno		~~750-078SP~~
Model #	N.V	F2400026104-750-078SP	FFSG56356-486LK			~~HDW750~~
Serial #	N.V.	N.V	HDW750KVHEDX	N.V.		
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
320	M260 5050	Good	Trian	2026	U.G.	Good

Regulator(s):

	Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin				☐ Correct ☐ Incorrect		
1st	Rego	LV3403TR9	08-2025	☑ Correct ☐ Incorrect		
2nd	Rego	LV4403366	05-2026	☑ Correct ☐ Incorrect	11.3	13.8

Piping System Leak Test:

Start Pressure	End Pressure	Time Held	Pass
95 PSI / ____ WC	95 PSI / ____ WC	10 Mins / ____ Mins	☑ Yes ☐ No

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass
15 PSI	15 PSI	10 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) Jeff Dillard	Service Technician (Signature) Jeff Dillard	Date 11-12-26
Customer (Print)	Customer (Signature)	Date

Folger Gas LLC PROPANE

www.folgergas.com

RINNAI
WORK ORDER

Customer Acct #: 206582
Name MICHAEL JILES
Address 249 NEW WATER WAY
BLAIRSVILLE, GA 30512

Date: 8/26/26
Instructions: DROP 325UG W/50G@2.499G DROP ANODE BA CALL 719-651-5683 CCOF
Order #: 537086

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 2.999	L P Gas /Gal 2.499	
Gallons 50	Gallons 50	
FRCC $9.79	FRCC $9.79	9.79
Fuel Total 149.95	Fuel Total 124.95	124.95
Tank Lease/YR 129.00	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		494.78
Safe Appliance Rebate		250.00
TOTAL BALANCE DUE		