

Handwritten signature and initials

2/9/2026 10:13:46 AM

WORK ORDER

Ed Mitchell

3028 Mulberry Greens Lane
Jefferson, GA 30549
(803) 338-7295

Customer #: 205522
Order #: 469153
Location #: 281534
Zone: J-006-WED-
Terms: Net 30

Map Code:

Service Code: Propane Service

Description: 02-13-26, ccof, Set lease 120UG w/100 gals @ 3.999, run line inside for gas range and line from tank to house, Jake to dig call Ed on the way (803) 338-7295

Tech: _____

| | | | | |
|------------------------|-----------------|------------------|--------|-------|
| Date Ordered: 2/9/2026 | Scheduled Date: | Est. Completion: | Start: | Stop: |
|------------------------|-----------------|------------------|--------|-------|

Name: _____ Last Service: _____
Contract: _____ SC Renewal: _____
Manufact: _____ Model: _____
Notes: _____
Instructions: _____

Service History:

| Date | Invoice # | Tech | Problem Reported | Service Notes |
|------|-----------|------|------------------|---------------|
|------|-----------|------|------------------|---------------|



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 205522

Date: 02/13/26

Name: ED MITCHELL

Instructions: SET LEASE 120UG RUN LINEFROM TANK

Address: 3028 MULBERRY GREENS LANE

TO HOUSE AND INSIDE FOR NEW RANGE

JEFFERSON, GA 30549

Order #: _____

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> | | | | | |
| Manufacturer | <u>Whisper</u> | | | | | |
| Model # | <u>WCH5036P500</u> | | | | | |
| Serial # | <u>DF6109383</u> | | | | | |
| Burner/Combustion Chamber | <input checked="" type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok |
| Manual Shutoff | <input checked="" type="checkbox"/> Ok | <input type="checkbox"/> N/A | <input type="checkbox"/> Ok | <input type="checkbox"/> N/A | <input type="checkbox"/> Ok | <input type="checkbox"/> N/A |
| Sediment Trap | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok |
| Pilot Safety System | <input type="checkbox"/> Ok | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Ok | <input type="checkbox"/> N/A | <input type="checkbox"/> Ok | <input type="checkbox"/> N/A |
| Electronic Ignition System | <input checked="" type="checkbox"/> Ok | <input type="checkbox"/> N/A | <input type="checkbox"/> Ok | <input type="checkbox"/> N/A | <input type="checkbox"/> Ok | <input type="checkbox"/> N/A |
| Venting System | <input checked="" type="checkbox"/> Ok | <input type="checkbox"/> N/A | <input type="checkbox"/> Ok | <input type="checkbox"/> N/A | <input type="checkbox"/> Ok | <input type="checkbox"/> N/A |
| Combustion Air | <input checked="" type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok | <input type="checkbox"/> Ok |
| Taken Out of Service | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Container Check:

| Size | Serial # | Container Fitting Leak Test | Manufacturer | Manufacture Date | Location | Tank Condition |
|------------|-----------------|-----------------------------|--------------|------------------|------------|----------------|
| <u>120</u> | <u>M2579151</u> | <u>Good</u> | <u>TR</u> | <u>2025</u> | <u>V/G</u> | <u>Good</u> |

Regulator(s):

| Manufacturer | Model | Regulator Date | Regulator Venting | Flow/Delivery Pressure | Lock-Up Pressure |
|--------------|------------|----------------|--|------------------------|------------------|
| <u>Twin</u> | <u>mcc</u> | <u>1232</u> | <input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect | <u>10.5"</u> | <u>11.5'</u> |
| <u>1st</u> | | | <input type="checkbox"/> Correct <input type="checkbox"/> Incorrect | | |
| <u>2nd</u> | | | <input type="checkbox"/> Correct <input type="checkbox"/> Incorrect | | |

Piping System Leak Test:

Pressure Test:

| Start Pressure | End Pressure | Time Held | Pass | Start Pressure | End Pressure | Time Held | Pass |
|----------------|---------------|----------------|---|----------------|---------------|----------------|---|
| <u>90</u> PSI | <u>40</u> PSI | <u>10</u> Mins | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <u>15</u> PSI | <u>15</u> PSI | <u>10</u> Mins | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| ____ WC | ____ WC | ____ Mins | | | | | |

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) <u>Owen D. D. S.</u> | Service Technician (Signature) <u>Owen D. D. S.</u> | Date <u>2/13/26</u> |
| Customer (Print) | Customer (Signature) | Date |



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RINNAI WORK ORDER

Customer Acct #: 205522
 Name ED MITCHELL
 Address 3028 MULBERRY GREENS LANE
JEFFERSON, GA 30549

Date: 02/13/26
 Instructions: SET LEASE 120UG W/100 GAAS RUN
LINE FROM TANK TO HOUSE AND RUNLINE INSIDE FOR
 Order #: GAS RANGE JAKE TO DIG

| DESCRIPTION OF WORK |
|---|
| COMMENTS: <u>Set leased 120UG ran new line from tank to cooktop</u> <u>installs and converted cooktop. Performed leak test at 90 ps. for</u> <u>10 mins no leaks found. 80% in tank all appliances in working</u> <u>condition.</u> |
| SERVICED BY: <u>DD</u> |

| DATE | START TIME | FINISH TIME | TOTAL TIME | LABOR RATE | AMOUNT |
|----------------|--------------|-------------|--------------|------------|---------------|
| <u>2/13/26</u> | <u>12:45</u> | <u>2:45</u> | <u>2 hrs</u> | 100.00/hr | <u>200.00</u> |
| | | | | 100.00/hr | |

FOR OFFICE USE ONLY

Performed leak check Yes No
 Gas check attached Yes No
 Leak check Initial DD

Start Pressure 90ps. End Pressure 90ps. Time Held 10 mins System OK yes

% in Tank 80%

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.

Ed Mitchell
 CUSTOMER SIGNATURE

| Retail Price | | Contract Price |
|------------------------------|------------------|-----------------|
| Rinnai \$ | | \$ |
| Standard Vent Kit \$ | | \$ |
| Standard Install \$ | | \$ |
| Total \$ | | \$ |
| Tank Set | New Cust Special | |
| L.P. Gas /Gal <u>3.999</u> | L.P. Gas /Gal | <u>3.999</u> |
| Gallons <u>100</u> | Gallons | <u>100</u> |
| FRCC \$9.79 | FRCC | \$9.79 |
| Fuel Total <u>409.69</u> | Fuel Total | <u>409.69</u> |
| Tank Lease/YR <u>129.00</u> | 1st yr Lease | <u>129.00</u> |
| Total Materials | | <u>539.11</u> |
| Sub-Total | | <u>1,077.80</u> |
| Sales Tax | | <u>75.45</u> |
| Tank Set Fee \$250 | Tank Set Fee | <u>20.00</u> |
| Safety Inspection \$129.95 | | \$29.95 |
| Total Labor | | |
| Total charges | | |
| Prepay Bal On Account | | |
| Safe Appliance Savings | | <u>330.00</u> |
| <u>Safe Appliance Rebate</u> | | <u>50.00</u> |
| TOTAL BALANCE DUE | | <u>1,353.25</u> |