

WORK ORDER

Royce Cash (House)

5846 Hwy 82 Spur
Commerce, GA 30529
(706) 983-0566

Customer #: 5558
Order #: 534772
Location #: 269518
Zone: J-001-MON-
Terms: Net 30

Map Code:

Service Code: Propane Service

Description: 8-11-26, chg, S/O rinnai for RXP 199 full gas check, call Royce
on the way (706) 983-0566

Tech:

Date Ordered: 8/10/2026	Scheduled Date:	Est. Completion:	Start:	Stop:
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Name: Heating System	Last Service: 7/9/2026	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 #: 5558
Name: Royce Cash
Address: 5846 Hwy 82 Spur
Commerce, GA 30529

Date: 8-11-26
Instructions: T/I Rinnai RXP199
Lease 500 AG w/ 400 gals
Order #: _____

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

_____ Rinnai \$ _____

Standard Vent Kit \$ _____

Standard Install \$ _____

Total \$ _____

Contract Price

\$ _____

\$ _____

\$ _____

\$ _____

Tank Set

L.P. Gas /Gal 2999

Gallons 400

FRCC \$9.79

Fuel Total 1209.39

Tank Lease/YR 99.00

Total Materials

Sub-Total

Sales Tax

Tank Set Fee \$250

Safety Inspection \$129.95

Total Labor

Total charges

Prepay Bal On Account

New Cust Special

L.P. Gas /Gal 2499

Gallons 400

FRCC \$9.79

Fuel Total 1009.39

1st yr Lease Free

Safe Appliance Savings

Safe Appliance Rebate

629
400.00

TOTAL BALANCE DUE



PROPANE GAS PIPING SYSTEM CHECK

Customer Account #: 5558
Name: Royce Cash (house)
Address: 5846 Hwy 82 Spur
Commerce GA 30529

Date: 8/11/26
Instructions: _____
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	<u>Waterheater</u>	<u>Waterheater</u>				
Manufacturer	<u>Rinnai</u>	<u>Rinnai</u>				
Model #	<u>RUR199iP</u>	<u>RXP199iN</u>				
Serial #	<u>REU-NP930FF-WP</u>	<u>REU-NBP3237FF-US-K</u>				
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
<u>500</u>	<u>2SE044519</u>	<u>Good</u>	<u>American</u>	<u>1998</u>	<u>A/G</u>	<u>Good</u>

Regulator(s):

Manufacturer	Model	Regulator Date	Regulator Venting	Flow/Delivery Pressure	Lock-Up Pressure
Twin			☐ Correct ☐ Incorrect		
1st	<u>Rego</u>	<u>LV3403TR9 02-2020</u>	☒ Correct ☐ Incorrect		
2nd	<u>Rego</u>	<u>LV3403 B4 03-2019</u>	☒ Correct ☐ Incorrect	<u>11.5</u>	<u>12.5"</u>

Piping System Leak Test:

Start Pressure	End Pressure	Time Held	Pass	Start Pressure	End Pressure	Time Held	Pass
<u>140</u> PSI	<u>140</u> PSI	<u>10</u> Mins	☒ Yes	_____ PSI	_____ PSI	_____ Mins	☐ Yes
_____ WC	_____ WC	_____ Mins	☐ No				☐ No

Pressure Test:

Comments:

80% in tank / 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) <u>Owen Dm</u>	Service Technician (Signature) <u>Owen Dm</u>	Date <u>8/11/26</u>
Customer (Print) _____	Customer (Signature) <u>Royce Cash</u>	Date <u>8-11-26</u>