



✓ Confirmed
mu

6/9/2025 2:32:35 PM

WORK ORDER

William Smith

16058 Morganton Hwy
Morganton, GA 30560
(404) 788-1802

Customer #: 203957
Order #: 370209
Location #: 279632
Zone: B-013-FRI-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: ~~06/12/25~~ - T/I 250AGW/200G@2.599G. RUN YARD LINE. RUN
6/1/8 LINE TO W/H ALREADY HUNG AND VENTED. CONVERT
AND HOOK UP STOVE KIT ON SITE - CALL 404-788-0478. \$
ON SITE - CT

Date Ordered: 6/9/2025

Scheduled Date:

Est. Completion:

Start:

Stop:

Name:

Contract:

Manufact:

Notes:

Instructions:

Last Service:

SC Renewal:

Model:

Last Tune Up:

Service History:

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

Customer Account #: 203957

Date: 6/12/25

Name: WILLIAM SMITH

Instructions: T/I 250AG W200G@2.599G RUN LINES, W/H
& YARD. CONVERT STOVER, KIT ON SITE. H/U. CAL
4047880478 \$ ON SITE. CT

Address: 16058 MORGANTON HWY
MORGANTON, GA 30560

Order #: 370209

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	Stove	Waterheater				
Manufacturer	LG	Rheem				
Model #	LRGLS825F	EC0160XLP-3				
Serial #	501MMEJDS47	W112500852				
Burner/Combustion Chamber	<input 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 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 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 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 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 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 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	M2244669	Good	Triarc	2022	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	Rego MEC	1122H	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd	Rego	NV	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	11.8	12.9

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
90 PSI	90 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
Customer (Print)	Customer (Signature)	Date



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RINNAI WORK ORDER

Customer Acct #: 203957

Date: 6/12/25

Name WILLIAM SMITH

Instructions T/I250AG W200G@2.599, RUN LINES, W/H

Address 16058 MORGANTON HWY

YARD-CONVERT & H/U STOVE; KIT ON SITE CALL 4047880478

MORGANTON, GA 30560

Order #: 370209

\$ ON SITE -CT

DESCRIPTION OF WORK

COMMENTS:

SERVICED BY:

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
				100.00/hr	
				100.00/hr	

FOR OFFICE USE ONLY

Performed leak check Yes No

Gas check attached Yes No

Leak check Initial

Start Pressure End Pressure Time Held System OK

% in Tank

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 year contract for discount.

CUSTOMER SIGNATURE

Retail Price

Contract Price

Rinnai \$	\$	
Standard Vent Kit \$	\$	
Standard Install \$	\$	
Total \$	\$	

Tank Set

New Cust Special

L.P. Gas /Gal 2.999	L.P. Gas /Gal 2.599	
Gallons 200	Gallons 200	
FRCC \$9.79	FRCC \$9.79	9.79
Fuel Total 599.80	Fuel Total 519.80	519.80
Tank Lease/YR 99.00	1st yr Lease FREE	FREE
Total Materials		
Sub-Total		
Sales Tax		
Tank Set Fee \$250	Tank Set Fee 20.00	20.00
Safety Inspection \$129.95	\$29.95	29.95
Total Labor		
Total charges		
Prepay Bal On Account		

Safe Appliance Savings 512.53

Safe Appliance Rebate 250.00

TOTAL BALANCE DUE