

GA Propane Commission Safe Appliance Rebate Form

This form must be completed by a participating propane marketer. A safety inspection must be performed after the installation of each new qualifying appliance(s) and the acknowledgement of that inspection must be documented on this form in a manner acceptable to the GA Propane Commission. Minimum requirements of the safety inspection are located on page 2 of this form.

This form and receipts showing purchase of each appliance must be submitted to the GA Propane Commission for the customer to be eligible for consideration of any rebate(s). Failure to furnish all necessary documentation will result in the customer being declared ineligible for consideration of any rebate(s). The required inspections must be performed to conform to industry standard practices, Georgia State Code requirements, or local code requirements. The GA Propane Commission and the Southeast Propane Alliance assume no liability for a customer being declared ineligible for consideration of any rebate(s).

Propane Dealer's Name Barfield Gas Company

Mailing Address P O Box 990

City Adel

State Georgia

Zip 31620

Phone: 229-896-4828

Customer's Name Billy Jo Lovett

Mailing Address 635 W.D. Stalvey Rd.

City Hahira

State Ga

Zip 31632

Email: _____

Phone: _____

Maximum of \$1,000.00 per customer location per 12 month period

Description	Amount per unit	Number of units	Model number(s)	Serial number(s)	Total
Propane furnace, or gas pack ☐ New ☐ Replacement	\$400.00				
Propane-Fueled Recirculating Water Heater ☐ New ☐ Replacement	\$400.00				
Propane-Fueled Non-Recirculating Water Heater ☐ New ☒ Replacement	\$200.00	1	Rinnai RE199eP	WE-UA- 057023	200-
Dual fuel heat pump with propane as one fuel (Includes hydronic) ☐ New ☐ Replacement	\$400.00				
Propane-fueled cook top/range ☐ New ☐ Replacement	\$50.00				
Propane-fueled clothes dryer ☐ New ☐ Replacement	\$50.00				
Maximum \$1,000.00 Grand Total					200-

Required Signatures and Dates

Company Owner / Manager / Technician's Certification: I, Colt Hamm, certify that the required tests were performed in compliance with all applicable laws and regulations governing the installation.

Date of Inspection: 8-14-26

Propane Dealer's Signature: Michael Davis

This paperwork must be submitted to the GA Propane Commission within 30 days of appliance inspection date to receive rebate.

Disclaimer:

The propane marketer seeking a rebate must submit a full and complete Application form. Submission of the Application form constitutes a representation on the part of the participating propane marketer that the required safety test was completed. A safety inspection must be performed by the participating propane marketer after the installation of each new qualifying appliance(s). The safety inspection for qualifying appliance installations consists of the following: 1) a leak test; 2) a pressure test if required by applicable laws, rules and regulations; and 3) a flow and lock up test on the regulator[s]. The propane marketer agrees to comply with all laws, rules and regulations governing the installation of the qualifying appliance and with the manufacturer's installation instructions. The Southeast Propane Alliance and GA Propane Commission assumes no responsibility whatsoever for the installation, inspection, or testing of the qualifying appliance(s) or any associated gas system and, by issuing a rebate, makes no representation, warranty or guarantee regarding the qualifying appliance(s) or the associated gas system. The Southeast Propane Alliance and GA Propane Commission disclaims any liability for any personal injury, property damage, business losses or other damages of any nature whatsoever, whether special, indirect, consequential, or compensatory, directly or indirectly arising from the installation of the qualifying appliance(s).

Rebates must be submitted through propanegeorgia.com.

As of: 01/01/26

BARFIELD GAS COMPANY



POST OFFICE BOX 990
312 OLD QUITMAN HWY.
PHONE 229-896-4828
ADEL, GEORGIA 31620

POST OFFICE BOX 308
RAILROAD STREET
PHONE 229-532-2925
ALAPAHA, GEORGIA 31622

INVOICE NO. 58179

DATE 8-14-26

NAME**ADDRESS**

CITY, STATE, ZIP

PHONE[illegible]

SYSTEM LEAK TEST

SINGLE STAGE		START PRESSURE	END PRESSURE	TIME HELD	SYSTEM OK
		(INCHES W.C.)	(INCHES W.C.)		
TWO STAGE	1st	(PSIG)	(PSIG)		
	2nd	(INCHES W.C.)	(INCHES W.C.)		

TOTAL MATERIALSSTATE AND LOCAL
SALES TAX**LABOR****TOTAL**

THIS IS YOUR INVOICE, PLEASE PAY THIS AMOUNT → →

Date Completed

Barfield Gas Co. Rep..

Terms of this agreement are understood and accepted. Services received by:

Customer Signature

POST OFFICE BOX 308
RAILROAD STREET
PHONE 229-532-2925
ALAPAHA, GEORGIA 31622

DATE 8-24-26

NAME Billy Jo Lovett
ADDRESS 635 W.D. Stalvey Rd.
CITY, STATE, ZIP Itahira
PHONE _____

[illegible]

Date Completed 8.24.26
Barfield Gas Co. Rep. Snh

Terms of this agreement are understood and accepted. Services received by:
Customer Signature _____