

INVOICE

FITZGERALD WATER LIGHT AND BOND  
P.O. Box 667  
FITZGERALD, GA 31750

(229) 426-5400

TO: HULIN REEVES JR  
1129 OCEAN AVE  
FERNANDINA BEACH, FL 32034

INVOICE NO: 54310  
DATE: 9/03/25

CUSTOMER NO: 1033/1096

TYPE: RO - RESIDENTIAL COUNTY BenHil

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1.00	MDSE - Appliances SERIAL# TD.UA 054289 Inventory item selected for charge code: AP-60000163021 Quantity: 1.00 351-RE199EP	1,305.76	1,305.76
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163011 Quantity: 1.00 PIPE COV ENCL 4 R75L	191.70	191.70
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163032 Quantity: 1.00 PLUMBING INSTALLATION KIT	69.60	69.60

TOTAL DUE: \$1,567.06

PLEASE DETACH AND SEND THIS COPY WITH REMITTANCE

DATE: 9/03/25 DUE DATE: 9/15/25  
CUSTOMER NO: 1033/1096

NAME: REEVES JR, HULIN  
TYPE: RO - RESIDENTIAL COUNTY BenHil

REMIT AND MAKE CHECK PAYABLE TO:  
FITZGERALD WATER LIGHT AND BOND  
P.O. Box 667  
FITZGERALD GA 31750

INVOICE NO: 54310  
TERMS: NET 10 DAYS

AMOUNT:

GA  
Rebate \$

\$1,567.06
- 200.00
<u>1,367.06</u>

# FITZGERALD UTILITIES

## PROPANE SAFETY CHECK FOR RESIDENTIAL CUSTOMERS

No 002911

Account Number 1033

Name Hulin Reeves, Jr

Address Hampton Ct.

Call Date: 9/3/25 Date Requested: 9/04/25

Instructions: Mount water heater + run line

Telephone Office: \_\_\_\_\_ Home: \_\_\_\_\_

Appliance Check Item:	Central Heating 1	Space Heater 2	Water Heater 3	Range 4	Clothes Dryer 5	6	7
Manufacturer			<u>Rinnai</u>				
Model No.			<u>RE1992</u>				
Serial No.			<u>TD-UA-054289</u>				
Location			<u>Extension</u>				
BTU	000	000	<u>199 000</u>	N/A	N/A	000	000
Age			<u>New</u>				
Manual Shutoff (Installed/Existing)			<u>Installed</u>				
Venting			<u>gd</u>				

SIZE	SERIAL NUMBER	MFR.	MFR. DATE	Last Test Date	Location	Tank Cond.	Paint	Pigtail	Fittings	Gauge	Relief Valve			Fittings Leak Test
											Cond.	Date	Cap	
<u>EXISTING</u>														

SINGLE STAGE	PIPING		REGULATOR DATE CODE	REGULATOR CONDITION	MFR.	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE
	MATERIAL	SIZE							
TWO STAGE	1ST	<u>Copper</u>	<u>1/2</u>	<u>5</u>	<u>Used Rego</u>	<u>4403</u>	<u>Level</u>	<u>None</u>	<u>11</u> IN. WC
	2ND								PSIG

SINGLE STAGE	Start Pressure	End Pressure	Time Held	System OK	
					(Inches W.C.)
TWO STAGE	1ST	<u>11</u>	<u>11</u>	<u>5min</u>	<u>✓OK</u>
	2ND				

Comments: \_\_\_\_\_

This inspection covers (propane/LP-Gas) items and equipment visible and 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 working of sealed equipment, or structural components, and cannot be construed to cover future defects or unforeseen happenings.

I, Hulin Reeves, Jr.  
Hulin Reeves, Jr.  
 (Please Print)

Reference Invoice No. WF0540417 Date 9/4/25  
 (Mo. Day Yr.)

I, Chris Woods  
 (Please Print)

Certify that I have completed the System Check as prescribed

Performed Odor Test  Yes Performed Pressure Test  Yes  
 Left Consumer Safety Info  Yes

Chris Woods  
 Delivery Men / Technician