

Alan's Chimney Sweep

/ A.J.'s Stoves LLC

1267 A HWY 395 N.

Gardnerville, NV 89410

PHONE 775-783-9986

Nevada Cont. Lic. # 32657A

Gas Only Gas Only Gas Only Gas Only Gas Only

One Story Modular / Mobile

Two Story Out Wall Other

Attention:

Email:

Bill To:

Phone:

[Redacted]

VIA Thomas Vander Linn

Date Called:

09/19/21

Annual Service YES NO

Scheduled Time:

09/24/21

Name:

(1 Thomas (Cordell) Brothers) - 775-552-5509

Address:

1373 Bay St

Phone:

Brand Name:

Heatitator

Model:

ND3630

Serial#

GA1348221

Date

05

LP <input checked="" type="checkbox"/> NG <input type="checkbox"/>	Checked <input checked="" type="checkbox"/>	Serviced <input checked="" type="checkbox"/>	Replaced <input checked="" type="checkbox"/>
Pilot Light	<input checked="" type="checkbox"/>		
Pilot Hood	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Thermocouple / Flame Sensor	<input checked="" type="checkbox"/>		
Thermopile	<input checked="" type="checkbox"/>		
Igniter	<input checked="" type="checkbox"/>		
Orifice - Pilot	<input checked="" type="checkbox"/>		
Pilot Tube	<input checked="" type="checkbox"/>		
Burner	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Burner Tube	<input checked="" type="checkbox"/>		
Burner Orifice	<input checked="" type="checkbox"/>		
Burner Valve RS	<input checked="" type="checkbox"/>		
Module	<input type="checkbox"/>		
Piezo Igniter	<input checked="" type="checkbox"/>		
Manifold Pressure	<input type="checkbox"/>		
Gas Leak Test	<input type="checkbox"/>		
Air Mixture	<input checked="" type="checkbox"/>		
Gaskets	<input checked="" type="checkbox"/>		
Window / Glass	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Spill Switch	<input type="checkbox"/>		
Blower / Fan	<input checked="" type="checkbox"/>		
Blower / Fan Sensor	<input type="checkbox"/>		
Rheostat	<input checked="" type="checkbox"/>		
Logs / Glass	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Gas Flexline/ Valve	<input checked="" type="checkbox"/>		

Buff In <input checked="" type="checkbox"/>	Insert <input type="checkbox"/>	OM ZC <input type="checkbox"/>	Freestanding <input type="checkbox"/>
Direct Vent			B-Vent
Remote	Wall Thermostat		Wall Switch / On/off
Electronic Ignition			Millivolt 650/240
Diagram / Notes			
<ul style="list-style-type: none"> - added embers - reterminated wall switch - tested blower <p>Blower needs replaced call Thomas</p>			
<p>Sellers have ordered new blower outside of escrow. Estimated completion is ~3 weeks from date of this service.</p>			

THANK YOU! This is your Invoice

Materials	\$	
Tax	\$	
Labor	\$	
Service Call	\$	100 [~]
Discount	\$	< — >
Total	\$	100 [~]
Amount Due	\$	100 [~]

Customer Verification
I have read this form and now understand which areas of my Gas burning system appear to be satisfactory and which areas are not satisfactory.
Signed _____

Attention: This sheet is the result of a visual inspection done at the time of service. It is intended as a convenience to our customer, not as a certification of worthiness or safety. Since conditions of use are beyond our control, we make no warranty of the safety or function of any appliance and none is to be implied.