



# PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 202757

Date 11/12/2024

Name: Marc Nicholson

Instructions: Run lines W/H, stove, logs, Duel Furr gas lantern and fire starter. Install logs (or site), lantern and T/I fire starter. Sm

Address: Green Ridge Trail Lot #20

Order #: 283317

Blue Ridge, GA 30513

(706) 455-1078 Marc  
Gate Code 7124

**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	Stove	W H	Furnace	L L
Manufacturer	Kitchen Aid	Rinnor	Temp Star	NV
Model #	KFDC558JSP1	KEU-NB3377F	R92421NWD1719A	NV
Serial #	DD1301109	SA.BA-003740	A240459366	NV
Burner/Combustion Chamber	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A
Manual Shutoff	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A
Sediment Trap	<input type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok
Pilot Safety System	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A
Electronic Ignition System	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A
Venting System	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A
Combustion Air	<input type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok
Taken Out of Service	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## Container Check:

Size	Serial #	Container Fitting Leak Test	Manufacturer	Manufacture Date	Location	Tank Condition
325	M2322261	Good	Trinity	2023	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	Rego	3423TR9	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd	MEC	1622	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	11.4	13.2

## Piping System Leak Test:

## Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
80 PSI	80 PSI	10 Mins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	15 PSI	15 PSI	10 Mins	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
WC	WC	Mins					

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
CNP	[Signature]	11-12-24
Customer (Print)	Customer (Signature)	Date



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## RINNAI WORK ORDER

Customer Acct #: **202757**

Name **MARC NICHOLSON**

Address **GREEN RIDGE TRAIL LOT #20**

**BLUE RIDGE GA 30513**

Date: **11-6-24**

Instructions: **DROP OFF 325UG W/50G @ 2.999**  
**ONE ANODEBBAG THEY WILL BURY MARC 706-455-10**

Order #: **283314**

### 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

Rinnai \$

Standard Vent Kit \$

Standard Install \$

Total \$

### Contract Price

\$

\$

\$

\$

### Tank Set

L P Gas /Gal **32.99**

Gallons **50**

FRCC \$9.79

Fuel Total **164.95**

Tank Lease/YR **129.00**

Total Materials

Sub-Total

Sales Tax

Tank Set Fee \$250

Safety Inspection \$129.95

Total Labor

Total charges

Prepay Bal On Account

### New Cust Special

L P Gas /Gal **2.999**

Gallons **50**

FRCC \$9.79

Fuel Total **149.95**

1st yr Lease **FREE**

Tank Set Fee **20/00**

Safety Inspection **\$29.95**

Total Labor

Total charges

Prepay Bal On Account

**9.79**

**149.95**

**FREE**

**FREE**

**20.00**

**29.95**

**29.95**

**29.95**

**29.95**

**29.95**

**29.95**

**484.08**

**Safe Appliance Savings**  
**Safe Appliance Rebate 500.00**

**TOTAL BALANCE DUE**