

✓SLM

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9/14/2026 9:33:41 AM

WORK ORDER

LINDSEY DUMAS OR MATTHEW MCKAY

257 DOGWOOD CT
ELLIJAY, GA 30540
(412) 303-8601

Customer #: 22865
Order #: 544113
Location #: 271568
Zone: B-043-FRI-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 9/17/26 Connect and convert stove-conversion kit on site Haul
Off Old Stove \$25.00. Call 843-368-9774 CCOF-SLM

Date Ordered: 9/8/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
Name: Heating System	Last Service: 10/18/2024		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 #: 22865

Name: LINDSEY DUMAS

Address: 257 DOGWOOD CT
ELLIJAY GA 30540

Date: 9/14/26

Instructions: **CONNECT AND CONVERT STOVE
CONVERSION KIT ON SITE CALL 843-368-9774
CCOF-SLM**

Order #: 544113

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					
Manufacturer	Frigidaire					
Model #	PCFG308DAFH					
Serial #	VF63464786					
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
250	M0253721	Good	Trinity	2002	RG.	Good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	Rego	LV3403	☒ Correct ☐ Incorrect		
2nd	Rego	3403B4	☒ Correct ☐ Incorrect	11.3	13.6

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
100 PSI	100 PSI	10 Mins	☒ Yes	15 PSI	15 PSI	10 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)	Service Technician (Signature)	Date
Customer (Print)	Customer (Signature)	Date
Lindsey Dumas		9-17-26
		9-17-26



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RINNAI WORK ORDER

Customer Acct #: 22865
Name LINDSEY DUMAS OR MATTHEW MCKAY
Address 257 DOGWOOD CT
ELLIJAY GA 30540

Date: 7-27-26
Instructions: PICK UP 250 AND SET 325 W/ 260
CONNECT TO LINES THERE. CCOF SM
Order #: 543027

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 260
FRCC \$9.79
Fuel Total 779.74
Tank Lease/YR 99.00

New Cust Special

L.P. Gas /Gal 2.999
Gallons 260
FRCC \$9.79
Fuel Total 779.74
1st yr Lease 99.00

Total Materials

Sub-Total

Sales Tax

Tank Set Fee \$250

Tank Set Fee

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