

SALES  
SERVICE  
INSTALLATION



Ty / Ryan

1335 US Hwy 82 W, Leesburg, GA 31763 (229) 435-6116 FAX (229) 435-6119

Order Number <b>891522</b>	Date Written 1/04/26	Taken By <b>MEH</b>	Schedule Date 1/12/26	Date Completed 1-12-26
Branch - Customer No. 1-13341	Home 229 376-2624	Work	Time Started 10:00	Time Completed 11:45
Name DOUBLEGATE HOMES #11	Address LOT 121 THE GROVES 1/2026	Cell	LAST HERE LOT 108 THE GROVES 208 THISTLEDOWN 6/2024	
City ALBANY, GA	State 31708	Zip		
Service Address 524 CHRUCHVIEW DR 1/LEESBURG, GA	31763-1106			

Work to be performed: DELIVER AND INSTALL RINNAI RE180iP AND VENT WITH 184118 ROOF DISCHARGE TERMINAL, 189951 FLASHING AND OTHER VENTING. TAKE CAMCO DRAIN PAN CALLED IN BY BOB 869-6137 CELL	Work completed <i>Delivered and installed</i>
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Qty:	Materials	Price	Amount	Qty:	Materials	Price	Amount
1	W-R 11470	39.00	39.00	1	W-R RE180IP	876.00	876.00
1	CAMCO Drain Pan			1	Rinnai Terminal		
1	10" #224051	39.-	39.-	1	W-R RTRF	98.00	98.00
1	1 1/2" #224052	55.-	55.-	1	Install fit		
1	3/4" #224053	59.-	59.-	1	W-R 184118	87.00	87.00
2	90° elbow #224063	48.-	96.-	1	Roof Discharge		
				1	W-R 189958	72.00	72.00
					Flashing		

DR. RT.	Rt. Seq.	Rate	Deposit	SHOP OR TRUCK SUPPLIES	16.50
Tank Make	Size	Serial No.	Tank Percent	MATERIAL TOTAL	1437.50
Single Stage	Regular Date	Reg. Condition	Mfr. Model Vent Pos. Protected?	TRIP CHARGE	
TWO 1st				LABOR Rebate	<200.00>
STAGE 2nd				SUB-LABOR	
Manometer Reading at Start	Manometer Reading After 10 minutes	Flow Check Manometer Reading Under Load	Lock-up Check Manometer Reading	PERMIT	
10	10			SHIPPING/FREIGHT	
Central Heating	Water Heater	Range	Clothes Dryer	Thank You	SALES TAX 115.00
Manufacturer	Rinnai			TOTAL	1352.50
Model No.	RE180iP			ANY UNUSED GAS PIPING OUTLETS INDOORS?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Serial No.	TK. UA157420			IF YES, IS EACH UNUSED GAS PIPING OUTLET FITTED WITH A GAS TIGHT THREADED PLUG OR CAP?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Fuel/BTU	180	N/A	N/A	CUSTOMER AVAILABLE	<input type="checkbox"/> YES <input type="checkbox"/> NO
AGE	New			CUSTOMER SMELLED ODORIZED PROPANE AND SHOWN THE SHUTDOWN PROCEDURE	<input type="checkbox"/> YES <input type="checkbox"/> NO

<input type="checkbox"/> CASH	RECEIVED BY	Work Completed by: Ty & Ryan	Date: 1-12-26
<input type="checkbox"/> CHECK		Customer Signature:	Date: 1/12/26
I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE IMPORTANT SAFETY INSTALLATION INFORMATION PRINTED ON BACK OF THE CUSTOMER COPY			