



INVOICE
No. 10972

HOME OWNED & OPERATED

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

NAME	<u>Scotty Turner</u>	ACCOUNT NO.	_____
MAIL ADDRESS	<u>929 Jeffery Turner Rd.</u>	DATE ORDERED	_____
CITY/STATE/ZIP	<u>Baxley GA 31513</u>	DATE PROMISED	_____
PHONE	<u>912-240-4451</u>	DATE COMPLETED	<u>10-6-25</u>
LOCATION	_____	TERMS	_____

INSTRUCTIONS install tankless water heater

QTY	TAG NO. AND DESCRIPTION OF APPLIANCE/MATERIAL	UNIT PRICE	SALES AMOUNT
1	<u>Rinnai RE140e tankless water heater serial # SG.UA-104641</u>		<u>1075 00</u>

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER: 1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/> 2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>	SERVICES PERFORMED <u>installed tankless water heater, ran pressure check, lit & checked out appliances</u>	TOTAL MATERIAL	
	TOTAL TIME _____ HOURS	LABOR	<u>380 00</u>

THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	SERVICES PERFORMED BY <u>Daniel [Signature]</u>	SUBTOTAL	
X _____ CUSTOMER'S SIGNATURE		SALES TAX	<u>86 00</u>
		TOTAL DUE	<u>1541 00</u>

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				-GPA rebate 200.00 AMOUNT REMOVED \$ <u>1341.00</u>
INSTALLATION OR TURN ON	REMOVAL OR TURN OFF	LEAK AND PRESSURE TEST		RECEIVED BY _____
		HIGH	LOW	
SIZE:	SIZE:	START LOCK UP:	START LOCK UP:	DATE _____
S/N:	S/N:	TANK OFF PRESSURE:	TANK OFF PRESSURE:	SERVICES RECEIVED BY _____
GALLONS OR READING:	GALLONS OR READING:	AFTER 10 MINUTES:	AFTER 10 MINUTES:	
		PRESSURE AS LEFT:	PRESSURE AS LEFT:	



Sikes Propane Safety Check

Customer name: TURNER, SCOTTY

Date: 10-06-2025

Street: 929 JEFFERY TURNE...

City: BAXLEY

State: GA

Zip: 31513

Account No: SP202405070000931

Sub Acc. Number SP202405070000931

Customer Email

Phone Number: 912-240-4451

Salesman Name: Daniel Sikes

Purpose Of Service:

- Public Assembly
- New Appliance Service
- Leak Check
- New Customer Installation Service
- Out Of Gas
- System Repair Service
- Odor Complaint
- Move-In(New Renter/Owner)
- Other Services
- Line Locate
- Outside Visual Inspection

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.

Tank/Cylinder:

	Tank 1
Size:	325
Serial No:	2SH007824
Manufacturer:	American Welding
Cap On Relief Valve:	Yes

High Pressure Test:

	Initial	Retest
Start Pressure:	150 P.S.I	P.S.I
End Pressure:	150 P.S.I	P.S.I
Start Time:	10:20:AM	
End Time:	10:30:AM	
Time Held:	10	
Pressure Held:	Yes	Yes

Intermediate Pressure Test:

	Initial	Retest
Start Pressure:	P.S.I	P.S.I
End Pressure:	P.S.I	P.S.I
Start Time:		
End Time:		
Time Held:		
Pressure Held:	Yes	Yes

Appliances:

	Water Heater
Ids:	
Manufacturer:	Rinnai
Year Manufactured:	2025
Model:	RE140e
Btu:	140000
Serial No:	SG-UA-104641
Manual Shutoff:	Existing
Sediment Trap:	NA
Vented:	NA
Warning Tag:	NA
Warning Tag Number:	
Warning Tag Comments:	
Images	

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I will notify propane company if propane service is interrupted for any reason, including installation of new appliance, so a leak check and system test can be completed.

I have informed the service technician of all gas-burning appliances and gas lines on my property.

I have smelled the propane gas and can detect its odor.

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 off at the container.

I have been told that the odorant giving propane its distinctive smell can fade or diminish in intensity and that certain physical limitations or conditions might prevent me smelling a gas leak.

I have been told to consider installing one or more propane gas detectors and carbon monoxide detectors per manufacturer's instructions listed by Underwriters Laboratory.

I have received safety information and been told to read it and share it with all family members.

I am satisfied with the service work performed.

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Locked tank out with POL lock?

I, Christy Reese certify that I have completed the system check and installation review as described above. I, TURNER, SCOTT V have read and fully understand this certificate

DANIEL SIKES

TURNER, SCOTT V

Employee Signature

10-27-2025

Customer Signature

10-27-2025