



INVOICE
No. 11087



HOME OWNED & OPERATED

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

NAME	<u>Jason Lasky</u>	ACCOUNT NO.	_____
MAIL ADDRESS	<u>764 Golf Rd.</u>	DATE ORDERED	_____
CITY/STATE/ZIP	<u>Baxley GA 31513</u>	DATE PROMISED	_____
PHONE	<u>706-490-3563</u>	DATE COMPLETED	<u>1-19-26</u>
LOCATION	_____	TERMS	_____

INSTRUCTIONS install tankless water heater

QTY.	TAG NO. AND DESCRIPTION OF APPLIANCE/MATERIAL	UNIT PRICE	SALES AMOUNT
<u>1</u>	<u>Rinnai RE140e tankless water heater serial # TF.UA-080342</u>		<u>1050 00</u>

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>installed tankless water heater, ran pressure check, lit & checked out water heater</u>	TOTAL MATERIAL	
	TOTAL TIME _____ HOURS	LABOR	<u>150 00</u>

THE ODOOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME. X _____ CUSTOMER'S SIGNATURE	SERVICES PERFORMED BY <u>[Signature]</u>	SUBTOTAL	
		SALES TAX	<u>84 00</u>
		TOTAL DUE	<u>1284 00</u>

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				-GRPA rebate 200.00 AMOUNT REMOVED \$ <u>1084.00</u> RECEIVED BY _____ DATE _____ SERVICES RECEIVED BY _____
INSTALLATION OR TURN ON	REMOVAL OR TURN OFF	LEAK AND PRESSURE TEST		
		HIGH	LOW	
SIZE:	SIZE:	START LOCK UP:	START LOCK UP:	
S/N:	S/N:	TANK OFF PRESSURE:	TANK OFF PRESSURE:	
GALLONS OR READING:	GALLONS OR READING:	AFTER 10 MINUTES PRESSURE AS LEFT:	AFTER 10 MINUTES PRESSURE AS LEFT:	

GASCheck - Gas Appliance System Check

Account Name _____ Invoice Number _____ Date 1/19/26
 Name Jason Lasky Company Sikes Propane, Inc.
 Address 764 Golf Rd. Call Taken By _____
 City Baxley State GA Zip 31513 Telephone (Cell) 706-490-3563 (Home) _____

Appliance Check

Appliance	<u>water heater</u>	<u>Gas Logs</u>			
Manufacturer	<u>Rinnai</u>	<u>FMI</u>			
Model #	<u>RE140e</u>	<u>V5GF33PR</u>			
Serial #	<u>TF.UA-08 0342</u>	<u>SP10023D2</u>			
BTU's	<u>140,000</u>	<u>33,000</u>			
Burner / Com. 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>15yrs.</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>25A019242</u>	<u>American W.</u>	<u>1995</u>	<u>ok</u>	<u>ok</u>	<u>12-94</u>	<u>ok</u>

Pressure Test (If Applicable)

Start Pressure	End Pressure	Time Held	Pressure Held
<u>90psi.</u>	<u>90psi.</u>	<u>10min.</u>	<input checked="" type="checkbox"/>
			Work Order <input type="checkbox"/>

Piping Check

Materials	Size	Cover / Protection
<u>copper</u>	<u>1/2"</u>	<u>ok</u>

System Leak Check

Start Pressure	End Pressure	Time Held	Pressure Held
<u>9in. wc.</u>	<u>9in. wc.</u>	<u>10min.</u>	<input checked="" type="checkbox"/>
			Work Order <input type="checkbox"/>

Regulator Check

Type	Manufacturer	Date / Model	Vent Position/ Protection
<u>First</u>	<u>Rego</u>	<u>01E02 / LV4403TR9</u>	<u>u-c</u>
<u>Second</u>	<u>Rego</u>	<u>04D10 / LV3403B4</u>	<u>down</u>

Safety Information Supplied: _____

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