

9/24/2026 2:53:04 PM

WORK ORDER

Mark Thomas

58 Whitetail Hollow
Morganton, GA 30560
(239) 349-1709

Customer #: 206742
Order #: 546679
Location #: 283070
Zone: B-009-WED-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 9-25-26 T/I 250 w/ 200g @ 2.499 Connect appliances. Run line for 2 drops. T/I 18" Low Country Timber log set and Burner.
CCOF SLM Gate is open 239-349-1709

*GO AFTER
11:00*

Date Ordered: 9/22/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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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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PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 206742

Date: 9-25-26

Name: MARK THOMAS

Instructions: T/I 250 W/ 200G @ 2.499 2 DROPS

Address: 58 WHITETAIL HOLLOW

CONNECT APPLIANCES CCOF SM GATE OPEN

239-349-1709 SLM

MORGANTON GA 30560

Order #: 546679

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	Fireplace				
Manufacturer	Whirlpool	everwarm				
Model #	WFG5530RZ10	EWP02430PW				
Serial #	RE0633037	100042632				
Burner/Combustion Chamber	☒ Ok ☐ N/A	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Manual Shutoff	☒ Ok ☐ N/A	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Sediment Trap	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
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 ☐ N/A	☐ Ok ☐ N/A	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
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	M0431459	good	Trinity	2004	Ag	good

Regulator(s):

Manufacturer		Model	Regulator Date	Regulator Venting		Flow/Delivery Pressure	Lock-Up Pressure
Twin	Rego	B39	2020	☒ Correct	☐ Incorrect	11	13
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
120 PSI	120 PSI	10 Mins	☒ Yes ☐ No	15 PSI	15 PSI	10 Mins	☒ Yes ☐ No
WC	WC	Mins					

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)	Brandon Payne	Service Technician (Signature)	<i>Brandon Payne</i>	Date	9/25/26
Customer (Print)	MARK THOMAS	Customer (Signature)	<i>Mark Thomas</i>	Date	9.25.26



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RINNAI WORK ORDER

Customer Acct #: 206742
Name MARK THOMAS
Address 58 WHITETAIL HOLLOW
MORGANTON GA 30560

Date: 9-25-26
Instructions: T/I 250 W/ 200G @ 2.499 2 DROPS
CONNECT APPLIANCE CCOF SIM 239-349-1706
Order #: 546679

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	200	Gallons 200
FRCC	\$9.79	FRCC \$9.79
Fuel Total	599.80	Fuel Total 499.80
Tank Lease/YR	99.00	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		538.16
Safe Appliance Rebate		50.00
TOTAL BALANCE DUE		