

INVOICE

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

(229) 426-5400

TO: MIKE DURDEN
181 SWEETPEA RD
FITZGERALD, GA 31750

INVOICE NO: 54308
DATE: 9/03/25

CUSTOMER NO: 275/275

TYPE: RO - RESIDENTIAL COUNTY BenHil

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1.00	MDSE - Appliances SERIAL# TE.CA 003020 Inventory item selected for charge code: AP-60000163014 Quantity: 1.00 TNKLESS WTR HTR R53 LP	704.52	704.52
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163013 Quantity: 1.00 PIPE COV ENCL 4 R53V	194.40	194.40
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163014 Quantity: 1.00 TNKLESS WTR HTR R53 LP	104.04	104.04
1.00	Sales Tax	80.24	80.24

TOTAL DUE: \$1,083.20

PLEASE DETACH AND SEND THIS COPY WITH REMITTANCE

DATE: 9/03/25 DUE DATE: 9/15/25
CUSTOMER NO: 275/275

NAME: DURDEN, MIKE
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: 54308
TERMS: NET 10 DAYS

AMOUNT: \$1,083.20
GA Rebate - 200.00
\$ 883.20

FITZGERALD UTILITIES

PROPANE SAFETY CHECK FOR RESIDENTIAL CUSTOMERS

No 002914

Account Number 275

Name Mike Durden

Address 131 Kudzu Rd

Rockelle, GA

Call Date: 9/3/25 Date Requested: 9/8/25

Instructions: Set tank / mount water heater

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>V53DE</u>				
Serial No.			<u>TE.CA-003020</u>				
Location			<u>Exterior</u>				
BTU	000	000	<u>120</u> 000	N/A	N/A	000	000
Age			<u>New</u>				
Manual Shutoff (Installed/Existing)			<u>installed</u>				
Venting			<u>gd</u>				

TANK/CYLINDER #52

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>50</u>	<u>V138101</u>	<u>MAY 11/01</u>	<u>11/01</u>	<u>9/1/25</u>	<u>Exterior</u>	<u>gd</u>	<u>gd</u>	<u>new</u>	<u>gd</u>	<u>gd</u>	<u>gd</u>	<u>-</u>	<u>gd</u>	<u>5 min</u>

PIPING/REGULATOR OPERATION/CONDITION

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>03/24</u>	<u>New</u>	<u>Recp</u>	<u>LV404B4</u>	<u>Level</u>	<u>Dome</u>	<u>11</u> IN. WC
TWO STAGE 2ND									PSIG

SYSTEM LEAK TEST

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

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.

Reference Invoice No. WFS40405 Date 9/8/25 (Mo. Day Yr.)

I, MIKE DURDEN (Please Print)

I, Chris Woods (Please Print)

- Know how to turn off gas in case of emergency.
- Have smelled propane and can detect its odor.
- Have received the Consumer Safety Information.
- Had gas system deficiencies and / or corrections, if any, clearly explained to me.
- Am satisfied with the service work performed.

Certify that I have completed the System Check as prescribed

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

Mike Durden
Customer's Signature

Chris Woods
Delivery Man / Technician Signature