

6/16/2026 12:05:50 PM

WORK ORDER

Darren Impemba

1617 Mountain Creek Hollow Road
Talking Rock, GA 30175
(754) 224-7930

Customer #: 206114
Order #: 515420
Location #: 282302
Zone: B-031-MON-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 06/18/26 - FINAL HOOK - YD LINE IS THERE. ANODE TEST -
CALL 754-224-7930 - CCOF - CT

T/I Monitor

Date Ordered: 6/16/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name:

Contract:

Manufact:

Notes:

Instructions:

Last Service: 6/12/2026

SC Renewal:

Model:

Last Tune Up:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
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PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 206114

Date: 6/18/26

Name: DARREN IMPEMBA

Instructions: FINAL HOOK, YD LINE THERE. ANODE TEST

Address: 1617 MOUNTAIN CREEK HOLLOW ROAD

CALL 754-224-7930 CCOF

TALKING ROCK, GA 30175

Order #: 515420

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	Furnace	Water Heater				
Manufacturer	Trane	Navien				
Model #	EL297uHo7oxv	NPE-24052				
Serial #	5925H20467	2049E25H69F27				
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
320	M2542409	Good	Trane	2025	W9	Good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	MEC	1122 H	☒ Correct ☐ Incorrect		
2nd	Rego	LV4403B46	☒ Correct ☐ Incorrect	11.2	13.1

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
140 PSI	140 PSI	10 Mins	☒ Yes				☐ Yes
WC	WC	Mins	☐ No	PSI	PSI	Mins	☐ No

Comments:

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)	Alex Cash	Service Technician (Signature)	[Signature]	Date
Customer (Print)	CH #1	Customer (Signature)	[Signature]	Date



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RINNAI WORK ORDER

Customer Acct #: 206114
Name DARREN IMPEMBA
Address 1617 MOUNTAIN CREEK HOLLOW ROAD
TALKING ROCK, GA 30175

Date: 6/12/26
Instructions: T/I 325UG W/50G@2.499G HOLE WILL BE
DUG. COVER UP. RUN YD LINE @25FT. CALL
754-624-7930 CCOF
Order #: 514064

DESCRIPTION OF WORK

COMMENTS:

SERVICED BY:

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
				100.00/hr	
				100.00/hr	

FOR OFFICE USE ONLY

Performed leak check _____ Yes _____ No
Gas check attached _____ Yes _____ No
Leak check _____ Initial _____

Start Pressure _____ End Pressure _____ Time Held _____ System OK _____

% in Tank

AMOUNT REC'D

\$

☐ CASH ☐ CHECK # _____

☐ CREDIT CARD

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.

CUSTOMER SIGNATURE

Retail Price

Contract Price

_____ Rinnai \$	\$
Standard Vent Kit \$	\$
Standard Install \$	\$
Total \$	\$

Tank Set

New Cust Special

L P Gas /Gal	2.999	L P Gas /Gal	2.499
Gallons	50	Gallons	50
FRCC	\$9.79	FRCC	\$9.79
Fuel Total	149.95	Fuel Total	124.95
Tank Lease/YR	129.00	1st yr Lease	FREE

9.79

124.95

FREE

Total Materials	
Sub-Total	
Sales Tax	
Tank Set Fee \$250	Tank Set Fee 20.00
Safety Inspection \$129.95	\$29.95
Total Labor	
Total charges	
Prepay Bal On Account	

Safe Appliance Savings 627.42

Safe Appliance Rebate 600.00

TOTAL BALANCE DUE