

# PROPANE SAFETY INSPECTION

Account # 97825804 Name Kenneth Arnold Address [459826] 400 Rendezvous Ln [LP] City Fleetwood

State NC Zip 28626 Phone (910) 431-7078 Date of Inspection 05/04/2026 Branch/Location Work Order #

| Equipment Type                        | Water Heater    | Furnace         |  |  |
|---------------------------------------|-----------------|-----------------|--|--|
| Manufacturer                          | Navien          | Trane           |  |  |
| Year Manufactured                     |                 |                 |  |  |
| Model #                               | Npe-240s2       | S9x1b060u4psbba |  |  |
| Serial #                              | 2089z2550719068 | 26105jl23g      |  |  |
| Fuel                                  | Propane         | Propane         |  |  |
| BTUs (Maximum Input)                  | 200,000         | 60,000          |  |  |
| Manual Shutoff Valve                  | OK              | OK              |  |  |
| Sediment Trap                         | OK              | OK              |  |  |
| Burner(s) Condition                   | OK              | OK              |  |  |
| Combustion Chamber Condition          | OK              | OK              |  |  |
| Control/Pilot Safety System           | OK              | OK              |  |  |
| Venting System                        | OK              | OK              |  |  |
| Combustion Air                        | OK              | OK              |  |  |
| Taken Out of Svc or Operation (Tag #) | No              | No              |  |  |

| CONTAINER CHECK | Serial # | Cust. Own | Container Type |            | Size   | Tank % | Manufacturer     | Mfr. Date | DOT              |      | Container |      |       | Relief Valve |      | Fittings Leak Test |     |
|-----------------|----------|-----------|----------------|------------|--------|--------|------------------|-----------|------------------|------|-----------|------|-------|--------------|------|--------------------|-----|
|                 |          |           | ASME/ DOT      | AG/UG/AGUG |        |        |                  |           | Last Requal Date | Type | Found.    | Loc. | Cond. | Cond.        | Date |                    | Cap |
|                 | 1561617  |           | ASME           | AG         | 600 wg |        | American Welding | 2025      | N/A              |      | OK        | OK   | OK    | OK           | NV   | OK                 | OK  |

| PIPING |  | Material | Size | Protection | REGULATOR(S) |  | Mfr. | Model # | Date Code | Cond. | Vent Position | Protection |
|--------|--|----------|------|------------|--------------|--|------|---------|-----------|-------|---------------|------------|
|        |  |          |      |            |              |  |      |         |           |       |               |            |

**CSST TRACKING** (IF APPLICABLE) Bonded  Yes  No  Unknown Jurisdictional Acct.  Y  N  Unknown Gas Lines Capped  Y  N/A Heat Pump  Y  N

| System Type | System Leak Check  |   |            |          | Pressure Test  |              |            |          | System Operation Tests   |  |  |  |
|-------------|--|---|------------|----------|----------------|--------------|------------|----------|--|--|--|--|
|             | Initial/Start Pressure   | End Pressure  | Start Time | End Time | Start Pressure | End Pressure | Start Time | End Time | Flow Pressure Test   | Lock-Up Pressure Test  |  |  |
| 1st Stage   | 11 / 5<br><input type="checkbox"/> WC<br><input checked="" type="checkbox"/> PSI | 5<br><input type="checkbox"/> WC<br><input checked="" type="checkbox"/> PSI | 2:00       | 2:10     | PSI            | PSI          |            |          |  |  |  |  |
| 3rd Stage   | <input type="checkbox"/> WC<br><input type="checkbox"/> PSI                      | <input type="checkbox"/> WC<br><input type="checkbox"/> PSI                 |            |          | PSI            | PSI          |            |          | 11<br><input checked="" type="checkbox"/> WC<br><input type="checkbox"/> PSI | 13.1<br><input checked="" type="checkbox"/> WC<br><input type="checkbox"/> PSI |  |  |

Performed Sniff Test  Y  N Comments

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.

I,  Property Owner  Tenant  Authorized Representative, **acknowledge** that the individual performing the propane safety review informed me of the procedure and the outcome of the review; what was covered by the review and what was not covered; what repairs and/or alterations, if any, were made to the gas system or appliances; and options available for making recommended changes to my gas system. **I further acknowledge** that:

- I have informed the individual performing the propane safety review of all gas-burning appliances and gas lines on my property.
- 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 off at the tank.
- I have smelled the propane gas and can detect its odor.
- I have been told that the odorant giving propane its distinctive smell can fade or diminish in intensity.

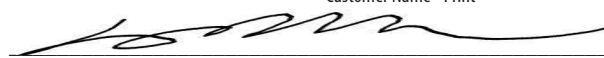
In addition, I have been told that certain physical limitations or conditions might prevent me from smelling a gas leak.

- I have received customer safety information and been told to read it and share it with all family members.
- I am satisfied with the service work performed.
- I have been advised to install one or more gas and carbon monoxide detectors listed by Underwriters Laboratories (UL) as an additional measure of safety.

**I have been provided the following additional safety materials:**

- Propane Safety Booklet (PRC-005606 or PRC-101063)
- Important Propane Safety Information Brochure (PRC-003121 or PRC-101062)
- Carbon Monoxide Brochure (PRC-000075)

Dillon Houck  
Service Technician Name - Print  
  
Service Technician Signature Date 05/04/2026

Kenneth Arnold  
Customer Name - Print  
  
Customer Signature Date 05/04/2026