

Confirmed ✓
HM

2/23/2026 10:40:36 AM

WORK ORDER

Chris Waldrip

318 Majestic Shores Drive
Hartwell, GA 30643
(706) 540-7572

Customer #: 205614
Order #: 473926
Location #: 281643
Zone: J-007-THU-
Terms: Net 30

Tech: _____

Map Code: _____

Service Code: Propane Service

Description: 03-09-26, ccof, Final h/u, all appliances will be ready for h/u, call
Chris on the way (706) 540-7572

Date Ordered:	Scheduled Date:	Est. Completion:	Start:	Stop:
2/23/2026				

Name: _____
Contract: _____
Manufact: _____
Notes: _____
Instructions: _____

Last Service: 2/12/2026
SC Renewal: _____
Model: _____

Last Tune Up: _____

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
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RINNAI WORK ORDER

Customer Acct #: 205614
 Name CHRIS WALDRIP
 Address 318 MAJESTIC SHORES DRIVE
HARTWELL, GA 30643

Date: 02/12/26
 Instructions: SET LEASE 500UG W/400 GALS RUN
LINE AND H/U T/I MONITOR JAKE TO DIG
 Order #: _____

DESCRIPTION OF WORK

COMMENTS: Set leased 500UG with 400 gals. Ran new yard
line and connected to stub out. locked tank out.
connected anode and installed monitor. 80% in tank.

SERVICED BY: BW/KS

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
02-12-26	1200	1330	1.5	100.00/hr	150
				100.00/hr	

FOR OFFICE USE ONLY

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

Start Pressure _____ End Pressure _____ Time Held _____ System OK _____

% 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.

Customer not here
 CUSTOMER SIGNATURE

Retail Price		Contract Price
_____ Rinnai	\$ _____	\$ _____
Standard Vent Kit	\$ _____	\$ _____
Standard Install	\$ _____	\$ _____
Total	\$ _____	\$ _____
Tank Set	New Cust Special	
L.P. Gas /Gal 3,499	L.P. Gas /Gal	2,999
Gallons 400	Gallons	400
FRCC \$9.79	FRCC	\$9.79
Fuel Total 1409.39	Fuel Total	1209.39 <u>1209.39</u>
Tank Lease/YR 129.00	1st yr Lease	FREE
Total Materials		<u>1176.72</u>
Sub-Total		<u>2386.11</u>
Sales Tax		<u>167.03</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>1059.00</u>
<u>Safe Appliance Rebate</u>		<u>450.00</u>
TOTAL BALANCE DUE		<u>3,518.48</u> <u>3659.14</u>



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 205614

Date: 03/09./26

Name: CHRIS WALDRIP

Instructions: SET LEASE 500UG W/400 GALS RUH

Address: 318 MAJESTIC SHORES DRIVE
HARTWELL, GA 30643

LINE AND H/U T/I MONITOR JAKE TO DIG
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	COOKTOP	logset	Waterheater	Waterheater		
Manufacturer	kitchenaid	Peterson	Nation	Nation		
Model #	KFD5936SS500	NB8888	NPE-2405A	NPE-240A		
Serial #	DF661D156	7105101	2089E2561609	2089B2592354042		
Burner/Combustion Chamber	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok
Manual Shutoff	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<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 checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok
Pilot Safety System	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<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
Electronic Ignition System	<input type="checkbox"/> Ok <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<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 checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<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 checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok	<input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<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
500	M2519581	good	TPI	2023	UG	good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
1st	MEC	09DEC 24	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd	MEC	16FEB 23	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	12	13

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
110 PSI	110 PSI	10 Mins	<input checked="" type="checkbox"/> Yes	15 PSI	25 PSI	10 Mins	<input checked="" type="checkbox"/> Yes
WC	WC	Mins	<input type="checkbox"/> No				<input type="checkbox"/> No

Comments: 80% in tank. All appliances working correctly, except water heaters not ready to fire up.

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>Drewt Walton</u>	Service Technician (Signature) <u>Drewt Walton</u>	Date <u>03-09-26</u>
Customer (Print) <u>DAVID FRICK</u>	Customer (Signature) <u>DAVID FRICK</u>	Date