Tank Set- 120 + Install EX38 with thermostat

Tue Aug 18 2026, 8:00am - 1:30pm

Calendar

Service-Snickers

Who

Shawn Cordwell (Acct#2817)

Where

532 County Route 37, Massena

Description

$2,844 for Ex38 Installed (Tax included in calculation)

315 250 3021

will have to install EX38 and run approx 10 feet of gas line and install thermostat unit

Confirmed 8/17

site sheet in email from steve

PICK EX38 UP IN MALONE AFTER SAFETY MEETING UNDER CORDWELL

Created Aug 3, 2026, 1:51pm by Travis, last updated Aug 17, 2026, 3:04pm by Travis

* wants Auto

PROPANE SAFETY INSPECTION

PROPANE SAFETY

Account # 2817 Name Shawn Cordwell Address [513220] 532 COUNTY ROUTE 37 City MASSENA

State NY Zip 13662 Phone (315) 250-3021 Date of Inspection 08/18/2026 Branch/Location Work Order #

Equipment Type	Room/Space Heater				
Manufacturer	Rinnai				
Year Manufactured	NV				
Model #	Ex38dtp				
Serial #	Wclb005008				
Fuel	Propane				
BTUs (Maximum Input)	36,500				
Manual Shutoff Valve	OK				
Sediment Trap	OK				
Burner(s) Condition	OK				
Combustion Chamber Condition	OK				
Control/Pilot Safety System	OK				
Venting System	OK				
Combustion Air	OK				
Taken Out of Svc or Operation (Tag #)	No				

CONTAINER CHECK

Serial #	Cust. Own	Container Type ASME/ DOT	Container Type AG/UG/AGUG	Size	Tank %	Manufacturer	Mfr. Date	DOT Last Requal Date	DOT Type	Container Found.	Container Loc.	Container Cond.	Relief Valve Cond.	Relief Valve Date	Relief Valve Cap	Fittings Leak Test
2723920	N	ASME	AG	120 wg	18	Worthington	2025	N/A		OK	OK	OK	OK	2025	OK	OK

PIPING

	Material	Size	Protection
Integral	CSST (Corrugated	1/2	OK

REGULATOR(S)

	Mfr.	Model #	Date Code	Cond.	Vent Position	Protection
Integral	REGO	Lv404b34	0925	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

System Type	System Leak Check Initial/Start Pressure		End Pressure		Start Time	End Time	Pressure Test Start Pressure	End Pressure	Start Time	End Time	System Operation Tests Flow Pressure Test	Lock-Up Pressure Test
Integral	10 / 5	☐ WC ■ PSI	5	☐ WC ■ PSI	1:30	1:35	PSI	PSI			11 ■ WC ☐ PSI	12 ■ WC ☐ PSI
	/	☐ WC ☐ PSI		☐ WC ☐ PSI			PSI	PSI			☐ WC ☐ PSI	☐ WC ☐ PSI
	/	☐ WC ☐ PSI		☐ WC ☐ PSI			PSI	PSI			☐ WC ☐ PSI	☐ WC ☐ PSI
	/	☐ WC ☐ PSI		☐ WC ☐ PSI			PSI	PSI			☐ WC ☐ PSI	☐ WC ☐ PSI

Performed Sniff Test ■ Y ☐ N

Comments: 20ft 1/2 inch csst2- 1/2 inch csst fittings ; ;

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)

Jack Deshane
Service Technician Name - Print

08/18/2026
Service Technician Signature — Date

Shawn Cordwell
Customer Name - Print

08/18/2026
Customer Signature — Date

HOWLAND PUMP SUPPLY Inc

HULBERT SUPPLY - MALONE

4082 STATE ROUTE 11
PO BOX 505
MALONE, NY 12953

INVOICE

Phone 518-521-3164
Fax 518-521-3059

09:15 08/18/26 DPS

Invoice # E131816 00 00

BR/WHSE USER
09/09 DPS

SOLD TO	SHIP TO
ADIRONDACK ENERGY P.O. BOX 355 MALONE NY 12953	ADIRONDACK ENERGY P.O. BOX 355 MALONE NY 12953

Tel 518-483-3835 **Fax** 518-483-8089

ORDER DATE	CUSTOMER NUMBER	CUSTOMER P/O NUMBER	TERMS CODE	TAX CODE	SHIP VIA	SALES PERSON	JOB ID/NAME
08/18/26	0002101	Cordwell	Net 30 Days	99/0.000%	BEST WAY	DAN SIMSER	

LN#	Q-ORD	Q-SHP	Q-B/O	PRODUCT	UOM	UNIT-PRICE	DISC%	EXTENSION
1)	1	1	0	204000045 RINNAI DV WALL FURNACE THERMOSTAT KIT "US ONLY"	EA	100.76		$100.76
2)	1	1	0	EX38DTP RINNAI 36,500 BTU LP GAS DT SERIES DIRECT VENT WALL FURNACE BEIGE WALL THERMOSTAT READY	EA	1984.10		$1,984.10

Serial # LB-005008

Order Total 2,084.86

TOT: 2 2 0

Received in Good Condition:

X:_____

SPECIAL ORDERS 50% DEPOSIT & RESTOCKING CHARGE.

Terms & Conditions
NO RETURNS WITHOUT SALES RECEIPT. NO RETURNS AFTER 10 DAYS. ALL ARE SUBJECT TO A RESTOCKING CHARGE. THE SERVICE CHARGE ON AMOUNTS OVER 30 DAYS IS 2% PER MONTH OR 24% ANNUALLY.

Ship Date 08/18/26 Loc
Volume _____ Picked by DPS
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Pieces _____ Packed by _____
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Pkgs _____ Checked by _____
Ctns _____
Lnth _____ Loaded by _____