

Confirmed G
←

11/27/2024 11:42:26 AM

WORK ORDER

MARTHA MOLER

7980 Blue Ridge Dr
Blue Ridge, GA 30513
(706) 851-7724

Customer #: 28590
Order #: 288170
Location #: 250454
Zone: B-015-FRI-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 12/03/24 T/I 250g w/200g@2.999. Call Martha 706-851-7724
CCOF VM

Date Ordered: 11/27/2024	Scheduled Date:	Est. Completion:	Start:	Stop:
--------------------------	-----------------	------------------	--------	-------

Name: Heating System

Last Service:

Last Tune Up:

Contract:

SC Renewal:

Manufact:

Model:

Notes:

Instructions:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
------	-----------	------	------------------	---------------



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 28590
 Name: Martha Moler
 Address: 7980 Blue Ridge Dr
Blue Ridge, GA 30513

Date: 12/03/2024
 Instructions: T/I 250g w/200g@2.999. Call Martha
706-851-7724 CCOF VM
 Order #: 288170

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	SPare Heater	Furnace				
Manufacturer	Empire	Carrier				
Model #	NV	CNPUT6024ALAAAAA				
Serial #	NV	1314X23437				
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	m0425011	Good	Grinity	2004	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	Risc 3403TR9	12-23	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd	Risc 3403B4	8-19	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	11.0	13.0

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
100 PSI	100 PSI	10 Mins	<input checked="" type="checkbox"/> Yes	_____ PSI	_____ PSI	_____ Mins	<input type="checkbox"/> Yes
_____ WC	_____ WC	_____ Mins	<input type="checkbox"/> No				<input type="checkbox"/> No

Comments:

Customer Acknowledgment:

- 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) <i>Alan W. Cox</i>	Service Technician (Signature) <i>[Signature]</i>	Date <u>12-3-24</u>
Customer (Print) <i>Martha Moler</i>	Customer (Signature) <i>[Signature]</i>	Date



INVOICE

Customer #:	28590
Payment Terms:	Net 30
Invoice #:	288170
Invoice Date:	2024-12-03
Total Due	\$49.95

MARTHA MOLER
 7980 Blue Ridge Dr
 Blue Ridge, GA 30513

Make Check Payable to: Folger Gas, LLC

Amount Enclosed: \$ _____

Remit To:
 Folger Gas, LLC
 PO BOX 2155
 Blue Ridge, GA 30513

Customer Name		Delivery/Service Address		Cust #	Invoice #	Inv Date
MARTHA MOLER		7980 Blue Ridge Dr - Blue Ridge, GA 30513		28590	288170	2024-12-03
Quantity	Item Number	Description	Unit Price	TOTAL		
1.00	Labor	Labor	\$49.9500	\$49.95		
1.00	Labor	Labor	\$0.0000	\$0.00		

Tank/Equipment: Heating System - Heating System

For Fuel or Service At:
 7980 Blue Ridge Dr - Blue Ridge, GA 30513

Sub Total	\$49.95
Charges	\$0.00
Tax Total	\$0.00

ACCOUNT BALANCE	\$0.00	TOTAL DUE	\$49.95
-----------------	--------	-----------	---------

12/03/2024 - Technician: Brian Bradley - Work Performed: - Set 250ag with 150 gal and hooked to existing lines leak test 100 psi for 10 min no leaks aw/sl 60%

Folger Gas, LLC
 PO BOX 2155
 Blue Ridge, GA 30513
 706-632-7606
www.folgergas.com