

9/17/2026 11:55:31 AM

WORK ORDER

Urvin Gandhi

115 Whisperwood Trail
Blairsville, GA 30512
(773) 308-4882

Customer #: 206562
Order #: 545950
Location #: 282842
Zone: B-018-MON-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 9/22/26 connect line to tank Call 773-308-4882 CCOF-CLT

Date Ordered: 9/17/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name:

Contract:

Manufact:

Notes:

Instructions:

Last Service: 9/8/2026

SC Renewal:

Model:

Last Tune Up:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
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PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 206562

Date: 9/22/26

Name: URVIN GANDHI

Instructions: CONNECT LINE TO TANK CCOF CLT

Address: 115 WHISPERWOOD TRAIL

BLAIRSVILLE GA 30512

Order #: 545950

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	Furnace					
Manufacturer	Runtal					
Model #	5MXCC009AC6HCAA					
Serial #	250830161M					
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	M2605048	Good	2026 Triarc		UG	Good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	Rego LV3403TR9	8/25	☒ Correct ☐ Incorrect		
2nd	Rego 4403	UV	☒ Correct ☐ Incorrect	11.2	12.9

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 ☐ No	_____ PSI	_____ PSI	_____ 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) Fernando Sardo	Service Technician (Signature) 	Date 9/22/26
Customer (Print) CNP	Customer (Signature) 	Date



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RINNAI WORK ORDER

Customer Acct #: 206562

Name URVIN GANDHI

Address _____

115 WHISPERWOOD TRAIL
BLAISVILLE GA 30512

Date: 9-2-26

Instructions: GO 1ST T/I 325UGW/50@2.499G GC TO
BURY ANODE TEST LINES ARE THERE CCOF SLM

Order #: _____

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 400.00

TOTAL BALANCE DUE