



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: **201096**

Name: **DALE LEATHERMAN**

Address: **411 BUSY HEAD RD**

CHERRY LOG, GA 30522

Date: **11/07/24 T/I RINNAI 7.5 RUN LINES FOR W/H & STOVE. CAP OFF STOVE LINES, T/I MONITOR**

Instructions: **CALL 772-633-2424 CCOF VM**

Order #: **280807**

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	Water Heater					
Manufacturer	Rinnai					
Model #	Re4-VC258FFUD-US					
Serial #	PD.LA-067302					
Burner/Combustion Chamber	<input checked="" type="checkbox"/> Ok	<input 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 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 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 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 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 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	<input type="checkbox"/> Ok <input type="checkbox"/> N/A
Combustion Air	<input checked="" type="checkbox"/> Ok	<input 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 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
120	m4543	Good	Worth J	NV	AE	Good

Regulator(s):

Manufacturer		Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin	Rico	404 B39	NV	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	11.4	12.1
1st				<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd				<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect		

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
85 PSI	85 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) Alvin W. New	Service Technician (Signature) 	Date 11-8-24
Customer (Print) Dale Leatherman	Customer (Signature) 	Date



www.folgergas.com

RINNAI WORK ORDER

Customer Acct #: 201096
 Name DALE LEATHERMAN
 Address 411 BUSHY HEAD RD
CHERRY LOG, GA 30522

Date: 11/07/24
 Instructions: T/I RINNAI 7.5 RUN LINES TO W/H AND
STOVE, CAP OFF STOVE LINE. T/I MONITOR
CALL 772-633-2424 CCOF VM
 Order #: 280807

DESCRIPTION OF WORK	
COMMENTS: <u>Installed Rinnai 7.5</u>	
SERVICED BY: <u>AW /mlt</u>	

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
<u>11-8-24</u>	<u>8:45 Am</u>	<u>11:55 Am</u>	<u>1.5HR</u>	<u>100.00</u> XXXXX <u>100.00</u> XXXXX	INCLUDED IN CONTRACT PRICE

FOR OFFICE USE ONLY

Performed leak check Yes No
 Gas check attached Yes No
 Leak check Initial AW

Start Pressure 85 End Pressure 85 Time Held 10 System OK Yes

% in Tank 36

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 3 year contract for discount.

[Signature]
 CUSTOMER SIGNATURE

Retail Price		Contract Price	
<u>7.5</u> Rinnai	\$ <u>1673.00</u>	\$	<u>1299.95</u>
Standard Vent Kit	\$ <u>426.95</u>	\$	<u>0.00</u>
Standard Install	\$ <u>400.00</u>	\$	<u>0.00</u>
Total	\$ <u>2499.95</u>	\$ <u>1299.95</u>	<u>1299.95</u>
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			<u>1,825.03</u>
Sales Tax			<u>115.53</u>
Tank Set Fee	\$250	Tank Set Fee	
Safety Inspection	\$129.95		\$29.95
Total Labor			<u>175.00</u>
Total charges			
Prepay Bal On Account			
Safe Appliance Savings			<u>1200.00</u>
<u>Safe Appliance Rebate</u>			<u>200.00</u>
TOTAL BALANCE DUE			<u>1,940.56</u>