

WORK ORDER

Grant Fitts

Aubery Ln Lot #2
Morganton, GA 30560
(706) 851-4541

Customer #: 205275
Order #: 523149
Location #: 281243
Zone: B-009-WED-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 7/9/26 **GO FIRST!** T/I 500UG w/50 @ 2.499 run yard line C/C
range final hook on all appliances Johnny to bury Call
706-851-4541 CCOF-CLT

Date Ordered:	Scheduled Date:	Est. Completion:	Start:	Stop:
---------------	-----------------	------------------	--------	-------

Name:

Last Service: 1/6/2026

Last Tune Up:

Contract:

SC Renewal:

Manufact:

Model:

Notes:

Instructions:

Service History:

Date	Invoice #	Tech	Problem Reported	Service Notes
------	-----------	------	------------------	---------------



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 205275

Name: GRANT FITTS

Address: AUBERY LN LOT#2

MORGANTON GA 30560

Date: 7/9/10

Instructions: T/I 500UG W/50G @2.499 RUN YD LINE

C/C STOVE FINAL HOOK ON ALL APPLIANCES JOHNNY

Order #: 523149

TO BURY CCOF-CLT

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	W. Heater	~~Furnace~~	Stove	Furnace		
Manufacturer	Navien		Thor	Rheem		
Model #	NPE210A2-NG		N.V	R92MSND601714A1		
Serial #	282R2552009522		1GR300ULPTHV	A254959974		
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
500	MJ600948	Good	Triarc	2026	U.G.	Good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	Rego	3403TR9 01-2024	☒ Correct ☐ Incorrect		
2nd	Rego	4403Y4 9-2024	☒ Correct ☐ Incorrect	11.4	13.3

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
125 PSI	125 PSI	10 Mins	☒ Yes	15 PSI	15 PSI	10 Mins	☒ Yes
WC	WC	Mins	☐ No				☐ 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) Brandon Payne	Service Technician (Signature) Brandon Payne	Date 7-9-26
Customer (Print)	Customer (Signature)	Date



www.folgergas.com

RINNAI WORK ORDER

Customer Acct #: 205275

Name **GRANT FITTS**

Address **AUBREY LN LOT #2**

MORGANTON GA 30560

Date: 7/9/26

Instructions: T/I 500UG W/50G @ 2.499 RUN YARD LIN

C/C STOVE FINAL HOOK ON ALL APPLIANCES JOHNNY TO

Order #: 523149

BURY CCOF-CLT

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 9.79
Fuel Total	149.95	Fuel Total 124.95 124.95
Tank Lease/YR	129.00	1st yr Lease FREE FREE
Total Materials		
Sub-Total		
Sales Tax		
Tank Set Fee \$250	Tank Set Fee 20.00	20.00
Safety Inspection \$129.95	\$29.95	29.95
Total Labor		
Total charges		
Prepay Bal On Account		
Safe Appliance Savings		494.78
Safe Appliance Rebate		450.00
TOTAL BALANCE DUE		