

Confirmed ✓  
Hm

4/21/2026 1:24:30 PM

# WORK ORDER

## Arturo Ruiz

515 Katherine Drive  
Jefferson, GA 30549  
(706) 289-4267

**Map Code:**

Service Code: Propane Service

Description: 4/27/26 CCOF, H/U Appliances in home Call Arturo on the way  
706-289-4267

Customer #: 205966  
Order #: 497251  
Location #: 282091  
Zone: J-004-TUE-  
Terms: Net 30

Tech: \_\_\_\_\_

Date Ordered: 4/21/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name:  
Contract:  
Manufact:  
Notes:  
Instructions:

Last Service: 4/17/2026  
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 #: 205966  
 Name: ARTURO RUIZ  
 Address: 515 KATHERINE DRIVE  
JEFFERSON, GA 30549

Date: 4/27/26  
 Instructions: H/U APPLIANCES TEST ANODE  
 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	Manufacturer	Model #	Serial #	Burner/Combustion Chamber	Manual Shutoff	Sediment Trap	Pilot Safety System	Electronic Ignition System	Venting System	Combustion Air	Taken Out of Service
3 Burner Propane Cook Stove	N/A	N/A	N/A	<input checked="" type="checkbox"/> Ok	<input checked="" type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok	<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"/> Yes <input checked="" type="checkbox"/> No
	Samsung	NSE6DS8550SRAA	06237DAVL00110X	<input type="checkbox"/> Ok	<input type="checkbox"/> Ok <input type="checkbox"/> N/A	<input type="checkbox"/> Ok	<input 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	<input type="checkbox"/> Ok	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Container Check:**

Size	Serial #	Container Fitting Leak Test	Manufacturer	Manufacture Date	Location	Tank Condition
250	M2545073	Good	TCI	2025	W/G	Good

**Regulator(s):**

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin MEC	1232	20 Jul 25	<input checked="" type="checkbox"/> Correct <input type="checkbox"/> Incorrect	11.5	12
1st			<input type="checkbox"/> Correct <input type="checkbox"/> Incorrect		
2nd			<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
115 PSI	115 PSI	10 Mins	<input checked="" type="checkbox"/> Yes	_____ PSI	_____ PSI	_____ Mins	<input type="checkbox"/> Yes
_____ WC	_____ WC	_____ Mins	<input type="checkbox"/> No				<input type="checkbox"/> No

Comments: 82% in tank All appliances working correctly

**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>Kevin Smith</u>	Service Technician (Signature) <u>[Signature]</u>	Date
Customer (Print) <u>Arturo Ruiz</u>	Customer (Signature) <u>[Signature]</u>	Date



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# RINNAI WORK ORDER

Customer Acct #: 205966  
 Name ARTURO RUIZ  
 Address 515 KATHERINE DRIVE  
JEFFERSON, G A30549

Date: 04/17/26  
 Instructions: SET LEASE 250UG W200 GALS RUN LINE  
CONNECT TO STUB T/I MONITOR  
 Order #: \_\_\_\_\_

**DESCRIPTION OF WORK**

**COMMENTS:** set leased 250 w/6 w 200 gals connect Anode. connected to existing stubout. performed leak test at 100psi for 10 mins no leaks found. 80% in tank All appliances in working condition. Inspected monitor

**SERVICED BY:** OP/JN

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
<u>4/17/26</u>	<u>9:45</u>	<u>10:15</u>	<u>30 mins</u>	100.00/hr	—
				100.00/hr	

**FOR OFFICE USE ONLY**

Performed leak check  Yes  No  
 Gas check attached  Yes  No  
 Leak check Initial OP/JN

Start Pressure 100PSI End Pressure 100PSI Time Held 10mins 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.

[Signature]  
 CUSTOMER SIGNATURE

Retail Price		Contract Price	
_____ Rinnai	\$ _____	\$ _____	
Standard Vent Kit	\$ _____	\$ _____	
Standard Install	\$ _____	\$ _____	
Total	\$ _____	\$ _____	
Tank Set		New Cust Special	
L.P. Gas /Gal	<u>2,999</u>	L.P. Gas /Gal	<u>2,499</u>
Gallons	<u>200</u>	Gallons	<u>200</u>
FRCC	\$9.79	FRCC	\$9.79
Fuel Total	<u>609.59</u>	Fuel Total	<u>509.59</u>
Tank Lease/YR	<u>129.00</u>	1st yr Lease	<u>FREE</u>
Total Materials			<u>349.95</u>
Sub-Total			<u>859.54</u>
Sales Tax			<u>68.76</u>
Tank Set Fee	\$250	Tank Set Fee	<u>20.00</u>
Safety Inspection	\$129.95		<u>29.95</u>
Total Labor			
Total charges			
Prepay Bal On Account			
Safe Appliance Savings			<u>559.00</u>
Safe Appliance Rebate			<u>50.00</u>
<b>TOTAL BALANCE DUE</b>			<u>978.25</u>