

9

1/16/2025 4:33:55 PM

WORK ORDER

Will Holloway

56 Devil's Den Overlook
Epworth, GA 30541
(706) 455-0017

Customer #: 202834
Order #: 314685
Location #: 278254
Zone:
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 1/22 - HOOK UP YARD LINE TO TANK AND AT HOUSE.
706-455-0017. CHG

Date Ordered: 1/16/2025	Scheduled Date:	Est. Completion:	Start:		Stop:
Name:	Last Service: 1/8/2025		Last Tune Up:		
Contract:	SC Renewal:				
Manufact:	Model:				
Notes:					
Instructions:					

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
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PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 202834

Date: 1/22/25

Name: WILL HOLLOWAY

Instructions: RUN YARD LINE TO TANK & HOUSE.

Address: 56 DEVILS DEN OVERLOOK

CALL 706-455-0017 CHG

EPWORTH, GA 30541

Order #: 314685

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	Furnace					
Manufacturer	Tempstar					
Model #	RA2MSN1002120A1					
Serial #	A243460927					
Burner/Combustion Chamber	<input checked="" type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok
Manual Shutoff	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A
Sediment Trap	<input checked="" type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok
Pilot Safety System	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A
Electronic Ignition System	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A
Venting System	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok <input type="checkbox"/> N/A
Combustion Air	<input checked="" type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok
Taken Out of Service	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Container Check:

Size	Serial #	Container Fitting Leak Test	Manufacturer	Manufacture Date	Location	Tank Condition
250	m2428478	Good	Trinity	2024	Ug	Good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
1st	Rugo	Lv 3403TR9	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd	Rugo	Lv 4403Y4	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	11.2	12.9

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
60 PSI	60 PSI	10 Mins	<input type="checkbox"/> Yes				<input type="checkbox"/> Yes
			<input type="checkbox"/> No				<input type="checkbox"/> 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)	Alex Cash	Service Technician (Signature)	[Signature]	Date	1/22/25
Customer (Print)		Customer (Signature)	CNP	Date	



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RINNAI WORK ORDER

Customer Acct #: 202834
Name WILLI HOLLOWAY
Address 56 DEVIL'S DEN OVERLOOK
EPWORTH, GA 30541

Date: 1/8/25
Instructions: DROP 250UG W/50G@2.999, T/25FT OF I
T/ ANODE BAG CALL 706-4455-0017 CCOF VM
Order #: 309054

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	3.299	L.P. Gas /Gal	2.999	
Gallons	50	Gallons	50	
FRCC	\$9.79	FRCC	\$9.79	9.79
Fuel Total	164.99	Fuel Total	149.95	149.95
Tank Lease/YR	129.00	1st yr Lease	FREE	FREE
Total Materials				
Sub-Total				
Sales Tax				
Tank Set Fee	\$250	Tank Set Fee	20.00	20.00
Safety Inspection	\$129.95		\$29.95	29.95
Total Labor				
Total charges				
Prepay Bal On Account				

Safe Appliance Savings	484.08
Safe Appliance Rebate	300.00

TOTAL BALANCE DUE



INVOICE

Customer #:	202834
Payment Terms:	Net 30
Invoice #:	314685
Invoice Date	2025-01-22
Total Due	\$380.81

Will Holloway
56 Devil's Den Overlook
Epworth, GA 30541

Make Check Payable to: Folger Gas, LLC

Amount Enclosed: \$ _____

Remit To:
Folger Gas, LLC
PO BOX 2155
Blue Ridge, GA 30513

Customer Name		Delivery/Service Address		Cust #	Invoice #	Inv Date
Will Holloway		56 Devil's Den Overlook - Epworth, GA 30541		202834	314685	2025-01-22
Quantity	Item Number	Description	Unit Price	TOTAL		
1.00	Labor	Labor	\$100.0000	\$100.00		
1.00	540003	3/4" MAXITROL	\$79.9500	\$79.95		
2.00	45226	3/4" X CLOSE NIPPL	\$4.0000	\$8.00		
1.00	298956	2LB REG	\$89.9500	\$89.95		
1.00	45029	3/4" X 1/2" BLACK IRON ELBOW	\$3.0000	\$3.00		
1.00	2464846	1/2X1/2 FIP CUTOFF	\$29.9500	\$29.95		
1.00	R48IF	5/8"X1/2" MALE CON	\$5.0000	\$5.00		
2.00	3552	5/8" FLARE NUT	\$4.2500	\$8.50		
1.00	45416	1/2" X 10" BLK NIP	\$6.7500	\$6.75		
1.00	45050	1/2" TEES	\$4.2500	\$4.25		
1.00	45070	1/2" BLK CAP	\$3.2500	\$3.25		
1.00	45204	1/2" X 3" NIPPLES	\$3.5000	\$3.50		
2.00	45200	1/2" X CLOSE NIPPL	\$3.5000	\$7.00		
1.00	Shop Supplies	Shop Supplies	\$13.3200	\$13.32		
		Fannin County Tax:		\$7.89		
		GA State Sales Tax:		\$10.50		

Tank/Equipment: Heating System -

For Fuel or Service At:

56 Devil's Den Overlook - Epworth, GA 30541

Sub Total	\$362.42
Charges	\$0.00
Tax Total	\$18.39

ACCOUNT BALANCE	\$481.34	TOTAL DUE	\$380.81
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01/22/2025 - Technician: Alexander Cash - Work Performed: - Hooked first and second stage regulators to existing yardline and system. Installed maxitrol to manifold, hooked up furnace. Furnace is only appliance on site at this time. Leak check at 60 psi for 10 min. No leaks. AC/JT 80% in tank

Folger Gas, LLC
PO BOX 2155
Blue Ridge, GA 30513
706-632-7606
www.folgergas.com