√SLM

11/3/2026 4:37:54 PM

WORK ORDER

Stephen Cruse

93 Chinquapin Ridge Road
Morganton, GA 30560
(706) 455-0353

Customer #: 207088
Order #: 569776
Location #: 283491
Zone:
Terms: Net 30

Tech: _____

Map Code:
Service Code: Propane Service
Description: 11/13/26 T/I 120AG W/100G @ 3.799 Run line from tank to house. CC stove kit on site. Call 706-455-0353 CCOF-SLM

Date Ordered: 11/3/2026	Scheduled Date:	Est. Completion:	Start:	Stop:

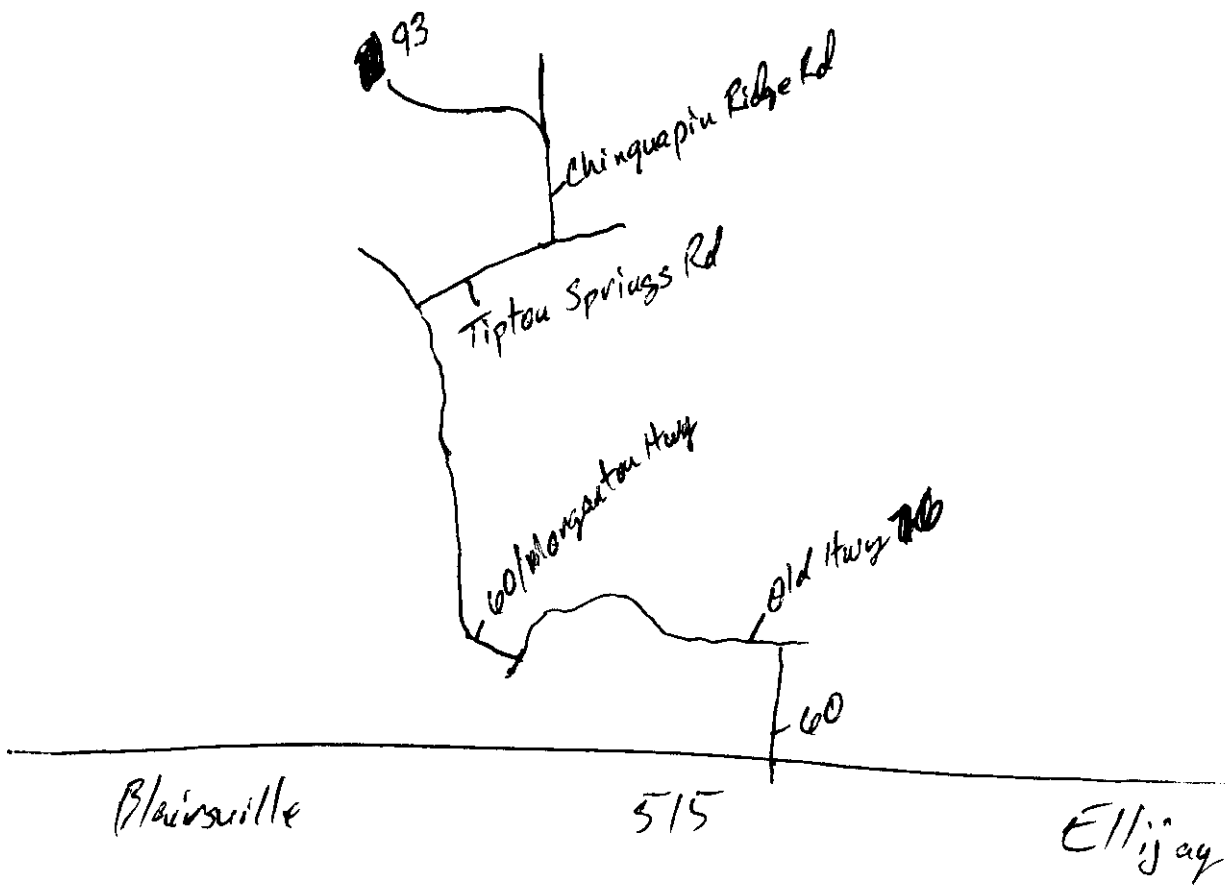
Name:
Contract:
Manufact:
Notes:
Instructions:

Last Service:
SC Renewal:
Model:

Last Tune Up:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 207088

Name: STEPHEN CRUSE

Address: 93 CHINQUAPIN RIDGE ROAD

MORGANTON GA 30560

Date: 11/13/26

Instructions: T/L 120AG W/100G @ 3.799 RUN LINE FROM TANK TO HOUSE CC STOVE KIT ON SITE CALL 706-455-0353 CCOF-SLM

Order #: 569776

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	Store					
Manufacturer	MayTag					
Model #	MFG58030220					
Serial #	12e2013127					
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
120	1376714	Good	Worthington	2016	AG	Good

Regulator(s):

	Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin				☐ Correct ☐ Incorrect		
1st	Rego	LV3403TR	04-22	☑ Correct ☐ Incorrect		
2nd	Rego	LV3403B4	07-20	☑ Correct ☐ Incorrect	11.1	12.9

Piping System Leak Test:

Start Pressure	End Pressure	Time Held	Pass
50 PSI / ____ WC	50 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)	Service Technician (Signature)	Date
Colin Flannery	Colin Flannery	11-13-26
Customer (Print)	**Customer (Signature)**	**Date**
	Customer not Present	

FolgerGas LLC PROPANE

www.folgergas.com

RINNAI WORK ORDER

Customer Acct #: 207088
Name STEPHEN CRUSE
Address 93 CHINQUAPIN ROAD
MORGANTON GA 30560

Date: 11/13/26
Instructions: T/I 120AG W/100G @ 3.799 RUN LINE FROM TANK TO HOUSE CC STOVE KIT ON SITE CALL 706-455-0353 CCOF-SLM
Order #: 569776

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	3.799	L.P. Gas /Gal	3.799	
Gallons	100	Gallons	100	
FRCC	$9.79	FRCC	$9.79	9.79
Fuel Total	379.90	Fuel Total	379.90	379.90
Tank Lease/YR	99.00	1st yr Lease	99.00	99.00
Total Materials				
Sub-Total				
Sales Tax				
Tank Set Fee	$250	Tank Set Fee	FREE	FREE
Safety Inspection	$129.95		$29.95	
Total Labor				
Total charges				
Prepay Bal On Account				
Safe Appliance Savings				350.00
Safe Appliance Rebate				50.00

TOTAL BALANCE DUE