CONGER FUELING LIFE LP GAS

congerlpgas.com

129926

NAME Madison Kinard RT# ____ RT. SEQ. ____ ACCT # 03-25392 DATE 6-30-26 INT ____

MAILING ADDRESS 1405 Clyde Griffin rd Thomasville GA 31757 CO. ____ CITY ____

ADDRESS Tillman Rd + Lee Courthouse rd APT/LOT NO. ____

CITY Moultrie STATE Ga ZIP CODE 31768

NEW CUSTOMER INFORMATION

S.S. NO. ____ DELV ____
HOME PH ____ RENT ____
WORK PH ____ CREDIT ____
LITE PILOT ____ PC ____
EMPLOYER ____
DR. ____ USE ____ LEASE ____

email: madisonkinard10@gmail.c
cell # 229-861-3932

PAY BILL ONLINE @congerlpgas.com

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED ____

Set upright 120 & Hang 2 RE160

DIRECTIONS:

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
TS	120	2596721	60	1AA @ house					
		72 * 3.849 = 277.13 + 22.17 =						299.30	

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
5	ft. 1/2" Copper				39.75
2	3/4" sediment trap				80.00
1	Rego LV4403B46R				97.95
2	Rinnai RE160eP				2,199.90
2	1/2" mip ball valves				39.90
1	1/2" Fl x 1/2" mip				3.95
2	1/2" flare nut				5.90
1	Grill regulator and hose assembly				29.95

WORK PERFOMED: Hung TWH and ran gas line. Gas check ok, no leaks.

REGULATION INFORMATION

MAKE: Rego MODEL: LV4403TR9
DATE CODE: ____ VENT: down

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:

1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐

2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A PAMPHLET NUMBER 54 ☐

I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.

X ____
CUSTOMER SIGNATURE

LEAK AND PRESSURE TEST

HIGH:	1st Stage	2nd Stage	LOW	
START LOCK-UP:	PSI	PSI	START LOCK-UP:	12 W.C.
TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE	9 W.C.
AFTER 10 MINUTES:	PSI	PSI	AFTER 10 MINUTES:	9 W.C.
PRESSURE AS LEFT:	PSI	PSI	PRESSURE AS LEFT:	12 W.C.

PIPING PRESSURE TEST

START ____ PSIG FINISH ____ PSIG

	CODE	
APPLIANCES/ EQUIP. SOLD	WH	1099.95
PARTS/MAT. USED	WH	1099.95
TANK RENT	MP	297.40
	MS	39.44
SALES TAX ____ %	88.00 88.00	23.79 3.16 1.52 80
LABOR Comp	LB	300.00
	CF	18.95
	TR	10.00
	(GPC	400.00)
INV. TOTAL		3030.26
AMOUNT RECEIVED	GPC	400.00

3430.26

THE USE AND CARE OF THE APPLIANCES AND EQUIPMENT HAVE BEEN EXPLAINED TO MY SATISFACTION. I ALSO ACKNOWLEDGE RECEIPT OF THE CUSTOMER COPY EXPLAINING THE SAFETY FEATURES OF SUCH EQUIPMENT ON THE REVERSE SIDE.

____ SERVICE REP. SIGNATURE ____ DATE X ____ CUSTOMER SIGNATURE

WHITE/FILE COPY; YELLOW/CUSTOMER COPY; PINK/POSTING COPY

LONGER FUELING LIFE LP GAS

GASCheck® Safeguarding you and your propane system

Residential Gas Appliance System Check

Company/Location Conger Moultrie

Call Date

Date GAS Check® Requested

Call-Taker's Name

Instructions

Account Number 03-25392

Name Madison Knard

Address Tillman Rd.

City, State, Zip Moultrie, GA

Telephone: Office Home

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	Water Heater 6
Manufacturer			Rinnai			Rinnai
Model No.			RE160ep			RE160ep
Serial No.			WE.UA-055292			WE.UA-055294
Fuel			LP			LP
BTU Rating			160,000			160,000
Manual Shut-off (Installed/Existing)			Installed			Installed
Sediment Trap (Installed/Existing)			Installed			Installed
Control Mfr./Model No.			Ok			Ok
Pilot(s)/Pilot Safety System			Ok			Ok
Ignition System(s): Mfr./Model No.			Ok			Ok
Thermostats: Mfr./Model No.			Ok			Ok
Burner(s)/Combustion Chamber			Ok			Ok
Venting System/Draft Diverter			Ok			Ok
Combustion Air			Ambient			Ambient
Red Tag (removed from service)/Recall			NO			NO

TANK/CYLINDER (Additional Serial Numbers):

SIZE	SERIAL NUMBER	MFR.	MFR. DATE	LAST TEST DATE	LOCATION	CONDITION OF: TANK	PAINT	PIGTAIL	FITTINGS	GAUGE	RELIEF VALVE COND.	DATE	CAP	FITTINGS LEAK TEST
120	25R0721	Manchester	2022	2022	AG	Ok	Ok	Ok	Ok	Ok	Ok	—	—	Good

PIPING/REGULATOR OPERATION/CONDITION

		PIPING MATERIAL	PIPING SIZE	REGULATOR MFR. DATE (CODE)	MFR.	REGULATOR CONDITION	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE	LOCK-UP PRESSURE
SINGLE STAGE										IN WC	IN WC
SECOND STAGE	1st	Copper	1/2"	055126	Rego	New	TT29	Down	Down	PSIG	PSIG
	2nd	Hard Pipe	3/4"	108/25	Rego	New	B462	Down	WH	11.2 IN WC	12 IN WC
THIRD STAGE										IN WC	IN WC

SYSTEM LEAK TEST

		START PRESSURE (INCHES WC)	END PRESSURE (INCHES WC)	TIME HELD	SYSTEM OK
SINGLE STAGE/ INTEGRAL/ SECOND STATE					
SECOND STAGE	1st				
	2nd	9.0" W.C.	9.0" W.C.	10 mins	yes
THIRD STAGE					

Comments

Reference Invoice No. Date 6/30/20

This inspection covers (propane/LP-gas) items and equipment visible and 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 working of sealed equipment, or structural components, and cannot be construed to cover future or unforeseen happenings.

I, Jordan Ledford (please print name) certify that I have completed the System Check as prescribed.

Performed Odor Test ☐ Yes

Performed Leak/Pressure Test ☐ Yes

Placed Safety Decal ☐ Yes

Left Consumer Safety Information and Material ☐ Yes

I, _____ (Please print name)

- Know how to turn off the gas in case of emergency.
- Have smelled propane and can detect its odor.
- Have received the consumer safety information and material.
- Had gas system deficiencies and/or corrections, if any, clearly explained to me.
- Am satisfied with the service work performed.

_____ (Customer's Signature)

_____ (Service Technician's Signature)