

PROPANE SAFETY INSPECTION

Account # 97825955 Name Mona Heafner Address [460233] 4549 Millersville Rd City Taylorsville

State NC Zip 28681 Phone (828) 217-5982 Date of Inspection 05/11/2026 Branch/Location Work Order #

Equipment Type	Water Heater	Room/Space Heater			
Manufacturer	Rinnai	Monessen Hearth Systems			
Year Manufactured					
Model #	RL94I	Sundance LP			
Serial #	NE. CA-061231	HF1810221			
Fuel	Propane	Propane			
BTUs (Maximum Input)	199,000	28,000			
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	
	V668143		DOT	AG	420 lb		Manchester	4/2002	5/2026	5	OK	OK	OK	OK	NV	OK	OK

PIPING	Material		Size	Protection	REGULATOR(S)	Mfr.		Model #	Date Code	Cond.	Vent Position	Protection
	Integral	CT (Copper Tubing)	1/2	OK		2nd Stg	REGO	Lv4403B46R	2025	OK	OK	OK

CSST TRACKING (IF APPLICABLE)	Bonded	☐ Yes ☐ No ☐ Unknown	Jurisdictional Acct.	☐ Y ☒ N ☐ Unknown	Gas Lines Capped	☐ Y ☒ N/A	Heat Pump	☐ Y ☒ N
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System Type	System Leak Check ☒ Entire System				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		
2nd Stage	12 / 9	☒ WC ☐ PSI	9	☒ WC ☐ PSI	12:50	12:55			11	☒ WC ☐ PSI	12	☒ WC ☐ PSI
		☐ WC ☐ PSI		☐ WC ☐ PSI						☐ WC ☐ PSI		☐ WC ☐ PSI
		☐ WC ☐ PSI		☐ WC ☐ PSI						☐ WC ☐ PSI		☐ WC ☐ PSI
		☐ WC ☐ PSI		☐ WC ☐ PSI						☐ WC ☐ PSI		☐ WC ☐ PSI

Performed Sniff Test	☒ Y ☐ N	Comments	
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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)

Auston Coffey

Service Technician Name - Print



Service Technician Signature

05/11/2026

Date

Mona Heafner

Customer Name - Print



Customer Signature

05/11/2026

Date