

# Safety Check



Date: 03-05-2025 Work Order #: 31009573  
Acct #: 5543462 Branch: BOONE  
Name: Richard Mccullough  
Address: 2596 MOUNTAIN DALE RD  
City: VILAS State: NC Zip Code: 28692  
Phone #: (919) 971-0048 Alt Phone #: \_\_\_\_\_

Services Performed: Walk-through Visual Inspection, Leak Check, Safety Check on a Existing Installation

## Appliances

Appliance: Water Heater	Type: Gas	Manufacturer: Rinnai
Age: New	Input BTU: 199,999	Appliance Converted: LP
Control Safety System: OK	Combustion Chamber: OK	Combustion Air: OK
Venting System: OK	Red Tagged: No	

Appliance: Range/Cooktop	Type: None	Manufacturer:
Age:	Input BTU:	Appliance Converted:
Control Safety System:	Combustion Chamber:	Combustion Air:
Venting System:	Red Tagged:	

Appliance: Dryer	Type: None	Manufacturer:
Age:	Input BTU:	Appliance Converted:
Control Safety System:	Combustion Chamber:	Combustion Air:
Venting System:	Red Tagged:	

Appliance: Gas Logs	Type: None	Manufacturer:
Age:	Input BTU:	Appliance Converted:
Control Safety System:	Combustion Chamber:	Combustion Air:
Venting System:	Red Tagged:	

## Container(s)

Type: Tank	Desc: COT 120AG DOT CYL	Owned By: Company
Size: No Item Number	Serial #: V542600	Mfg.: Manchester
Condition: OK	Relief Value Cap: OK	Fitting Leak Test: OK

Regulator Operations

1st Stage	Manu.: Kosan	Model: 988lp
Flow Pressure: 7	Lock-up Pressure: 8	
2 PSI	Manu.: NA	Model:
Flow Pressure:	Lock-up Pressure:	
2nd/Final Stage	Manu.: Fisher	Model: R552-dff
Flow Pressure: 12	Lock-up Pressure: 13.5	

System Leak Check

Start Pressure: 60 w.c	End Pressure: 60 w.c	Time Head: 3 MINUTES
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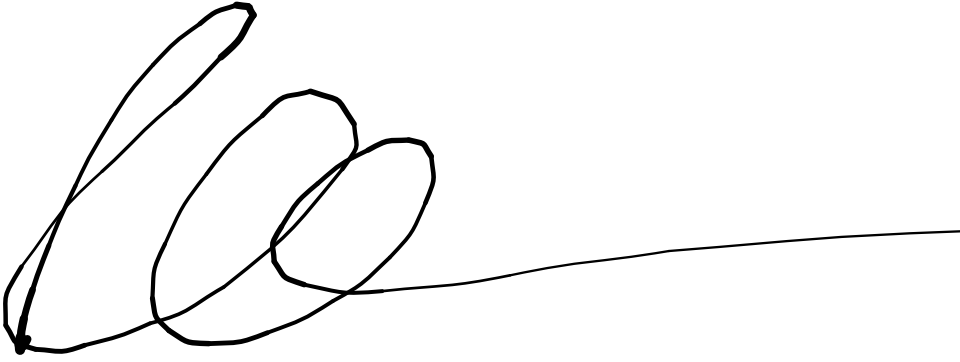
CO READINGS 0 ppm (Based on the U.S. Consumer Product Safety commission, readings should be below 30ppm.)

DISCLAMIER: This Safety Check/Leak Check covers Propane/Natural gas items and equipment visible and accessible to the service representative and represents the conditions existing on this date. It does not cover latent or manufacturing defects, the internal working of equipment, structural components, or high temperature plastic vent (HTPV), and cannot be construed to cover future or unforeseen deficiencies.

I, Richard Mccullough

Know how to turn off gas in case of emergency,  
Have smelled propane/natural gas and can detect its odor,  
Have received the consumer safety information,  
I am satisfied with the service work performed.

Customer Signature



Comments:

Safety Check

Fuel Type: Propane

Work Order #: 31009573

New appliance: Water Heatetr

Add to existing safety check on file

Service Technician: TOM PRESSLEY

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