INVOICE

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

(229) 426-5400

TO: JULIE WRIGHT
260 SLY HILL RD
OCILLA, GA 31774

INVOICE NO: 53729
DATE: 6/04/25

CUSTOMER NO: 2325/2412

TYPE: RR - Residential Irwin Co

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1.00	MDSE - Appliances SERIAL# SH.BA 132692 Inventory item selected for charge code: AP-60000163003 Quantity: 1.00 11.1 GPM NG/LP	1,581.84	1,581.84
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163022 Quantity: 1.00 PCD-035MP	185.40	185.40
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163033 Quantity: 1.00 OUTDOOR VENT CAP	45.00	45.00
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163032 Quantity: 1.00 PLUMBING INSTALLATION KIT	69.60	69.60
1.00	Sales Tax	150.55	150.55

TOTAL DUE: $2,032.39

PLEASE DETACH AND SEND THIS COPY WITH REMITTANCE

DATE: 6/04/25   DUE DATE: 6/16/25
CUSTOMER NO: 2325/2412

NAME: WRIGHT, JULIE
TYPE: RR - Residential Irwin Co

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

INVOICE NO: 53729
TERMS: NET 10 DAYS

AMOUNT: $2,032.39

[handwritten] GA
Rebate - 200.00
$1,832.39

FITZGERALD UTILITIES

PROPANE SAFETY CHECK
FOR RESIDENTIAL CUSTOMERS

№ 002873

Account Number: 2325

Name: Julie Wright
Address: 260 Sly Hill Rd
Ocilla, GA

Call Date: 2/24/25
Date Requested: 3/12/25
Instructions: Set (2) tanks - mount water heater & hook up pool heater

Telephone Office: _____ Home: _____

Appliance Check Item:	Central Heating 1	Space Heater 2	Water Heater 3	Range 4	Clothes Dryer 5	6	Pool heater 7
Manufacturer			Rinnai				Sta-Rite
Model No.			RX199i				SR400LP
Serial No.			SH·BA-132692				?
Location			outside				outside
BTU	000	000	199 000	N/A	N/A	000	399 000
Age			new				used
Manual Shutoff (Installed/Existing)			installed				installed
Venting			gd				gd

TANK/CYCLINDER (2 TANK) 167K + 168K

	SIZE	SERIAL NUMBER	MFR.	MFR. DATE	Last Test Date	Location	Tank Cond.	Paint	Pigtail	Fittings	Gauge	Relief Valve Cond.	Relief Valve Date	Relief Valve Cap	Fittings Leak Test
167K	120	F00445870	Quality Steel	2024											
168K	120	F00446089		2024	3/12/25	outside	New	New	New	New	New	New		New	5min

PIPING/REGULATOR OPERATION/CONDITION

X 2 Regulator

SINGLE STAGE		PIPING MATERIAL	PIPING SIZE	REGULATOR DATE CODE	REGULATOR CONDITION	MFR.	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE
		Copper	1/2	02/23	New	Rego	LV404B4	Level	Dome	11 IN. WC
TWO STAGE	1ST									
	2ND									PSIG

SYSTEM LEAK TEST

SINGLE STAGE		Start Pressure (Inches W.C.)	End Pressure (Inches W.C.)	Time Held	System OK
		11 (PSIG)	11 (PSIG)	5min	✓ OK
TWO STAGE	1ST				
	2ND	(Inches W.C.)	(Inches W.C.)		

IN. WC

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.

I, Julie M Wright
(Please Print)

- Know how to turn off gas in case of emergency.
- Have smelled propane and can detect its odor.
- Have received the Consumer Safety Information.
- Had gas system deficiencies and / or corrections, if any, clearly explained to me.
- Am satisfied with the service work performed.

Julie M Wright
Customer's Signature

Reference Invoice No. WF0524806   Date 3/12/25
(Mo. Day Yr.)

I, Chris Woods
(Please Print)

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