

INVOICE

FITZGERALD WATER LIGHT AND BOND
P.O. Box 667
FITZGERALD, GA 31750

(229) 426-5400

TO: CAROLYN HOBBY
142 GLENN MERRITT RD
WRAY, GA 31798

INVOICE NO: 57621
DATE: 6/02/26

CUSTOMER NO: 528/570

TYPE: RO - RESIDENTIAL COUNTY BenHil

QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1.00	MDSE - Appliances SERIAL # TE CA 003055 Inventory item selected for charge code: AP-60000163014 Quantity: 1.00 TNKLESS WTR HTR R53 LP	690.95	690.95
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163013 Quantity: 1.00 PIPE COV ENCL 4 R53V	192.50	192.50
1.00	MDSE - Appliances Inventory item selected for charge code: AP-60000163015 Quantity: 1.00 VALVE KIT FOR RV53EP	95.37	95.37
1.00	Sales Tax	78.31	78.31

TOTAL DUE: \$1,057.13

PLEASE DETACH AND SEND THIS COPY WITH REMITTANCE

DATE: 6/02/26 DUE DATE: 6/12/26
CUSTOMER NO: 528/570

NAME: HOBBY, CAROLYN
TYPE: RO - RESIDENTIAL COUNTY BenHil

REMIT AND MAKE CHECK PAYABLE TO:
FITZGERALD WATER LIGHT AND BOND
P.O. Box 667
FITZGERALD GA 31750

INVOICE NO: 57621
TERMS: NET 10 DAYS

AMOUNT: GA
Rebate \$1,057.13
- 200.00
\$ 857.13

Account Number 528
Name Carolyn Hobby
Address 142 Glenview Merritt Rd

Call Date: 6/4/26 Date Requested: 6/4/26
Instructions: mount water heater
& run gas line

Telephone Office: _____ Home: _____

Appliance Check Item:	Central Heating 1	Space Heater 2	Water Heater 3	Range 4	Clothes Dryer 5	6	7
Manufacturer			Rinnai				
Model No.			V53De				
Serial No.			TE.CA-003055				
Location			Exterior				
BTU	000	000	120 000	N/A	N/A	000	000
Age			new				
Manual Shutoff (Installed/Existing)			installed				
Venting			gd				

TANK/CYLINDER Existing

SIZE	SERIAL NUMBER	MFR.	MFR. DATE	Last Test Date	Location	Tank Cond.	Paint	Pigtail	Fittings	Gauge	Relief Valve			Fittings Leak Test
											Cond.	Date	Cap	
														5min

PIPING/REGULATOR OPERATION/CONDITION

SINGLE STAGE	PIPING	REGULATOR	REGULATOR	MFR.	MODEL	REG. VENT	HOW	FLOW
	MATERIAL	DATE CODE	CONDITION			POSITION	PROTECTED	PRESSURE
	Copper	used?	used	Rego	LV404B4	Level	Done	11 IN. WC
TWO STAGE	SIZE							PSIG
1ST	1/2							
2ND								IN. WC

SYSTEM LEAK TEST

SINGLE STAGE	Start Pressure	End Pressure	Time Held	System OK
	(Inches W.C.)	(Inches W.C.)		
	11	11	5min	OK
TWO STAGE	(PSIG)	(PSIG)		
1ST				
2ND	(Inches W.C.)	(Inches W.C.)		

Comments: _____

This inspection covers (propane/LP-Gas) items and equipment visible and 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 working of sealed equipment, or structural components, and cannot be construed to cover future defects or unforeseen happenings.

Reference Invoice No. WF0563665 Date 6/4/26
(Mo, Day Yr.)

I, WAYNE Hobby
(Please Print)

I, Chris Woods
(Please Print)

- Know how to turn off gas in case of emergency.
- Have smelled propane and can detect its odor.
- Have received the Consumer Safety Information.
- Had gas system deficiencies and / or corrections, if any, clearly explained to me.
- Am satisfied with the service work performed.

Certify that I have completed the System Check as prescribed

Performed Odor Test ☒ Yes
Performed Pressure Test ☒ Yes
Left Consumer Safety Info ☒ Yes

Wayne Hobby
Customer's Signature

Chris Woods
Delivery Man / Technician Signature