



WORK ORDER

Number: 268193
Date: 12/17/2019
Account No: 026559-19098
Technician: Lance Rasmussen
Terms: NET DUE
Reference:
PO Number:

4060 Alvis Court . Rocklin, CA 95677 . 916-624-0808 . Fax: 916-632-1114

Billing Address

KURESA, TYLER
 2923 ALDER POINT DR
 Roseville, CA 95661

Service Address

KURESA, TYLER
 2923 ALDER POINT DRIVE
 ROSEVILLE, CA 95661

Item	Description	Qty	Unit	Price	Extended
DIAGRES	Diagnostic - Residential	1.00		\$92.00	\$92.00

NOTES

LRASMUSSE 12/17/2019

Customer complaint of no heat checked all safety devices and ran system system would not start check diagnostic code and unit was blinking three which is a pressure switch stuck open, cleared and tested pressure switch and unit fired up tested from thermostat and unit is working recommend replacing pressure switch due to possible future failure. Have pics and will send to office for quotes and availability also recommending to sign up for RSA maintenance program all information give to homeowner. Also talk to homeowners about ductwork issues returns are way too small for size of unit and the 12in duct is collapsed will need to talk to them and set an appointment when I'm out there to replace pressure switch

PRESSURE SWITCH \$357

Equipment

Type	Model	Brand	Serial	Age	Coverage	Exp
FUR	GMS80804BXBB	GOODMAN	1401188734		119	

Payments

Date	Amount	Type	Document#	Reference
12/18/19	\$92.00	Check	220	Payment Received
12/17/19	\$92.00	Check	CHECK#220	

Note: All Flat Rate items (Mentioned above) include Material, Tax, Labor and one year warranty to install and test equipment.

ACCEPTANCE OF WORK PERFORMED : I acknowledge satisfactory completion of the above described work and that the premises has been left in satisfactory condition. I understand that if my check does not clear, I am liable for the check and any charges from the bank. I agree to pay 1.75% per month for past due contracts (minimum charge \$15). In the event that collection efforts are installed against me, I shall pay for all associated fees at the posted rates as well as all cost of collection fees and reasonable attorney fees. I agree that the amount set forth in the space marked "TOTAL" is the total flat price I have agreed to.

Total: \$92.00
Amount Paid: \$184.00
Total Due: (\$92.00)

Accepted By - _____