WORK ORDER

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Grant Lane Lot 31 Mineral Bluff, GA 30559 (706) 455-7400

Customer #: 203751 352328 Order #:

Location #: 279340 Zone:B-006-TUE-

Terms: Net 30

Map Code:

Service Code: Propane Service

04/09/2025 T/I 250AG w/200G@2.999 - EXISTING LINES. Call: Description:

706-455-7400 (COF

Date Ordered: 4/3/2025 Scheduled Date: Est. Completion: Start: Stop:

Name:

Last Service:

Last Tune Up:

Tech:

Contract: Manufact: SC Renewal: Model:

Notes: instructions:

Service History:

Date Invoice # Tech **Problem Reported Service Notes**



PROPANE GAS PIPING SYSTEM CHECK

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isclaimer: This in ate of inspection.	MINERAL BLUFF, GA 30559							Order #: 352328															
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RINNAI WORK ORDER

Customer Acct #: 203751	Date: 04/09/2025									
Name HOLLY NELSON	Instructions: T/I 250AG W/200G@2.999 - EXI									
Address GRANT LANE LOT 31	LINES. CALL: 706-455-7400 CCOF - JB									
MINERAL BLUFF, GA 30559	Order #: 352328									
DESCRIPTI	ON OF WORK									
COMMENTS:										
SERVICED BY:										
			AMOUNT							
DATE START TIME FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT							
		100.00/hr								
		100.00/hr								
	Retail Price	Contract Price	9							
FOR OFFICE USE ONLY	Rinnai \$	\$								
Performed leak check Yes No	Standard Vent Kit \$	\$								
Gas check attachedYes No	Standard Install \$	\$								
Leak check Initial	Total \$	\$								
Lear check										
Start Pressure End Pressure Time Held System OK	Tank Set	New Cust Special								
	L.P. Gas /Gal 3.299	L.P. Gas /Gal 2.999								
O/ in Table	Gallons 200 FRCC \$9.79	Gallons 200 FRCC \$9.79	9.79							
% in Tank	Fuel Total 659.80	Fuel Total 599.80	599.80							
	Tank Lease/YR 99.00	1st yr Lease FREE	FREE							
AMOUNT REC'D	Total Materials									
\$	Sub-Total									
□ CASH □ CHECK#	Sales Tax Tank Set Fee \$250	Tank Set Fee 20.00	20.00							
□ CREDIT CARD	Safety Inspection \$129.95		29.95							
	Total Labor									
#	Total charges									
EXP. DATE	Prepay Bal On Account									
* I have received the Consumer Safety information & material.	Safe Appliance Savin		500.13							
* I am satisfied with the work performed.	Safe Applian	ce repare	DXCC.							
* 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.										
CHOTOMED CIONATURE	TOTAL BAL	ANCE DUE								
CUSTOMER SIGNATURE										