

9/24/2026 10:40:20 AM

WORK ORDER

AI Adkins

706 Ingram Hancock Road
Commerce, GA 30530
(706) 367-4763

Customer #: 206759
Order #: 547150
Location #: 283092
Zone: H-003-TUE-
Terms: Net 30

Map Code:

Service Code: Propane Service

Description: 9-25-26, cod, S/O to leased 325AG w/260 gals @ 2.499 and
h/u, T/I monitor, call AI on the way (706) 367-4763

Tech: _____

706-215-1706

Date Ordered: 9/24/2026

Scheduled Date:

Est. Completion:

Start:

Stop:

Name:

Contract:

Manufact:

Notes:

Instructions:

Last Service:

SC Renewal:

Model:

Last Tune Up:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
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RINNAI WORK ORDER

Customer Acct #: 206759
Name AL ADKINS
Address 706 INGRAM HANCOCK RD
COMMERCE, GA 30530

Date: 9/25/26
Instructions: S/O TO LEASED 325AG W/260 GALS
Order #: _____

DESCRIPTION OF WORK
COMMENTS: <u>Set leased 325 B/G w/260 gals. connected to existing yard line- moved suburban tank. Installed monitor. Performed leak test at 170 PSI for 10 mins 10 leaks found. 80% in tank. All appliances in working condition.</u>
SERVICED BY: <u>OD/MS</u>

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
9/25/26	3:20	3:50	30 mins	100.00/hr	_____
				100.00/hr	

FOR OFFICE USE ONLY			
Performed leak check	☒ Yes	☐ No	
Gas check attached	☒ Yes	☐ No	
Leak check	Initial <u>MS/OD</u>		
Start Pressure	End Pressure	Time Held	System OK
<u>170 PSI</u>	<u>170 PSI</u>	<u>10 mins</u>	<u>YES</u>

% in Tank 80%

AMOUNT REC'D
\$ _____
☐ CASH ☐ CHECK # _____
☒ CREDIT CARD
<u>CLOF</u>
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 260	Gallons 260	
FRCC \$9.79	FRCC \$9.79	
Fuel Total 789.53	Fuel Total 659.53	<u>659.53</u>
Tank Lease/YR 99.00	1st yr Lease FREE	
Total Materials		
Sub-Total		<u>659.53</u>
Sales Tax		<u>46.17</u>
Tank Set Fee \$250	Tank Set Fee 20.00	<u>20.00</u>
Safety Inspection \$129.95	\$29.95	<u>29.95</u>
Total Labor		
Total charges		
Prepay Bal On Account		
Safe Appliance Savings		<u>589.00</u>
<u>Safe Appliance Rebate</u>		<u>250.00</u>
TOTAL BALANCE DUE		<u>755.65</u>



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: **206759**

Date: **9/25/26**

Name: **AL ADKINS**

Instructions: **S/O TO LEASED 325 W/260 GALS**

Address: **706 INGRAM HANCOCK RD**

Order #:

COMMERCE, GA 30530

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	water heater	cooling	heater			
Manufacturer	AOSmith	GE	Empire			
Model #	66-5832PVR-4R	665300R2BB	RH-35-V			
Serial #	2045121798122	2R147498R	122065735			
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	25H060795	Good	American	1998	D/G	Good

Regulator(s):

Manufacturer		Model	Regulator Date	Regulator Venting		Flow/Delivery Pressure	Lock-Up Pressure
Twin	mei	1232	28 mar 24	☒ Correct	☐ Incorrect	11	12
1st				☐ Correct	☐ Incorrect		
2nd				☐ Correct	☐ Incorrect		

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
140 PSI	140 PSI	10 Mins	☒ Yes	____ PSI	____ PSI	____ Mins	☐ Yes
____ WC	____ WC	____ Mins	☐ No				☐ No

Comments:

80% in 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)	Service Technician (Signature)	Date
Customer (Print)	Customer (Signature)	Date