

GASCheck - Gas Appliance System Check

Account Name _____ Invoice Number _____ Date 5/14/26
 Name Brenda Murray Company Sikes Propane, Inc.
 Address 1049 Firestation Rd. Call Taken By _____
 City Baxley State GA Zip 31513 Telephone (Cell) 912-339-3011 (Home) _____

Appliance Check

Appliance	<u>water heater</u>	<u>gas Logs</u>				
Manufacturer	<u>Rinnai</u>	<u>Peterson</u>				
Model #	<u>RL75e</u>	<u>G10-24/30</u>				
Serial #	<u>PC-CA-04</u>	<u>-15 (M) P</u>				
	<u>0997</u>	<u>1408551</u>				
BTL's	<u>180,000</u>	<u>37,000</u>				
Burner - Comb. Chamber	<u>ok</u>	<u>ok</u>				
Man. Shutoff / Sed. Trap	<u>existing</u>	<u>existing</u>				
Control - Pilot Safety System	<u>ok</u>	<u>ok</u>				
Venting System	<u>ok</u>	<u>ok</u>				
Age	<u>new</u>	<u>8 yrs.</u>				
Taken Out Of Service Or Operation						

Container Check

Size	Serial #	Manufacturer	MFR. Date	Location	Container Condition	Relief Valve	Fittings Leak Check
<u>120</u>	<u>25A029256</u>	<u>American W.</u>	<u>1996</u>	<u>ok</u>	<u>ok</u>	<u>03-96</u>	<u>ok</u>

Pressure Test (If Applicable)

Start Pressure	End Pressure	Time Held	Pressure Held	Work Order
<u>120psi.</u>	<u>120psi.</u>	<u>10 min.</u>	<u>0</u>	<u>0</u>

Piping Check

Materials	Size	Cover / Protection
<u>coated copper</u>	<u>5" & 3"</u>	<u>ok</u>

System Leak Check

Start Pressure	End Pressure	Time Held	Pressure Held	Work Order
<u>9 in. wc.</u>	<u>9 in. wc.</u>	<u>10 min.</u>	<u>0</u>	<u>0</u>

Regulator Check

Type	Manufacturer	Date / Model	Vent Position / Protection
<u>Twin</u>	<u>Rago</u>	<u>09B15 / LV404B4</u>	<u>down</u>

Safety Information Supplied: _____

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