

Safety Check



Date: 07-25-2025 Work Order #: 32293971
Acct #: 5530375 Branch: STATESVILLE
Name: Bill Thomas
Address: 107 LEESBURG LN.
City: TROUTMAN State: NC Zip Code: 28166
Phone #: (804) 307-0837 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: 199,000	Appliance Converted: LP
Control Safety System: OK	Combustion Chamber: OK	Combustion Air: OK
Venting System: OK	Red Tagged: No	

Appliance: Range/Cooktop	Type: Gas	Manufacturer: GE
Age: 2	Input BTU: 54,000	Appliance Converted: LP
Control Safety System: OK	Combustion Chamber: OK	Combustion Air: OK
Venting System: OK	Red Tagged: No	

Appliance: Dryer	Type: Electric	Manufacturer: Electrolux
Age: 2	Input BTU:	Appliance Converted:
Control Safety System:	Combustion Chamber:	Combustion Air:
Venting System:	Red Tagged:	

Appliance: Gas Logs	Type: Gas	Manufacturer: Empire
Age: 10Plus	Input BTU: 42,000	Appliance Converted: LP
Control Safety System: OK	Combustion Chamber: OK	Combustion Air: OK
Venting System: OK	Red Tagged: No	

Container(s)

Type: Tank	Desc: 250 ug	Owned By: Company
Size: 250 ug	Serial #: N / A	Mfg.: American Welding & Tank
Condition: OK	Relief Value Cap: OK	Fitting Leak Test: OK

Regulator Operations

1st Stage	Manu.: MEC	Model: 1622
Flow Pressure: 10	Lock-up Pressure: 11	

2 PSI	Manu.: NA	Model:
Flow Pressure:	Lock-up Pressure:	

2nd/Final Stage	Manu.: Rego	Model: 4403lv
Flow Pressure: 10	Lock-up Pressure: 11	

System Leak Check

Start Pressure: 9 w.c	End Pressure: 9 w.c	Time Head: 3 MINUTES
-----------------------	---------------------	----------------------

Piping Pressure Test

Start Pressure: 30 psi	End Pressure: 30 psi	Time Head: 15 MINUTES
------------------------	----------------------	-----------------------

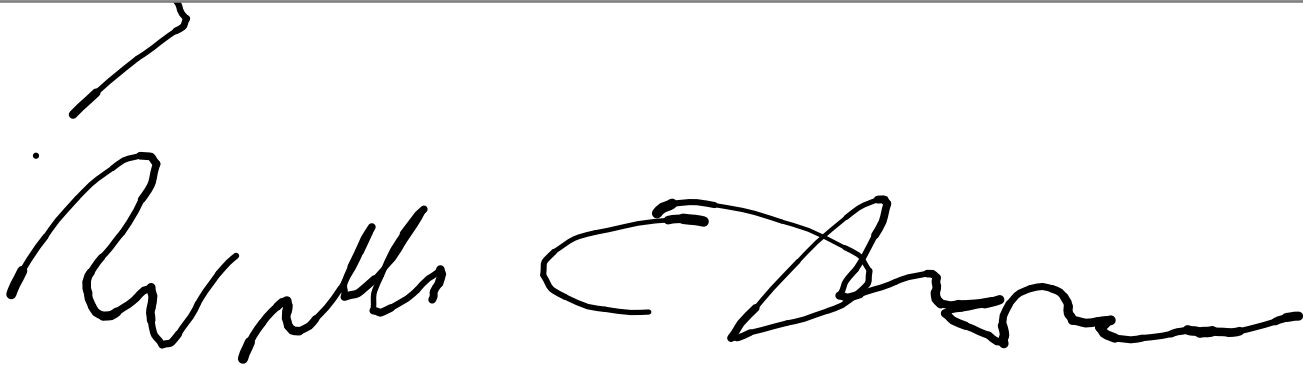
CO READINGS 0 ppm (Based on the U.S. Consumer Product Safety commission, readings should be below 30ppm.)

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, Bill Thomas

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 #: 32293971

Customer information has changed.

New appliance: Water Heater

Service Technician: LOYD MARLOWE
