

1335 US Hwy 82 W, Leesburg, GA 31763 (229) 435-6116 FAX (229) 435-6119

Order Number 879850	Date Written 2/27/25	Taken By MEH	Schedule Date 3/02/25	Date Completed 3/2/25
Branch - Customer No. 1-17888	Home 703 350-8026	Work	Time Started 11:45	Time Completed 4:15
Name JIMMIE C GARDNER	Address POBX 163	Cell		
City ALBANY, GA	State	Zip 31702-0163		
Service Address 4003 STALI WAY CAMILLA, GA 31730-3127				

Work to be performed:

DELIVER AND INSTALL RINNAI RE160eP WITH RIKF  
INSTALL KIT, PCD09SHS PIPE COVER AND MC-601-W  
CONTROLLER. CALLED IN BY JIMMIE. 703-350-8026  
CELL:

Work completed: *Delivered & Installed Rinnai & Pipe Cover*

Qty:	Materials	Price	Amount	Qty:	Materials	Price	Amount
	RE160				W-R RE160EP	7	725.00
	SB-UA-020329				Rinnai Water Htr	7	98.00
					W-R RIKF	7	143.00
					Install kit	7	117.00
					W-R PC09SHS	7	
					Pipe Cover	7	
					W-R MC-601-W	7	
					Controller	7	

DR. RT.	Rt. Seq.	Rate	Deposit
Tank Make	Size	Serial No.	Tank Percent
Single Stage	Regular Date	Reg. Condition	Mfr. Model Vent Pos. Protected?
TWO 1st			
STAGE 2nd			

Less Check		Flow Check		Lock-up Check		SHOP OR TRUCK SUPPLIES		14 50
Manometer Reading at Start	Manometer Reading After 10 minutes	Manometer Reading Under Load	Manometer Reading			MATERIAL TOTAL		980 50
Central Heating	Water Heater	Range	Clothes Dryer			TRIP CHARGE		
Manufacturer	Rinnai					LABOR		
Model No.	RE160eP					SUB-LABOR		Rebate <200.00>
Serial No.	SB-UA-020329					PERMIT		
Sed. Trap	I I					SHIPPING/FREIGHT		
Fuel/BTU	000 160 000	N/A	N/A			Thank You		
AGE	New					SALES TAX		78 44
Shut off Installed	yes					TOTAL		858 94

<input type="checkbox"/> CASH	RECEIVED BY	Date	3/2/25
<input type="checkbox"/> CHECK		Date	3/2/25
Work Completed by:	<i>Raymond, AJ</i>		
Customer Signature	<i>Jim Gardner</i>		
I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE IMPORTANT SAFETY INSTALLATION INFORMATION PRINTED ON BACK OF THE CUSTOMER COPY			

ANY UNUSED GAS PIPING OUTLETS INDOORS?	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, IS EACH UNUSED GAS PIPING OUTLET FITTED WITH A GAS TIGHT THREADED PLUG OR CAP?	<input type="checkbox"/> YES <input type="checkbox"/> NO
CUSTOMER AVAILABLE	<input type="checkbox"/> YES <input type="checkbox"/> NO
CUSTOMER SMELLED ODORIZED PROPANE AND SHOWN THE SHUTDOWN PROCEDURE	<input type="checkbox"/> YES <input type="checkbox"/> NO