



INVOICE

No 11343 ✓

HOME OWNED & OPERATED

P.O. BOX 506 • BAXLEY, GEORGIA 31515
2174 HATCH PARKWAY SOUTH • BAXLEY, GEORGIA 31513 • Tel. (912) 367-1151

NAME	<u>Cindy Waters</u>	ACCOUNT NO.	_____
MAIL ADDRESS	<u>108 Oak Ridge Lane</u>	DATE ORDERED	_____
CITY/STATE/ZIP	<u>Alma GA 31510</u>	<input type="checkbox"/> CREDIT PROMISED	_____
PHONE	<u>912-288-2687</u>	DATE COMPLETED	<u>4-2-26</u>
LOCATION	_____	TERMS	_____

INSTRUCTIONS set 250 gallon tank, run all gas lines, install tankless water heater, fire box, Logs, range, & gas lights

QTY.	TAG NO. AND DESCRIPTION OF APPLIANCE/MATERIAL	UNIT PRICE	SALES AMOUNT
1	Rinnai RE160ep tankless water heater w/ isolation valves, serial # TBUA-028731		1150 00
1	Rinnai RGBRE recess box		319 00
1	42" Monessen		1050 00
1	30" Per Peterson G10-24/30-15(M) P gas Log set w/ VR2A		1498 00
1	Thor LRG3001K 30" gas range		1989 00
2	VN2 Legendary Lights w/ electronic ignition	1500 00	3000 00
1	VN2 damage credit		150 00
3	Maxitrol 325-3L regulator	59 95	179 85
1	Maxitrol 325-5L regulator		79 95

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER: 1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/> 2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>	SERVICES PERFORMED <u>set 250 gallon tank, run gas lines, installed tankless water heater, recess box, fire box, gas logs, gas lights, range, converted range to LP, ran pressure check, lit & checked appliances</u>	TOTAL MATERIAL	911.5 80
	TOTAL TIME _____ HOURS	LABOR	2800 00
THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	SERVICES PERFORMED BY <u>Daniel Sikes</u>	SUBTOTAL	→ 729 26
X _____ CUSTOMER'S SIGNATURE		SALES TAX	200.00
		TOTAL DUE	12,645.06

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				AMOUNT RECEIVED \$ <u>12,645.06</u>
INSTALLATION OR TURN ON	REMOVAL OR TURN OFF	LEAK AND PRESSURE TEST		- GPCA rebate 200.00 <u>12,445.06</u>
		HIGH	LOW	
SIZE: <u>250</u>	SIZE	START LOCK UP.	START LOCK UP.	DATE _____
S/N: <u>1554006</u>	S/N:	TANK OFF PRESSURE:	TANK OFF PRESSURE:	SERVICES RECEIVED BY _____
GALLONS OR READING: <u>0%</u>	GALLONS OR READING:	AFTER 10 MINUTES	AFTER 10 MINUTES	
		PRESSURE AS LEFT:	PRESSURE AS LEFT:	

GASCheck - Gas Appliance System Check

Account Name _____ Invoice Number _____ Date 4/2/26
 Name Cindy Waters Company Sikes Propane, Inc.
 Address 108 Oak Ridge Lane Call Taken By _____
 City Alma State GA Zip 31510 Telephone (Cell) 912-288-2687 (Home) _____

Appliance Check

Appliance	water heater	Range	Gas Logs	Gas Lights	Gas Lights
Manufacturer	<u>Rinnai</u>	<u>Thor</u>	<u>Peterson</u>	<u>Legendary</u>	<u>Legendary</u>
Model #	<u>RE160ap</u>	<u>LRG3001U</u>	<u>G10-24/30-15(M)P</u>	<u>VN2</u>	<u>VN2</u>
Serial #	<u>TB.UA-02 8731</u>	<u>LRG3001U22 08677</u>	<u>2082244</u>	<u>2484552</u>	<u>2484553</u>
BTL's	<u>160,000</u>	<u>67,000</u>	<u>37,000</u>	<u>2,800</u>	<u>2,800</u>
Burner - Comb. Chamber	<u>ok</u>	<u>ok</u>	<u>ok</u>	<u>ok</u>	<u>ok</u>
Man. Shutoff - Sed. Trap	<u>installed</u>	<u>installed</u>	<u>installed</u>	<u>installed</u>	<u>installed</u>
Control - Pilot Safety System	<u>ok</u>	<u>ok</u>	<u>ok</u>	<u>ok</u>	<u>ok</u>
Venting System	<u>ok</u>	<u>ok</u>	<u>ok</u>	<u>ok</u>	<u>ok</u>
Age	<u>new</u>	<u>new</u>	<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>250</u>	<u>1554006</u>	<u>Quality Steel</u>	<u>2025</u>	<u>ok</u>	<u>new</u>	<u>02C23</u>	<u>ok</u>

Pressure Test (If Applicable)

Start Pressure	End Pressure	Time Held	Pressure Held
<u>125psi.</u>	<u>125psi.</u>	<u>10min.</u>	<u>0</u>
			Work Order <u>0</u>

Piping Check

Materials	Size	Cover / Protection

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>
			Work Order <u>0</u>

Regulator Check

Type	Manufacturer	Date / Model	Vent Position / Protection
<u>First</u>	<u>Rago</u>	<u>07B2025 / LV4403TR9</u>	<u>u-c</u>
<u>Second</u>	<u>Rago</u>	<u>06C2022 / LV4403Y4</u>	<u>down</u>
<u>Third</u>	<u>Maxitrol</u>	<u>325-3L</u>	<u>horizontal</u>
<u>Third</u>	<u>Maxitrol</u>	<u>325-5L</u>	<u>horizontal</u>

Safety Information Supplied:

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