

8/10/2026 7:53:44 AM

WORK ORDER

Christina Sayers

84 Shepherd Point
Mccaysville, GA 30555
(352) 262-8028

Customer #: 206463
Order #: 534459
Location #: 282729
Zone: B-002-MON-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 8/20/26 Final Hook Call 352-283-5922 CCOF-CLT

Date Ordered: 8/7/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name:

Last Service: 8/4/2026

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 #: 206463

Date: 8/20/26

Name: CHRISTINA SAYERS

Instructions: FINAL HOOK CCOF CLT

Address: 84 SHEPHERD POINT

MCCAYSVILLE GA

Order #: 534459

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			Furnace			
Manufacturer	GE			Lenox			
Model #	JGB735SPSS			CX34-43C-6F-			
Serial #	TR228192P			601360924			
Burner/Combustion Chamber	☒ Ok ☐ N/A	☐ Ok ☐ N/A		☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Manual Shutoff	☒ Ok ☐ N/A	☐ Ok ☐ N/A		☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Sediment Trap	☒ Ok ☐ N/A	☐ Ok ☐ N/A		☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
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 ☐ N/A	☐ Ok ☐ N/A		☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
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
500	M2634566	Good	TriAK	2026	UG	Good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	MRC	MeGR-12220314125	☒ Correct ☐ Incorrect		
2nd	440344	2024 Rego	☒ Correct ☐ Incorrect	11.2	12.8

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
130 PSI	130 PSI	10 Mins	☒ Yes ☐ No	15 PSI	15 PSI	10 Mins	☒ Yes ☐ 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)	Oillon Payne	Service Technician (Signature)	Oillon Payne	Date	8/20/26
Customer (Print)		Customer (Signature)		Date	



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RINNAI WORK ORDER

Customer Acct #: 206463
Name CHRISTINEA SAYERS
Address 84 SHEPARDS POINT
MCCAYSVILLE GA 30555

Date: 8-4-26
Instructions: T/I 500UG W/50G @ 2.499 1 ANODE BAC
HOLE WILL BE DUG RUN YARD LINE AND IN GARAGE.CO
Order #: 528397 352-262-6028 CCOF SM

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	2.999	L P Gas /Gal	2.499
Gallons	50	Gallons	50
FRCC	\$9.79	FRCC	\$9.79
Fuel Total	149.95	Fuel Total	124.95
Tank Lease/YR	129.00	1st yr Lease	FREE

Total Materials		
Sub-Total		
Sales Tax		
Tank Set Fee	\$250	Tank Set Fee 20.00
Safety Inspection	\$129.95	\$29.95
Total Labor		
Total charges		
Prepay Bal On Account		

Safe Appliance Savings	494.78
Safe Appliance Rebate	450.00

TOTAL BALANCE DUE