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9/1/2026 9:05:15 AM

WORK ORDER

Mike Boyd

788 Highgrove Drive
Talking Rock, GA 30175
(770) 655-7090

Customer #: 206263
Order #: 538602
Location #: 282499
Zone: B-031-MON-
Terms: Net 30

Tech: _____

Map Code:
Service Code: Propane Service
Description: 09/03/26 - THEY FIXED AN ORIFICE ON STOVE. WANTS A
GAS CHECK ON THE STOVE - CALL 678-468-9571 FOR
ACCESS - CCOF - CT

Date Ordered: 9/1/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name:	Last Service: 8/20/2026	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 #: 206263Date: 9/3/26Name: Mike Boyd

Instructions: _____

Address: 788 Highgrove Dr.Order #: 538602Talking Rock, GA. 30175

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 Top					
Manufacturer	Zline					
Model #	RA36					
Serial #	RA36GE25090286CN-09					
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
325	M252405	Good	Triarc	2025	UG	Good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	MEC	1122H	☒ Correct ☐ Incorrect		
2nd	MEC	1222	☒ Correct ☐ Incorrect	11.2	13.1

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
120 PSI	120 PSI	10 Mins	☒ Yes	_____ PSI	_____ PSI	_____ Mins	☐ Yes
_____ WC	_____ WC	_____ Mins	☐ No				☐ 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) <u>Fernando Sardo</u>	Service Technician (Signature) 	Date <u>9/3/26</u>
Customer (Print) <u>CNP</u>	Customer (Signature) 	Date



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RINNAI WORK ORDER

Customer Acct #: 206263

Date: 7/1/26

Name **MIKE BOYD**

Instructions: **DROP 325UG W/50G@2.499G DROP ANODE**

Address **788 HIGHGROVE DRIVE**

CALL 770-655-7090 CCOF

TALKING ROCK, GA 30175

Order #: **517083**

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 2.999

Gallons 50

FRCC \$9.79

Fuel Total 149.95

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 2.499

Gallons 50

FRCC \$9.79

Fuel Total 124.95

1st yr Lease FREE

Total Materials

Sub-Total

Sales Tax

Tank Set Fee 20.00

Safety Inspection \$29.95

Total Labor

Total charges

Prepay Bal On Account

Safe Appliance Savings

Safe Appliance Rebate 50.00

494.78

TOTAL BALANCE DUE