

INVOICE

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

(229) 426-5400

TO: MICHAEL CROSSIN  
186 HAYES LANE  
FITZGERALD, GA 31750

INVOICE NO: 54268  
DATE: 8/28/25

CUSTOMER NO: 3654/3732

TYPE: RR - Residential Irwin Co

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1.00	MDSE - Appliances SERIAL# TE.UA 070096 Inventory item selected for charge code: AP-60000163010 Quantity: 1.00 TANKLESS WTR HTR R75 LP	1,112.18	1,112.18
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
1.00	Sales Tax	109.88	109.88

TOTAL DUE: \$1,483.36

PLEASE DETACH AND SEND THIS COPY WITH REMITTANCE

DATE: 8/28/25 DUE DATE: 9/08/25  
CUSTOMER NO: 3654/3732

NAME: CROSSIN, MICHAEL  
TYPE: RR - Residential Irwin Co

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

INVOICE NO: 54268  
TERMS: NET 10 DAYS

AMOUNT:

\$1,483.36  
 - 200.00  
 \$1,283.36  
*JA Rebate*

# FITZGERALD UTILITIES

## PROPANE SAFETY CHECK FOR RESIDENTIAL CUSTOMERS

No 002910

Account Number 3654

Name Michael Crossin

Address 186 Hayes Ln

Call Date: 8/28/25 Date Requested: 9/3/25

Instructions: Set tank / run line to water heater generator

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

Appliance Check Item:	Central Heating 1	Space Heater 2	Water Heater 3	Range 4	Clothes Dryer 5	6	7	8
Manufacturer			Rinnai					Portable Generator
Model No.			RE180e					Hybrid EX
Serial No.			TE.UA-070096					XP1300EH
Location			Exterior					?
BTU	000	000	180 000	N/A	N/A	000	000	Exterior ? 000
Age			New installed					used installed
Manual Shutoff (Installed/Existing)			gd					gd
Venting								

TANK/CYLINDER 135Y + 136Y

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>136Y</u>	<u>B09573</u>	<u>SMPC</u>	<u>2025</u>											
<u>2 tanks</u>	<u>B09389</u>	<u>SMPC</u>	<u>2025</u>	<u>9/1/25</u>	<u>Exterior</u>	<u>New</u>	<u>New</u>	<u>New</u>	<u>New</u>	<u>New</u>	<u>New</u>	<u>New</u>	<u>New</u>	<u>Smid</u>

136Y  
2 tanks  
135Y

PIPING/REGULATOR OPERATION/CONDITION

SINGLE STAGE	PIPING		REGULATOR DATE CODE	REGULATOR CONDITION	MFR.	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE
	MATERIAL	SIZE							
	<u>Copper</u>	<u>1/2</u>	<u>03/24</u>	<u>New</u>	<u>Rego</u>	<u>LV40424</u>	<u>Level</u>	<u>Done</u>	<u>11</u> IN. WC
TWO STAGE									PSIG
									IN. WC

(2 regs)

SYSTEM LEAK TEST

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

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. WF0540201 Date 9/3/25 (Mo. Day Yr.)

I, Michael Crossin (Please Print)

I, WF0540201 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

[Signature]  
Customer's Signature

[Signature]  
Delivery Man / Technician Signature