



INVOICE
No. 11037

HOME OWNED & OPERATED

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

NAME	<u>Joe Lillard</u>	ACCOUNT NO.	_____
MAIL ADDRESS	<u>267 J.E. Lillard Rd.</u>	DATE ORDERED	_____
CITY/STATE/ZIP	<u>Lyons GA 30436</u>	DATE PROMISED	_____
PHONE	<u>912-326-0977</u>	DATE COMPLETED	<u>12-12-25</u>
LOCATION	_____	TERMS	_____

INSTRUCTIONS set 120 gallon tank, install tankless water heater

QTY	TAG NO. AND DESCRIPTION OF APPLIANCE/MATERIAL	UNIT PRICE	SALES AMOUNT
100	<u>gallon of propane</u>		259 00
1	<u>Rinnai RE160e tankless water heater w/insulation valves, serial # TB.UA-028725</u>		1150 00
50'	<u>1/2" coated copper tubing</u>	3 49	174 50
1	<u>Rego LV3403B4 second stage regulator</u>		59 95
1	<u>1/2" cut off valve</u>		16 95
4	<u>1/2" flare nut</u>	1 60	6 40
all	<u>other gas fittings, thread sealant</u>		24 70
all	<u>power wire, male plug in</u>		49 82
all	<u>water pipe, water fittings, pipe insulation</u>		56 00

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	TOTAL MATERIAL
	<u>set 120 gallon tank, ran gas line, installed tankless water heater, ran pressure check, lit & checked out water heater</u>	1797 32
	TOTAL TIME _____ HOURS	LABOR 600 00

THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	SERVICES PERFORMED	SUBTOTAL
X _____	BY <u>Daniel Sikes</u>	SALES TAX 143 79
CUSTOMER'S SIGNATURE		TOTAL DUE 2,541 11

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				- 6% rebate 200.00 AMOUNT 2341.11 \$ 2341.11
INSTALLATION OR TURN ON	REMOVAL OR TURN OFF	LEAK AND PRESSURE TEST		
SIZE: <u>120</u>	SIZE	HIGH	LOW	RECEIVED BY _____
S/N: <u>1527927</u>	S/N:	START LOCK UP:	START LOCK UP:	DATE _____
GALLONS OR READING: <u>100 gal</u>	GALLONS OR READING:	TANK OFF PRESSURE:	TANK OFF PRESSURE:	SERVICES RECEIVED BY _____
		AFTER 10 MINUTES:	AFTER 30 MINUTES:	
		PRESSURE AS LEFT:	PRESSURE AS LEFT:	

GASCheck - Gas Appliance System Check

Account Name _____ Invoice Number _____ Date 12/12/25
 Name Joe Lillard Company Sikes Propane, Inc.
 Address 267 J.E. Lillard Rd. Call Taken By _____
 City Lyons State GA Zip 30436 Telephone (Cell) 912-326-0977 (Home) _____

Appliance Check

Appliance	<u>water heater</u>				
Manufacturer	<u>Rinnai</u>				
Model #	<u>RE160e</u>				
Serial #	<u>TB.4A-02 8725</u>				
BTU's	<u>160,000</u>				
Burner / Com. Chamber	<u>ok</u>				
Man. Shutoff / Sed. Trap	<u>installed</u>				
Control / Pilot Safety System	<u>ok</u>				
Venting System	<u>ok</u>				
Age	<u>new</u>				
Taken Out Of Service Or Operation					

Container Check

Size	Serial #	Manufacturer	MFR. Date	Location	Container Condition	Relief Valve	Fittings Leak Check
<u>120</u>	<u>1527927</u>	<u>Quality Steel</u>	<u>2024</u>	<u>ok</u>	<u>new</u>	<u>09D22</u>	<u>ok</u>

Pressure Test (If Applicable)

Start Pressure	End Pressure	Time Held	Pressure Held
<u>105psi.</u>	<u>105psi.</u>	<u>10min.</u>	<input checked="" type="radio"/> <input type="radio"/> <input type="radio"/>
			Work Order <input type="radio"/> <input type="radio"/>

Piping Check

Materials	Size	Cover / Protection
<u>coated copper</u>	<u>1/2"</u>	

System Leak Check

Start Pressure	End Pressure	Time Held	Pressure Held
<u>9in.wc.</u>	<u>9in.wc.</u>	<u>10min.</u>	<input checked="" type="radio"/> <input type="radio"/> <input type="radio"/>
			Work Order <input type="radio"/> <input type="radio"/>

Regulator Check

Type	Manufacturer	Date / Model	Vent Position/ Protection
<u>first</u>	<u>Rago</u>	<u>03C2025 / LV4403TR9</u>	<u>u-c</u>
<u>second</u>	<u>Rago</u>	<u>04C2025 / LV3403BY</u>	<u>down</u>

Safety Information Supplied: _____

Comments: Please note all repairs and corrections made along with any recommended actions.