

Confirmed ✓

6/22/2026 12:16:52 PM

[Signature]

WORK ORDER

Jeremy Collinsworth DBA Kingsworth Construction

305 Harmony Gates Drive
Commerce, GA 30530
(678) 373-2608

Customer #: 206091
Order #: 516283
Location #: 282269
Zone: J-004-TUE-
Terms: Net 30

Tech: _____

Map Code: _____
Service Code: Propane Service
Description: 6-24-26 Final H/U CHG *Charge for 50ft of 5/8 copper*

Date Ordered: 6/22/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name: _____ Last Service: 5/19/2026 Last Tune Up: _____
Contract: _____ SC Renewal: _____
Manufact: _____ Model: _____
Notes: _____
Instructions: _____

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
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RINNAI WORK ORDER

Customer Acct #: 206091
Name JEREMY COLLINSWORTH
Address 305 HARMONY GATES DRIVE
COMMERCE, GA 30530

Date: 05/19/26
Instructions: SET LEASE 325UG W/260 GALS
Order #:

DESCRIPTION OF WORK
COMMENTS: Set leased 325 u/g w/260 gals. Connected anode and locked out tank. Left 50 ft. 5/8 copper, charge for copper on final H/U.
SERVICED BY: <i>KP</i>

DATE	START TIME	FINISH TIME	TOTAL TIME	LABOR RATE	AMOUNT
5-19-26	9:00	9:15	.25	100.00/hr	<i>0</i>
				100.00/hr	

FOR OFFICE USE ONLY	
Performed leak check	Yes ☒ No ☒
Gas check attached	Yes ☒ No ☒
Leak check	Initial <i>KP</i>
Start Pressure	End Pressure Time Held System OK

% in Tank	<i>80%</i>
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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. <i>Cust. Not here</i> 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 260	Gallons 260	
FRCC \$9.79	FRCC \$9.79	
Fuel Total 789.53	Fuel Total 659.53	659.53
Tank Lease/YR 129.00	1st yr Lease FREE	-
Total Materials		349.25
Sub-Total		1009.48
Sales Tax		80.76
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		589.00
Safe Appliance Rebate		50.00
TOTAL BALANCE DUE		1090.24



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: **206091**Date: **6/24/26**Name: **JEREMY COLLINSWORTH DBA KINGSWORTH CON**Instructions: **FINAL H/U**Address: **305 HARMONY GATES DRIVE****COMMERCE, GA 30530**

Order #:

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	coolbox	lighter	lighter			
Manufacturer	Kitchenaid	N/A	N/A			
Model #	KFP094BSS00	N/A	N/A			
Serial #	DES105678	N/A	N/A			
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
325	172518430	Good	TRI	2025	U/LN	Good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	mcc	1122	09 Dec 24	☒ Correct ☐ Incorrect	
2nd	mcc	1222	16 Feb 23	☒ Correct ☐ Incorrect	11" 12"

Piping System Leak Test:**Pressure Test:**

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
150 PSI	150 PSI	10 Mins	☒ Yes				☐ Yes
			☐ No				☐ No

Comments:

80% in town / All appliances in working condition

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)	Owen D. M. S.	Service Technician (Signature)	Owen D. M. S.	Date	6/24/26
Customer (Print)		Customer (Signature)		Date	