

Monitor # 24962970 85%  
Tank # m2428001

A

4/22/2025 8:48:56 AM

# WORK ORDER

**Thomas Donnelly**

890 Cutcane Road  
Mineral Bluff, GA 30559  
(321) 693-7091

Customer #: 202517  
Order #: 352844  
Location #: 277855  
Zone: B-014-WED-  
Terms: Net 30

**Tech:** Alvin Wilcox

**Map Code:**

**Service Code:** Propane Service

**Description:** Swap w/ pre-existing tank 250ag w/10g@2.999, pump over,  
lines there. T/I RX 160 Rinnai w 3yr. disconnect stove. \$25.00  
Haul off old w/h.-per Pete Call (321) 693-7091 \$ on site - VM

<b>Date Ordered:</b> 4/8/2025	<b>Scheduled Date:</b> 4/22/2025	<b>Est. Completion:</b> 4/22/2025	<b>Start:</b> 07:00 AM	<b>Stop:</b> 09:00 AM
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<b>Name:</b>	<b>Last Service:</b>	<b>Last Tune Up:</b>
<b>Contract:</b>	<b>SC Renewal:</b>	
<b>Manufact:</b>	<b>Model:</b>	
<b>Notes:</b>		
<b>Instructions:</b>		

**Service History:**

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

Customer Account #: 202517

Name: THOMAS DONNELLY

Address: 890 CUTCANE ROAD  
MINERAL BLUFF, GA 30559

Date: 4/22/25

Instructions: SWAP TANK W/250AG W/10G@2.99, P/O,  
LINES THERE. T/17.5 RINNAI W 3YR D/C STOVE &  
HAUL OFF W/ OLD W/H. 25.00 -PER PETE. \$ ON

Order #: 352844

SITE. VM

**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	Range w/hi	Generator				
Manufacturer	Rinnai	E-Genac				
Model #	Reu-NB2530FF-US	Gen72099				
Serial #	SHIBA-140450	3008874969				
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	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input 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	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input 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	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input 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	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input 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	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input 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
250	072428001	Pass	Triarc	2024	Ag	Good

## Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
1st	Riso	3403TR	12-24	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	
2nd	Riso	4403B4	NV	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	11.4

## Piping System Leak Test:

## Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
80 PSI	80 PSI	10 Mins	<input checked="" type="checkbox"/> Yes	15 PSI	15 PSI	10 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)	Service Technician (Signature)	Date
Thomas Donnelly	[Signature]	4-22-25
Customer (Print)	Customer (Signature)	Date
	[Signature]	4/22/25





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## RINNAI WORK ORDER

Customer Acct #: 202517

Name \_\_\_\_\_

Address 890 CUTCANE ROAD

MINERAL BLUFF, GA 30559

Date: 04/22/2025

Instructions: SNAP W/ EXISTING TANK 250AG W/10G@2.9  
PUMP OVER LINES THERE-T/I RX160 RINNAI  
W/3YR.DISCONNECT STOVE. \$25 HAUL OFF OLD W/H.  
CALL:321-693-7091 \$\$ ONSITE - VM/JB  
Order #: 352844

### DESCRIPTION OF WORK

COMMENTS: Installed RX160

SERVED BY: AW / SC

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
4-22-25	9:00 AM	1:00 PM		100.00/hr	150.00
	1.5 hr Free	1 hour lunch		100.00/hr	

### FOR OFFICE USE ONLY

Performed leak check ☒ Yes ☐ No

Gas check attached ☒ Yes ☐ No

Leak check Initial AW

Start Pressure 80 End Pressure 80 Time Held 80 System OK yes

% in Tank 85

### AMOUNT REC'D

\$ 2,517.48

☐ 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 3 year contract for discount.

CUSTOMER SIGNATURE

### Retail Price

### Contract Price

RX160 Rinnai	\$ 2068.00	\$ 1999.95
Standard Vent Kit	\$ 481.95	\$ 0.00
Standard Install	\$ 400.00	\$ 0.00
Total	\$ 2949.95	\$ 1999.95

### Tank Set

### New Cust Special

L.P. Gas /Gal	L.P. Gas /Gal
Gallons	Gallons
FRCC \$9.79	FRCC \$9.79
Fuel Total	Fuel Total
Tank Lease/YR	1st yr Lease
Total Materials	
Sub-Total	2324.90
Sales Tax	150.50
Tank Set Fee \$250	Tank Set Fee
Safety Inspection \$129.95	\$29.95
Total Labor	150.00
Total charges	
Prepay Bal On Account	

Safe Appliance Savings	950.00
Safe Appliance Rebate	200.00

TOTAL BALANCE DUE

2475.40

2517.48