

Confirmed at

3/19/2025 3:54:04 PM

WORK ORDER

JOHN HOLMES

90 WHIPPOORWILL WALK RD
MINERAL BLUFF, GA 30559
(601) 906-4118

Customer #: 28885
Order #: 343095
Location #: 252548
Zone: B-014-WED-
Terms: COD

Tech: _____

Map Code:

Service Code: Propane Service

Description: 03/20/25 - Run 50ft gas line to mechanical room, hang and vent
Rinnai 7.5. Call 601-906-4118 ACH - JB

Date Ordered: 3/17/2025	Scheduled Date:	Est. Completion:	Start:	Stop:
Name: Heating System	Last Service: 3/14/2025	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 #: 28885

Date: 03/20/2025

Name: JOHN HOLMES

Instructions: RUN 50FT GAS LINE TO MECHANICAL ROOM.
VENTING FOR W/H AND T/I RINNAI 7.5.

Address: 90 WHIPPOORWILL WALK ROAD

CALL 601-906-4118 ACH- JB

MINERAL BLUFF, GA 30559

Order #: 343095

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	W/H					
Manufacturer	Rinnai					
Model #	RL 75i					
Serial #	PG-CA-108635					
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
120	2074 3395	Good	Trinity	2007	Az	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	Ringo LV 34031229	10/2024	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd	Ringo LV 3403134	11/2024	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	11.2	13.1

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
70 PSI	70 PSI	10 Mins	<input checked="" type="checkbox"/> Yes	15 PSI	15 PSI	10 Mins	<input checked="" type="checkbox"/> Yes
WC	WC	Mins	<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	3/20/25
Customer (Print)	C N A B	Customer (Signature)		Date	



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RINNAI WORK ORDER

Customer Acct #: 28885
Name JOHN HOLMES
Address 90 WHIPPOORWILL WALK ROAD
MINERAL BLUFF, GA 30559

Date: 03/20/25
Instructions: RUN 50FT YARD LINE, HANG AND VENT
RINNAI 7.5 CALL 601-906-4118 ACH - JB
Order #: 343095

DESCRIPTION OF WORK

COMMENTS: Installed Rinnai 7.5.

SERVICED BY: AC/JT

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
3/20/25	8:45	11:35	1.5 HR	100.00/hr	INCLUDED IN
		3HR 7.5 HR =	1.51 HR	100.00/hr	CONTRACT

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

60

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 3 year contract for discount.

CUSTOMER SIGNATURE

Retail Price

Contract Price

7.5 Rinnai	\$1673.00	\$ 1299.95
Standard Vent Kit	\$ 426.95	\$ 0.00
Standard Install	\$ 400.00	\$ 0.00
Total	\$ 2499.95	\$ 1299.95

Tank Set

New Cust Special

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

Safe Appliance Savings 1200.00

Safe Appliance Rebate 200.00

TOTAL BALANCE DUE

2337.21