

WORK ORDER

Cathy Lemons

181 Ridgeline Rd
Talking Rock, GA 30175
(850) 501-5267

Customer #: 204043
Order #: 405524
Location #: 279746
Zone: B-042-TUE-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 10-17-25 Run yard line , Final hook up Gate code 1527 Chad
770-626-6750

Date Ordered: 10/8/2025	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name:	Last Service: 9/17/2025	Last Tune Up:
Contract:	SC Renewal:	
Manufact:	Model:	
Notes:		
Instructions:		

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
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PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 204043
 Name: CATHY LEMONS
 Address: 181 RIDGELINE RD
TALKING ROCK GA 30175

Date: 10-17-25
 Instructions: RUN YARD LINE FINAL HOOK UP
CHAD 770-626-6750 GATE CODE 1527
 Order #: 405524

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	<u>W/H</u>	<u>Lighter</u>				
Manufacturer	<u>Bradford White</u>	<u>NV</u>				
Model #	<u>RG2PV50T6N19</u>	<u>NV</u>				
Serial #	<u>3F55483285</u>	<u>NV</u>				
Burner/Combustion Chamber	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok
Manual Shutoff	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A			
Sediment Trap	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok
Pilot Safety System	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A			
Electronic Ignition System	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A			
Venting System	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A			
Combustion Air	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok
Taken Out of Service	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			

Container Check:

Size	Serial #	Container Fitting Leak Test	Manufacturer	Manufacture Date	Location	Tank Condition
<u>500</u>	<u>m2505667</u>	<u>Good</u>	<u>Triarc</u>	<u>2025</u>	<u>UC</u>	<u>Good</u>

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
1st <u>Reso</u>	<u>3403TR</u>	<u>12-24</u>	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd <u>Reso</u>	<u>3403B4</u>	<u>1-25</u>	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	<u>11.1</u>	<u>12.4</u>

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
<u>105</u> PSI	<u>105</u> PSI	<u>10</u> Mins	<input checked="" type="checkbox"/> Yes	<u>15</u> PSI	<u>15</u> PSI	<u>10</u> Mins	<input checked="" type="checkbox"/> Yes
____ WC	____ WC	____ Mins	<input type="checkbox"/> No				<input type="checkbox"/> 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) <u>Alvin Wiley</u>	Service Technician (Signature) 	Date <u>10-17-25</u>
Customer (Print) <u>Customer not present</u>	Customer (Signature)	Date



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RINNAI WORK ORDER

Customer Acct #: 204043
 Name CATHY LEMONS
 Address 181 RIDGELINE RD
TALKING ROCK GA 30175

Date: 9-17-25
 Instructions: DROP 500UG W/50G @ 2.599 THEY WILL BURY. 1 ANODE BAG CCOF SM GATE 1527
850-501-5267
 Order #: 396097

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	2.599
Gallons	50	Gallons	50
FRCC	\$9.79	FRCC	\$9.79
Fuel Total	149.95	Fuel Total	129.95
Tank Lease/YR	129.00	1st yr Lease	FREE
Total Materials			
Sub-Total			
Sales Tax			
Tank Set Fee	\$250	Tank Set Fee	20.00
Safety Inspection	\$129.95		\$29.95
Total Labor			
Total charges			
Prepay Bal On Account			
Safe Appliance Savings			487.33
<i>Safe Appliance Rebate</i>			200.00
TOTAL BALANCE DUE			