



INVOICE

No 11497

HOME OWNED & OPERATED

P.O. BOX 506 • BAXLEY, GEORGIA 31515

2174 HATCH PARKWAY SOUTH • BAXLEY, GEORGIA 31513 • Tel. (912) 367-1151

NAME	<u>Lewis Tool + Equipment</u>	ACCOUNT NO.	
MAIL ADDRESS	<u>3617 Golden Isles W.</u>	DATE ORDERED	
CITY/STATE/ZIP	<u>Baxley GA 31513</u>	DATE PROMISED	
PHONE	<u>912-705-5438</u>	DATE COMPLETED	<u>9-17-26</u>
LOCATION		TERMS	

INSTRUCTIONS install 500 gallon AG/UG tank, tankless water heater, fire box, gas logs, generator, and all gas lines

QTY.	TAG NO. AND DESCRIPTION OF APPLIANCE/MATERIAL	UNIT PRICE	SALES AMOUNT
1	500 gallon, 2025 quality steel AG/UG propane tank		3800 00
1	17 Lb. anode bag		300 00
400	gallon of propane	2 89	1156 00
1	Rinnai RX199i tankless water heater w/isolation valves		1800 00
1	Tankless water heater pan		85 00
1	42" Empire brackenridge firebox w/porcelain liner + blower		1561 85
1	30" Paterson G10-24/30-15(M)P gas log set w/V/A remote		1449 95
1	Rago LV4403TR9 high pressure regulator		69 95
1	Rago LV4403Y4 2 psi regulator		79 95
1	Rago LV4403B66R second stage regulator		74 95

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:

1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐

SERVICES PERFORMED

installed all gas lines, TOTAL MATERIAL 10377 65500 gallon AG/UG tank, tankless water heater, fire box, gas logs, regulators + fittings, hooked up generator, ran pressure checkTOTAL TIME _____ HOURS LABOR 2200 00

THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.

SERVICES PERFORMED

BY Dan Miller

SUBTOTAL

SALES TAX 830 21TOTAL DUE 13,407 86X _____
CUSTOMER'S SIGNATURE

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

INSTALLATION OR TURN ON	REMOVAL OR TURN OFF	LEAK AND PRESSURE TEST	
		HIGH	LOW
SIZE: <u>500</u>	SIZE	START LOCK UP	START LOCK UP
S/N: <u>1547466</u>	S/N	TANK OFF PRESSURE	TANK OFF PRESSURE
GALLONS OR READING: <u>400 gal</u>	GALLONS OR READING	AFTER 10 MINUTES PRESSURE AS LEFT	AFTER 10 MINUTES PRESSURE AS LEFT

GP&A rebate 200.00
13,207.86

RECEIVED BY _____
DATE _____
SERVICES RECEIVED BY _____

WHITE/CUSTOMER'S COPY; YELLOW/POSTING COPY; PINK/FILE COPY



INVOICE

Nº 11498

HOME OWNED & OPERATED

P.O. BOX 506 • BAXLEY, GEORGIA 31515

2174 HATCH PARKWAY SOUTH • BAXLEY, GEORGIA 31513 • Tel. (912) 367-1151

NAME	<u>Lewis Tool + Equipment</u>	ACCOUNT NO.	
MAIL ADDRESS	<u>3617 Golden Isles W.</u>	DATE ORDERED	
CITY/STATE/ZIP	<u>Baxley GA 31513</u>	DATE PROMISED	
PHONE	<u>912-705-5438</u>	DATE COMPLETED	<u>9-17-26</u>
LOCATION		TERMS	

INSTRUCTIONS

QTY	TAG NO. AND DESCRIPTION OF APPLIANCE/MATERIAL	UNIT PRICE	SALES AMOUNT
1	Maxitrol 325-5L regulator		79 95
1	Maxitrol 325-3L regulator		59 95
1	Gas OX box		39 99
165'	1/2" Trac Pipe CounterStrike CSST	5 09	839 85
50'	1/2" coated copper tubing	3 99	199 50
50'	3/8" coated copper tubing	3 29	164 50
1	30" Rego dielectric pigtail		29 99
8	1/2" Trac Pipe x male adaptor	28 50	228 00
All	other gas fittings, cut off valves, thread sealant, etc.		159 25
1	Mini excavator fee		300 00

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:

1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐

2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐

SERVICES PERFORMED

same as inv# 11497

TOTAL MATERIAL

2100 98

THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.

SERVICES PERFORMED

BY

Daniel Hite

SUBTOTAL

SALES TAX

168 08

TOTAL DUE

2269 06

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

INSTALLATION OR TURN ON	REMOVAL OR TURN OFF	LEAK AND PRESSURE TEST		AMOUNT RECEIVED \$
		HIGH	LOW	
SIZE:	SIZE:	START LOCK UP:	START LOCK UP:	RECEIVED BY
S/N:	S/N:	TANK OFF PRESSURE:	TANK OFF PRESSURE:	DATE
GALLONS OR READING:	GALLONS OR READING:	AFTER 10 MIN/TEST:	AFTER 10 MIN/TEST:	SERVICES RECEIVED BY
		PRESSURE AS LEFT:	PRESSURE AS LEFT:	

WHITE/CUSTOMER'S COPY, YELLOW/POSTING COPY, PINK/FILE COPY

GASCheck - Gas Appliance System Check

Account Name _____ Invoice Number _____ Date 9/17/26
 Name Lewis Tool & Equipment Company Sikes Propane, Inc.
 Address 3617 Golden Isles W. Call Taken By _____
 City Baxley State GA Zip 31513 Telephone (Cell) _____ (Home) 912-705-5438
 Appliance Check

Appliance	Water Heater	Gas Logs	Generator			
Manufacturer	<u>Rinnai</u>	<u>Peterson</u>	<u>Generac</u>			
Model #	<u>RX199i</u>	<u>G10-24/30-15CM/P</u>	<u>60073280</u>			
Serial #	<u>TJ.BA-22 7571</u>	<u>2149607</u>	<u>3019041045</u>			
BTL's	<u>199,000</u>	<u>37,000</u>	<u>360,000</u>			
Burner / Comb. Chamber	<u>ok</u>	<u>ok</u>	<u>ok</u>			
Man. Shutoff / Sed. Trap	<u>installed</u>	<u>installed</u>	<u>installed</u>			
Control / Pilot Safety System	<u>ok</u>	<u>ok</u>	<u>ok</u>			
Venting System	<u>ok</u>	<u>ok</u>	<u>ok</u>			
Age	<u>new</u>	<u>new</u>	<u>new</u>			
Taken Out Of Service Or Operation						

Container Check

Size	Serial #	Manufacturer	MFR. Date	Location	Container Condition	Relief Valve	Fittings Leak Check
<u>500</u>	<u>1547466</u>	<u>Quality Steel</u>	<u>2025</u>	<u>ok</u>	<u>new</u>	<u>10D22</u>	<u>ok</u>

Pressure Test (If Applicable)

Start Pressure	End Pressure	Time Held	Pressure Held
<u>120psi.</u>	<u>120psi.</u>	<u>10min.</u>	<u>0</u>
			<u>0</u>

Piping Check

Materials	Size	Cover / Protection
<u>coated copper</u>	<u>1/2" + 3/8"</u>	<u>ok</u>
<u>Trac Pipe</u>	<u>1/2"</u>	

System Leak Check

Start Pressure	End Pressure	Time Held	Pressure Held
<u>9in.wc.</u>	<u>9in.wc.</u>	<u>10min.</u>	<u>0</u>
			<u>0</u>

Regulator Check

Type	Manufacturer	Date / Model	Vent Position / Protection
<u>First</u>	<u>Rago</u>	<u>04D2025 / LV4403 TR9</u>	<u>u-c</u>
<u>Second</u>	<u>Rago</u>	<u>06C2022 / LV4403 Y4</u>	<u>down</u>
<u>Second</u>	<u>Rago</u>	<u>06E2022 / LV4403 B66R</u>	<u>down</u>
<u>Second</u>	<u>Maxitrol</u>	<u>325-SL + 325-3L</u>	<u>horizontal</u>

Safety Information Supplied:

Comments: Please note all repairs and corrections made along with any recommended actions.