

INVOICE

FITZGERALD WATER LIGHT AND BOND
P.O. Box 667
FITZGERALD, GA 31750

(229) 426-5400

TO: SANDRA YOUNG
221 KATHLEEN DR.
FITZGERALD, GA 31750

INVOICE NO: 54712
DATE: 10/28/25

CUSTOMER NO: 2477/2564

TYPE: RO - RESIDENTIAL COUNTY BenHil

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1.00	MDSE - Appliances SER #TE CA 003250 Inventory item selected for charge code: AP-60000163014 Quantity: 1.00 TNKLESS WTR HTR R53 LP	699.95	699.95
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163013 Quantity: 1.00 PIPE COV ENCL 4 R53V	193.00	193.00
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163015 Quantity: 1.00 VALVE KIT FOR RV53EP	95.76	95.76
1.00	Sales Tax	79.10	79.10

TOTAL DUE: \$1,067.81

PLEASE DETACH AND SEND THIS COPY WITH REMITTANCE

DATE: 10/28/25 DUE DATE: 11/07/25
CUSTOMER NO: 2477/2564

NAME: YOUNG, SANDRA
TYPE: RO - RESIDENTIAL COUNTY BenHil

REMIT AND MAKE CHECK PAYABLE TO:
FITZGERALD WATER LIGHT AND BOND
P.O. Box 667
FITZGERALD GA 31750

INVOICE NO: 54712
TERMS: NET 10 DAYS

AMOUNT:

	\$1,067.81
GA Rebate	- 200.00
	<u>\$ 867.81</u>

Account Number 2477
 Name Sandra Young
 Address 221 Kathleen Drive

Call Date: 11/5/25 Date Requested: 11/5/25

Instructions: mount water heater

Telephone Office: _____ Home: _____

Appliance Check Item:	Central Heating 1	Space Heater 2	TANKS Water Heater 3	Range 4	Clothes Dryer 5	6	7
Manufacturer			Rinnai				
Model No.			V53de				
Serial No.			TE-CA-003250				
Location			Extension				
BTU	000	000	120 000	N/A	N/A	000	000
Age			new				
Manual Shutoff (Installed/Existing)			installed				
Venting			gd				

TANK/CYLINDER

SIZE	SERIAL NUMBER	MFR.	MFR. DATE	Last Test Date	Location	Tank Cond.	Paint	Pigtail	Fittings	Gauge	Relief Valve			Fittings Leak Test
											Cond.	Date	Cap	
<u>Existing</u>														<u>5 min</u>

PIPING/REGULATOR OPERATION/CONDITION

SINGLE STAGE	PIPING		REGULATOR DATE CODE	REGULATOR CONDITION	MFR.	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE
	MATERIAL	SIZE							
	<u>Copper</u>	<u>1/2</u>	<u>02/23</u>	<u>new</u>	<u>Reg</u>	<u>LV404B4</u>	<u>Level</u>	<u>Done</u>	<u>11</u> IN. WC
TWO STAGE	1ST								PSIG
	2ND								IN. WC

SYSTEM LEAK TEST

SINGLE STAGE	Start Pressure	End Pressure	Time Held	System OK
	(Inches W.C.)	(Inches W.C.)		
	<u>11</u>	<u>11</u>	<u>5 min</u>	<u>OK</u>
TWO STAGE	1ST			
	2ND			

Comments: _____

This inspection covers (propane/LP-Gas) items and equipment visible and 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 working of sealed equipment, or structural components, and cannot be construed to cover future defects or unforeseen happenings.

Reference Invoice No. WFO545932 Date 11/5/25
 (Mo. Day Yr.)

I, Sandra Young
 (Please Print)

I, Chris Woods
 (Please Print)

Sandra Young
 Customer's Signature

Certify that I have completed the System Check as prescribed
 Performed Odor Test Yes
 Performed Pressure Test Yes
 Left Consumer Safety Info Yes
Chris Woods
 Delivery Man / Technician Signature