

SALES  
SERVICE  
INSTALLATION



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RH/CH

1335 US Hwy 82 W, Leesburg, GA 31763 (229) 435-6116 FAX (229) 435-6119

Order Number <b>884242</b>	Date Written 7/02/25	Taken By <b>MEH</b>	Schedule Date 7/14/25	Date Completed 7-14-2025
Branch - Customer No. 1-17220	Home 225 572-8072	Work	Time Started 9:30 A.M. P.M.	Time Completed 4:30 A.M. P.M.
Name MARSHA MCCRARY		Cell		
Address 1015 WOODCREST RD		City SYLVESTER, GA	State	Zip 31791-4349
Service Address 1015 WOODCREST RD SYLVESTER, GA		31791		

Work to be performed: INSTALL RINNAI RX160iN WITH RIKF INSTALL KIT, RXOVC OUTDOOR VENT CAP, MC-601-W CONTROLLER, AND PCD11-SHS PIPE COVER. CALLED IN BY MARSHA 225-572-8072 OR 225-572-7764 RAYMOND	Work completed Delivered installed Rinnai
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Qty:	Materials	Price	Amount	Qty:	Materials	Price	Amount
	Rx 160i			1	W-R RX160iN/P		1188.00
	SK.BA-166550			1	Rinnai Water Heater		
				1	W-R RIKF		98.00
					Install kit		
				1	W-R RXOVC		48.00
					Outdoor vent cap		
				1	W-R MC-601-W		139.00
					Controller		
				1	W-R PCD11SHS		162.00
					Pipe Cover		

Less Check		Flow Check		Lock-up Check		SHOP OR TRUCK SUPPLIES		16 50	
Manometer Reading at Start	Manometer Reading After 10 minutes	Manometer Reading Under Load	Manometer Reading			MATERIAL TOTAL		1512 50	
Central Heating	Water Heater	Range	Clothes Dryer			TRIP CHARGE			
Manufacturer	Rinnai					LABOR			
Model No.	RX160iN/P					SUB-LABOR Rebate		<200 00>	
Serial No.	SK.BA-166550					PERMIT			
Sed. Trap	I I					SHIPPING/FREIGHT			
Fuel/BTU	000 160 000	N/A	N/A			Thank You		SALES TAX 121 00	
AGE	New					TOTAL		1433 50	
Shut off Installed	Y					ANY UNUSED GAS PIPING OUTLETS INDOORS?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK				RECEIVED BY		IF YES, IS EACH UNUSED GAS PIPING OUTLET FITTED WITH A GAS TIGHT THREADED PLUG OR CAP?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Work Completed by: <i>Curter Rayne</i>				Date 7-14-2025		CUSTOMER AVAILABLE		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Customer Signature: <i>[Signature]</i>				Date 7/14/25		CUSTOMER SMELLED ODORIZED PROPANE AND SHOWN THE SHUTDOWN PROCEDURE		<input type="checkbox"/> YES <input type="checkbox"/> NO	
I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE IMPORTANT SAFETY INSTALLATION INFORMATION PRINTED ON BACK OF THE CUSTOMER COPY									