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7/8/2026 3:09:54 PM

WORK ORDER

Jonathan Demartino

469 Mull Drive
Mineral Bluff, GA 30559
(203) 243-4118

Customer #: 206359
Order #: 523599
Location #: 282603
Zone: B-014-WED-
Terms: Net 30

Tech: _____

Map Code:

Service Code: Propane Service

Description: 7/13/26 T/I 120ag w/100g @3.599 C/C stove kit on site look at
f/p and get log size for future log set Call 203-243-4118 ccof-clt

Date Ordered: 7/8/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name:

Contract:

Manufact:

Notes:

Instructions:

Last Service:

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 #: 206359

Name: JONATHAN DEMARTINO

Address: 469 MULL DRIVE

MINERAL BLUFF

Date: 7/13/26

Instructions: T/I 120 W/100G @ 3,599 C/C STOVE

LOOK AT F/P CCOF-CLT

Order #: 523599

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	Stove					
Manufacturer	Samsung					
Model #	NSG6DG8510SRAA					
Serial #	CLNO7DAYC00698M					
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
120	M2518278	Good	Trane	2025	AG.	Good

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	Rego	3403TR908-2025	☒ Correct ☐ Incorrect		
2nd	Rego	3403B404-2025	☒ Correct ☐ Incorrect	11.3	13.3

Piping System Leak Test:

Pressure Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
120 PSI	120 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)		Date	7.13.26
Customer (Print)		Customer (Signature)		Date	



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RINNAI WORK ORDER

Customer Acct #: 206359
Name JONATHAN DEMARTINO
Address 469 MULL DRIVE
MINERAL BLUFF GA 30559

Date: 7/13/26
Instructions: T/I 120AG W/100G @ 3.599
C/C STOVE KIT ON SITE LOOK AT F/P CCOF-CLT
Order # 523599

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	3.599	L.P. Gas /Gal 3.599
Gallons	100	Gallons 100
FRCC	\$9.79	FRCC \$9.79 9.79
Fuel Total	359.90	Fuel Total 359.90 359.90
Tank Lease/YR	99.00	1st yr Lease 99.00 99.00
Total Materials		
Sub-Total		
Sales Tax		
Tank Set Fee	\$250	Tank Set Fee FREE FREE
Safety Inspection	\$129.95	\$29.95 29.95
Total Labor		
Total charges		
Prepay Bal On Account		
Safe Appliance Savings		350.00
Safe Appliance Rebate		50.00
TOTAL BALANCE DUE		