Confirmed SN

9/23/2025 10:48:32 AM

WORK ORDER

Lorena Miranda

23 Chestnut Hills Lane
Blue Ridge, GA 30513
(407) 676-1508

Customer #: 204516
Order #: 398232
Location #: 264592
Zone: B-006-TUE-
Terms: Net 30

Tech: _____

Map Code:
Service Code: Propane Service
Description: 10/07/25 - GO 1ST! - T/I 250UGW/200G@2.999G JOHNNY TO BURY. PICK UP 250AG - T/I MONITOR - CALL 407-676-1508 - $ ON SITE - CT

Date Ordered: 9/23/2025	Scheduled Date:	Est. Completion:	Start:	Stop:

Name: Heating System
Contract:
Manufact:
Notes:
Instructions:

Last Service: 9/9/2025
SC Renewal:
Model:

Last Tune Up:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes

FolgerGas PROPANE GAS CHECK

PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 204516

Name: LORENA MIRANDA

Address: 23 CHESTNUT HILLS LANE

BLUE RIDGE, GA 30513

Date: 10/07/25

Instructions: GO1ST! T/I 250UGW/200G@2.999G JOHNNY TO BURY. P/U 250AG T/I MONITOR CALL 407-676-1508. $ ON SITE

Order #: 398232

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	Logset	Logset	Furnace	Logset	Grill	
Manufacturer	N/	Procom	Briant	Monnesor	Kitchenaid	
Model #		SSD24TR	CNPVT422	BYF24PN	7200891	
Serial #		4203289	017X79226	08F044752	N/	
Burner/Combustion Chamber	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Manual Shutoff	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Sediment Trap	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Pilot Safety System	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Electronic Ignition System	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Venting System	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Combustion Air	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Taken Out of Service	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☑ No	☐ Yes ☑ No	☐ Yes ☑ No	☐ Yes ☐ No

Container Check:

Size	Serial #	Container Fitting Leak Test	Manufacturer	Manufacture Date	Location	Tank Condition
250	M2428506	Good	Triarc	2024	U/G	Good

Regulator(s):

	Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin				☐ Correct ☐ Incorrect		
1st	Rego	3403TR	02-25	☐ Correct ☐ Incorrect		
2nd	Rego	4404B66	01-24	☐ Correct ☐ Incorrect		

Piping System Leak Test:

Start Pressure	End Pressure	Time Held	Pass
50 PSI ____ WC	50 PSI ____ WC	10 Mins ____ Mins	☑ Yes ☐ No

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass
____ PSI	____ PSI	____ Mins	☐ Yes ☐ No

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)	Service Technician (Signature)	Date
Brian Bradley	[signature]	10-7-25
Customer (Print)	**Customer (Signature)**	**Date**
CWAFS		

Folger Gas LLC PROPANE

www.folgergas.com

RINNAI WORK ORDER

Customer Acct #: 204516

Name LORENA MIRANDA

Address 23 CHESNUT HILLS LANE
BLUE RIDGE, GA 30513

Date: 10/07/25

Instructions: GO 1ST T/I250UGW/200G@2.999 JOHNNY TO BURY/ P/U 250AG T/I MONITOR CALL 407-676-1508

Order #: 398232 $ ON SITE

DESCRIPTION OF WORK

COMMENTS:

SERVICED BY:

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
				100.00/hr	
				100.00/hr	

FOR OFFICE USE ONLY

Performed leak check _____ Yes _____ No

Gas check attached _____ Yes _____ No

Leak check Initial _____

Start Pressure	End Pressure	Time Held	System OK

% in Tank

AMOUNT REC'D

$_____

☐ CASH ☐ CHECK #_____

☐ 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 _____ year contract for discount.

_____
CUSTOMER SIGNATURE

	Retail Price	Contract Price	
_____ Rinnai	$	$	
Standard Vent Kit	$	$	
Standard Install	$	$	
Total	$	$	
Tank Set		**New Cust Special**	
L.P. Gas /Gal	2.999	L.P. Gas /Gal	2.999
Gallons	200	Gallons	200
FRCC	$9.79	FRCC	$9.79	9.79
Fuel Total	599.80	Fuel Total	599.80	599.80
Tank Lease/YR	129.00	1st yr Lease	129.00	129.00
Total Materials			
Sub-Total			
Sales Tax			
Tank Set Fee	$250	Tank Set Fee	FREE	FREE
Safety Inspection	$129.95		$29.95	350.00
Total Labor			
Total charges			
Prepay Bal On Account			
Safe Appliance Savings			457.33
Safe Appliance Rebate			400.00

TOTAL BALANCE DUE