

Confirmed ✓
Jm

8/26/2026 3:48:24 PM

WORK ORDER

Clay Foster

493 Canaan Drive
Maysville, GA 30558
(850) 380-7721

Customer #: 206234
Order #: 537494
Location #: 282459
Zone: J-015-TUE-
Terms: Net 30

Map Code:

Service Code: Propane Service

Description: 9-11 H/U gas cooktop and connect to house CCOF
850-380-7721

House is
unlocked!
cooktop
& fireplace

Tech: _____

Date Ordered:	8/26/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name: Last Service: 6/25/2026 Last Tune Up:
Contract: SC Renewal:
Manufact: Model:
Notes:
Instructions:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
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RINNAI WORK ORDER

Customer Acct #: 206234
Name CLAY FOSTER
Address 493 CANAAN DRIVE
MAYSVILLE, GA 30558

Date: 6/25/26
Instructions: SET LEASE 250UG W/200 GALS
Order #: _____

DESCRIPTION OF WORK
COMMENTS: <u>Set leased 250UG w/200 gals. Connected anode. Ran new yard line to existing stub out. Installed 2nd stage regulator. Locked out Tank. 80% in tank.</u>
SERVICED BY: <u>KS</u>

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
6-25-26	10:00	11:00	1	100.00/hr	\$100.00
			<u>Take Royal</u>	100.00/hr	\$750.00

FOR OFFICE USE ONLY

Performed leak check Yes ☒ No
Gas check attached Yes ☒ No
Leak check Initial KS

Start Pressure End Pressure Time Held System OK

% in Tank

80%

AMOUNT REC'D

\$

☐ CASH ☐ CHECK # _____

☒ CREDIT CARD

CC00

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.

Clay Foster

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	250	Gallons 200
FRCC	\$9.79	FRCC \$9.79
Fuel Total	609.59	Fuel Total 509.59
Tank Lease/YR	129.00	1st yr Lease FREE
Total Materials		\$600.48
Sub-Total		\$1110.07
Sales Tax		\$99.81
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		559.00
Safe Appliance Rebate		50.00
TOTAL BALANCE DUE		2059.58



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 206234

Date: 6/25/26

Name: CLAY FOSTER

Instructions: SET LEASE 250UG W/200 GALS

Address: 493 CANAAN DRIVE

Order #:

MAYSVILLE, GA 30558

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>cooktop</u>	<u>hob/dishwasher</u>				
Manufacturer	<u>Bosch</u>					
Model #	<u>00634737</u>					
Serial #	<u>800216823</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>250</u>	<u>112514035</u>	<u>Good</u>		<u>2025</u>	<u>U/G</u>	<u>Good</u>

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	<u>mel</u>	<u>1122</u>	<u>15 APR 24</u> ☒ Correct ☐ Incorrect		
2nd	<u>mel</u>	<u>1222</u>	<u>16 feb 23</u> ☒ Correct ☐ Incorrect	<u>11</u>	<u>12</u>

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
<u>150</u> PSI	<u>150</u> PSI	<u>10</u> Mins	☒ Yes	_____ PSI	_____ PSI	_____ Mins	☐ Yes
_____ WC	_____ WC	_____ Mins	☐ No				☐ No

Comments:

800m tank/All appliances in working condition

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>Orten Diggins</u>	Service Technician (Signature) <u>Orten Diggins</u>	Date <u>9/11/26</u>
Customer (Print)	Customer (Signature) <u>customer not here</u>	Date