

Safety Check



Date: 06-04-2025 Work Order #: 31903091
Acct #: 5620211 Branch: BOONE
Name: Richard Shade
Address: 423 SILVERLEAF ROAD
City: ZIONVILLE State: NC Zip Code: 28698
Phone #: (405) 476-7859 Alt Phone #: _____

Services Performed: Walk-through Visual Inspection, Leak Check, Safety Check on a New Install

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: 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: 120AG -S # WO2597309	Owned By: Company
Size: LP120AG	Serial #: WO2597309	Mfg.: Worthington Cylinders
Condition: OK	Relief Value Cap: OK	Fitting Leak Test: OK

Regulator Operations

1st Stage	Manu.: Kosan	Model: 984HP-05
Flow Pressure: 9	Lock-up Pressure: 10	

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

2nd/Final Stage	Manu.: Kosan	Model: 988LP-03
Flow Pressure: 11	Lock-up Pressure: 12	

System Leak Check

Start Pressure: 70 psi	End Pressure: 70 psi	Time Head: 3 MINUTES
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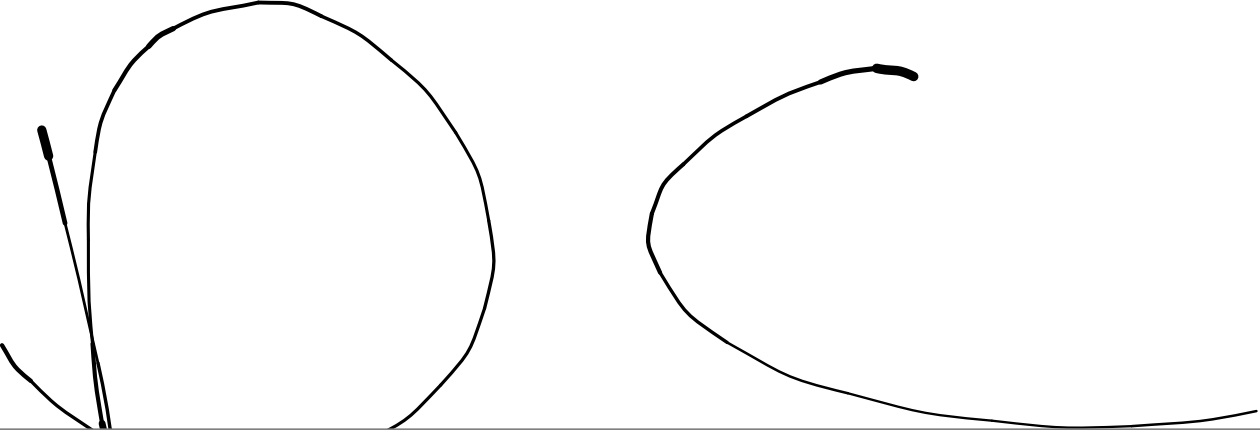
CO READINGS 0 ppm (Based on the U.S. Consumer Product Safety commission, readings should be below 30ppm.)

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 Shade

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 #: 31903091

New appliance: Water Heater

Service Technician: PATRICK SMITH
