

6/11/2025 8:12:57 AM

WORK ORDER

New Antioch Baptist Church

SNAKE NATION ROAD
BLUE RIDGE, GA 30513
(706) 632-3337

Customer #: 12574
Order #: 370464
Location #: 259838
Zone: B-010-THU-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 06/18/2025 - T/I 7.5 RINNAI W/3YR CONTRACT \$899.95 PLUS
TAX ALL LABOR INCLUDED PER KF - SEND JAMIE/ALEX
PER MIKE - GET W/JACK FOR ACCESS - INVOICE - CT

Date Ordered: 6/11/2025	Scheduled Date:	Est. Completion:	Start:	Stop:
Name: Heating System	Last Service: 6/5/2024	Last Tune Up:		
Contract:	SC Renewal:			
Manufact:	Model:			
Notes:				
Instructions:				

Service History:

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

Customer Account #: 12574

Date: 06/18/2025

Name: NEW ANTIOCH BAPTIST CHURCH

Instructions: T/I 7.5 RINNAI W/3YR CONTRACT \$899.95

Address: SNAKE NATION ROAD

PLUS TAX ALL LABOR INCLUDED PER KF-SEND ALEX/
JAMIE PER MIKE-GET W/ JACK FOR ACCESS. INVOICE-

BLUERIDGE, GA 30513

Order #: 370464

CT/JB

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	W/H					
Manufacturer	RINNAI					
Model #	RL 7.5					
Serial #	RH. CA 127000					
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 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
325	1H 41633	GOOD	AM	1998	A/G	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	Reso	34031R	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd	Reso	3404B4	<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect	11.1	12.6

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
50 PSI	50 PSI	10 Mins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	15 PSI	15 PSI	10 Mins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
WC	WC	Mins					

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) BRIAN BRADLEY	Service Technician (Signature) 	Date 6-18-25
Customer (Print) CNAPS	Customer (Signature) 	Date



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RINNAI WORK ORDER

Customer Acct #: 12574
Name NEW ANTIOCH BAPTIST CHURCH
Address SNAKE NATION ROAD
BLUE RIDGE, GA 30513

Date: 06/18/2025

Instructions: T/I 7.5 RINNAI W/3YR CONTRACT \$899.95
+TAXES ALL LABOR INCLUDED PER KF.SEND ALEX/JAMIES
PER MIKE. GET W/JACK FOR ACCESS. INVOIC-CT/JB
Order #: 370464

DESCRIPTION OF WORK
COMMENTS: <u>T/I 7.5i - RAW LINES 'N PLUMBED IN</u>
SERVICED BY: <u>BB/JC</u>

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
			1.5 /HR	100.00/hr	INCLUDED IN
				100.00/hr	CONTRACT PRICE

FOR OFFICE USE ONLY			
Performed leak check	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Gas check attached	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Leak check	Initial <u>BB</u>		
Start Pressure	End Pressure	Time Held	System OK
<u>50</u>	<u>50</u>	<u>10</u>	<input checked="" type="checkbox"/>

% in Tank

AMOUNT REC'D	
\$	
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK #	
<input type="checkbox"/> 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 <u>3</u> year contract for discount.	
<u>[Signature]</u> CUSTOMER SIGNATURE	

Retail Price	Contract Price	
7.5 Rinnai \$ 1673.00	\$ 1299.95	
Standard Vent Kit \$ 426.95	\$0.00	
Standard Install \$ 400.00	\$0.00	
Total \$ 2499.95	\$1299.95	1299.95
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		1104.85
Sales Tax		77.36
Tank Set Fee \$250	Tank Set Fee	
Safety Inspection \$129.95	\$29.95	
Total Labor	INCLUDED	-
Total charges		
Prepay Bal On Account		
Safe Appliance Savings		1200.00
Safe Appliance Rebate		200.00
		1193.17
TOTAL BALANCE DUE		1193.17