

6/23/2026 10:29:42 AM

WORK ORDER

James "Xander" Pasley

361 HuckIEberry Lane
Mineral Bluff, GA 30559
(662) 594-4171

Customer #: 206012
Order #: 516457
Location #: 282165
Zone: B-014-WED-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 06/25/26 - CONNECT AND CONVERT STOVE KIT ON SITE.
CALL 229-834-2320 EMAIL RENOVATION SPOT - CT

Date Ordered:	Scheduled Date:	Est. Completion:	Start:	Stop:
6/23/2026				

Last Tune Up:

Last Service: 5/13/2026

SC Renewal:

Model:

Name:

Contract:

Manufact:

Notes:

Instructions:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 206012

Name: JAMES "XANDER" PASLEY

Address: 361 HUCKLEBERRY LANE

MINERAL BLUFF, GA 30559

Date: 6/25/26

Instructions: CONNECT AND CONVERT STOVE. KIT ON SITE

CALL 229-834-2320 EMAIL RENOVATIO SPOT

Order #: 516457

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	<u>STOVE</u>					
Manufacturer						
Model #	<u>45655030520</u>					
Serial #	<u>RF1415238</u>					
Burner/Combustion Chamber	☒ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Manual Shutoff	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Sediment Trap	☒ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Pilot Safety System	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Electronic Ignition System	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Venting System	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Combustion Air	☒ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Taken Out of Service	☐ Yes ☒ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

Container Check:

Size	Serial #	Container Fitting Leak Test	Manufacturer	Manufacture Date	Location	Tank Condition
<u>120</u>	<u>M0620849</u>	<u>Good</u>	<u>Trinity</u>	<u>2006</u>	<u>AG</u>	<u>Good</u>

Regulator(s):

Manufacturer		Model	Regulator Date	Regulator Venting		Flow/Delivery Pressure	Lock-Up Pressure
Twin	Rego	404B34	12/24	☒ Correct	☐ Incorrect	11.2	12.4
1st				☐ Correct	☐ Incorrect		
2nd				☐ Correct	☐ Incorrect		

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
<u>100</u> PSI	<u>100</u> PSI	<u>10</u> Mins	☒ Yes ☐ No	____ PSI	____ PSI	____ Mins	☐ Yes ☐ 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) <u>[Signature]</u>	Date <u>6-25-26</u>
Customer (Print) <u>CNP</u>	Customer (Signature) <u>[Signature]</u>	Date _____



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RINNAI WORK ORDER

Customer Acct #: 206012

Date: 5/13/26

Name JAMES PASLEY

Instructions: T/I 120AG W/100G@3.599 RUN LINE TO
STOVE AND YARD LINE. CALL: 404-904-7105 CCOF-CLT/
JB

Address 361 HUCKLEBERRY LANE

Order #: 504591

MINERAL BLUFF, GA 30559

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

Contract Price

Rinnai	\$	\$
Standard Vent Kit	\$	\$
Standard Install	\$	\$
Total	\$	\$

Tank Set

New Cust Special

L P Gas /Gal	3.599	L P Gas /Gal	3.599
Gallons	100	Gallons	100
FRCC	\$9.79	FRCC	\$9.79
Fuel Total	359.90	Fuel Total	359.90
Tank Lease/YR	99.00	1st yr Lease	99.00

Total Materials		
Sub-Total		
Sales Tax		
Tank Set Fee	\$250	Tank Set Fee FREE FREE
Safety Inspection	\$129.95	\$29.95 29.95
Total Labor		
Total charges		
Prepay Bal On Account		

Safe Appliance Savings 350.00

Safe Appliance Rebate 50.00

TOTAL BALANCE DUE