

5/20/2026 8:34:48 AM

VMV
cfm

WORK ORDER

Stephen Byerly

1413 Wood Fern Way
Bogart, GA 30622
(770) 833-9526

Customer #: 206105
Order #: 506295
Location #: 282289
Zone: J-007-THU-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 05-22-26, ccof, Set lease 120AG w/100 gals @ 3.599 S/O with
cylinder and hook up to cooktop, \$49.95 safety check, call
Stephen on the way 770-833-9526

Date Ordered:	5/20/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
Name:	Last Service:				
Contract:	SC Renewal:				
Manufact:	Model:				
Notes:	Last Tune Up:				
Instructions:					

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
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Driveway Needs Propane hooked



www.folgergas.com

RINNAI WORK ORDER

Customer Acct #: 206105
Name STEPHEN BYERLY
Address 1413 WOOD FERN WAY
BOGART, GA 30622

Date: 05/22/26
Instructions: SET LEASE 120AG W/100 GALS
Order #: _____

DESCRIPTION OF WORK

COMMENTS: Set leased 120AG w/100gals. Connected to existing stub out. Performed
leak test @ 140psi for 10 min. No leaks found. 80% in tank. All appliances working correctly.
Price per JS as replacement customer agreed compensation for small yard damage.

SERVICED BY: KJ

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
5-22-26	9:15	10:00	.75	100.00/hr	0
				100.00/hr	

FOR OFFICE USE ONLY

Performed leak check ☒ Yes ☐ No
Gas check attached ☒ Yes ☐ No
Leak check Initial KJ

Start Pressure 140psi End Pressure 140psi Time Held 10min. System OK yes

% in Tank

80%

AMOUNT REC'D

\$ _____

☐ CASH ☐ CHECK # _____

☒ CREDIT CARD

CC00

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	3.599	L.P. Gas /Gal	3.599
Gallons	100	Gallons	100
FRCC	\$9.79	FRCC	\$9.79
Fuel Total	369.69	Fuel Total	369.69
Tank Lease/YR	99.00	1st yr Lease	99.00
Total Materials			
Sub-Total			<u>468.69</u>
Sales Tax			<u>37.50</u> 29.58
Tank Set Fee \$250		Tank Set Fee	<u>20.00</u> 20.00 C
Safety Inspection \$129.95			<u>29.95</u> 29.95 C
Total Labor			
Total charges			
Prepay Bal On Account			

Safe Appliance Savings

Safe Appliance Rebate

429.00
50.00

Price per J.S.

399.27

TOTAL BALANCE DUE

506.19
556.14



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: **206105**

Date: **05/22/26**

Name: **STEPHEN BYERLY**

Instructions: **SET LEASE 120AG W/100 GALS**

Address: **1413 WOOD FERN WAY**

Order #:

BOGART, GA 30622

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	<i>Cook Stove</i>					
Manufacturer	<i>Frigidaire</i>					
Model #	<i>FFGF7653LSF</i>					
Serial #	<i>VF13141855</i>					
Burner/Combustion Chamber	☒ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Manual Shutoff	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Sediment Trap	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Pilot Safety System	☐ Ok ☒ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Electronic Ignition System	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Venting System	☒ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A	☐ Ok ☐ N/A
Combustion Air	☒ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok	☐ Ok
Taken Out of Service	☐ Yes ☒ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

Container Check:

Size	Serial #	Container Fitting Leak Test	Manufacturer	Manufacture Date	Location	Tank Condition
<i>120</i>	<i>M2116954</i>	<i>Good</i>	<i>Acc.</i>	<i>2021</i>	<i>NE</i>	<i>Good</i>

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin <i>Mec</i>	<i>1232</i>	<i>21 Jun 25</i>	☒ Correct ☐ Incorrect	<i>10</i>	<i>10.5</i>
1st			☐ Correct ☐ Incorrect		
2nd			☐ Correct ☐ Incorrect		

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
<i>146</i> PSI	<i>146</i> PSI	<i>10</i> Mins	☒ Yes	<i>15</i> PSI	<i>15</i> PSI	<i>10</i> Mins	☒ Yes
____ WC	____ WC	____ Mins	☐ No				☐ No

Comments: *80% 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) <i>Kevin Smart</i>	Service Technician (Signature) <i>K. Smart</i>	Date <i>5.22.26</i>
Customer (Print) <i>J. Byerly</i>	Customer (Signature) <i>J. Byerly</i>	Date