



congerlpgas.com

INVOICE / WORK ORDER NO.

116154

146 S. Ridge Ave.  
Tifton, GA 31794  
(229) 386-5574

306 S. Main St.  
Sylvester, GA 31791  
(229) 776-7336

604-B N. Broadfoot Blvd.  
Vidalia, GA 30474  
(912) 537-8722

3117 Veterans Parkway S.  
Moultrie, GA 31788  
(229) 985-6942

2310-B Highway 84 W  
Valdosta, GA 31602  
(229) 469-4250

NAME Building Valdosta RT# \_\_\_\_\_ RT. SEQ. \_\_\_\_\_ ACCT # \_\_\_\_\_ DATE 4-22-25 INT \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CO. \_\_\_\_\_ CITY \_\_\_\_\_

ADDRESS 3076 Mary Powell APT/LOT NO. \_\_\_\_\_

CITY Hahira STATE GA ZIP CODE \_\_\_\_\_

## NEW CUSTOMER INFORMATION

S.S. NO. \_\_\_\_\_ DELV \_\_\_\_\_

HOME PH \_\_\_\_\_ RENT \_\_\_\_\_

WORK PH \_\_\_\_\_ CREDIT \_\_\_\_\_

LITE PILOT \_\_\_\_\_ PC \_\_\_\_\_

EMPLOYER \_\_\_\_\_

DR. \_\_\_\_\_ USE \_\_\_\_\_ LEASE \_\_\_\_\_

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED \_\_\_\_\_

email: \_\_\_\_\_

cell # \_\_\_\_\_

**PAY BILL ONLINE @congerlpgas.com**

DIRECTIONS: 

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
					MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
Set	120	A 9098	50						

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
15'	1/2" Copper				52 50
2	1/2" fl nuts				2 65
1	Rego X46R				73 55
1	Rego B46R				60 75
1	1/2" maxitrol				28 10
1	1/2" fl x 1/2" mpt cutoff				12 25
1	3/4" cutoff				18 60
2	3/4" x close nipple				1 05
1	3/4" tee				2 10

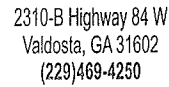
WORK PERFORMED:	Set tank and hooked up all appliances. Safety check system ok. Final inspection called.	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE
MAKE:	MODEL:	PARTS/MAT. USED	TANK RENT	
DATE CODE:	VENT:			
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE			CFD	14 95
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:			SALES TAX	
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.E.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>				
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.E.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>				
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.				
X				
CUSTOMER SIGNATURE			PIPING PRESSURE TEST	INV. TOTAL
			START PSIG	FINISH PSIG
			AMOUNT RECEIVED	

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.

*Cl. Thatt*

4/22/25

x



116154

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



# Residential Gas Appliance System Check

Company/Location Conger/Valdosta  
Call Date \_\_\_\_\_  
Date GAS Check® Requested \_\_\_\_\_  
Call-Taker's Name \_\_\_\_\_  
Instructions \_\_\_\_\_

Account Number \_\_\_\_\_  
Name J.D. Yeager  
Address 3076 Mary Powell  
City, State, Zip Hahira, GA  
Telephone: Office \_\_\_\_\_ Home \_\_\_\_\_

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Rinnai	Whirlpool		
Model No.			REP160e	WS657530R20		
Serial No.			PLMA-113443	RE1115297		
Fuel			LP	LP		
BTU Rating			160,000	65,500		
Manual Shut-off (Installed/Existing)			installed	exist		
Sediment Trap (Installed/Existing)			installed	—		
Control Mfr./Model No.			—	—		
Pilot(s)/Pilot Safety System			electric	electric		
Ignition System(s): Mfr./Model No.			electric	electric		
Thermostats: Mfr./Model No.			—	—		
Burner(s)/Combustion Chamber			open	open		
Venting System/Draft Diverter			open	open		
Combustion Air			ambi	ambi		
Red Tag (removed from service)/Recall			—	—		

TANK/CYLINDER (Additional Serial Numbers):

SIZE	SERIAL NUMBER	MFR.	MFR. DATE	LAST TEST DATE	LOCATION	CONDITION OF:					RELIEF VALVE			FITTINGS LEAK TEST
						TANK	PAINT	PIGTAIL	FITTINGS	GAUGE	COND.	DATE	CAP	
120	A9098	Bagwell	1969	2024	Rear	OK	OK	New	OK	OK	OK	1969	yes	OK

PIPING/REGULATOR OPERATION/CONDITION

SINGLE STAGE	PIPING		REGULATOR MFR. DATE (CODE)	MFR.	REGULATOR CONDITION	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE	LOCK-UP PRESSURE
	MATERIAL	SIZE								
	Copper	1/2"	05D2024	Rego	New	TR9	Down	Dome	9.5 PSI IN WC	10 PSI IN WC
SECOND STAGE	1st	CSST	1/2"	10A2024	Rego	New	Down	eve	1.5 PSIG	2 PSIG
	2nd	BI	3/4"	04D2024	Rego	New	Down	eve	11 IN WC	13 IN WC
THIRD STAGE	CSST	1/2"	unknown	maxitrol	New	1/2"	Horiz	Attic	11 IN WC	13 IN WC

SYSTEM LEAK TEST

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

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, \_\_\_\_\_ (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.

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reference Invoice No. \_\_\_\_\_ Date \_\_\_\_\_

I, Cole Trnett (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

\_\_\_\_\_  
(Service Technician's Signature)

\_\_\_\_\_  
(Customer's Signature)

## Required Safety inspections

This page must be completed and included with the rebate application. Failure to include this page will automatically disqualify the customer for the safety rebate.

Test	Beginning Pressure	Ending Pressure	Test Duration
Pressure test (when required by code or local authority)	10 psi	10 psi	24 hrs
Leak test	9 1/2" wc	9 1/2" wc	10 min
Flow test			
Lock-up pressure			

Technician's Certification: I, Donald Alfred, certify that the above tests were performed and the results were recorded correctly.

Date of Inspection: \_\_\_\_\_

Propane Dealer's Signature: \_\_\_\_\_

This paperwork must be submitted to the GA Propane Commission within 30 days of appliance inspection date to receive rebate.

### *Disclaimer:*

*The propane dealer seeking a rebate must submit a full and complete Application form. Submission of the Application form constitutes a representation on the part of the participating propane dealer that the work shown on the form has actually been completed. A safety inspection must be performed by the participating propane dealer after the installation of each new qualifying appliance(s) and the result of that inspection must be documented on the Application form. The safety inspection for qualifying appliance installations must, at a minimum, include the following: 1) a leak test; 2) a pressure test if required by applicable laws, rules and regulations; and 3) a flow and lock up test on the regulator[s]. The propane dealer agrees to comply with all laws, rules and regulations governing the installation of the qualifying appliance and with the manufacturer's installation instructions. The Southeast Propane Alliance and GA Propane Commission assumes no responsibility whatsoever for the installation, inspection, or testing of the qualifying appliance(s) or any associated gas system and, by issuing a rebate, makes no representation, warranty or guarantee regarding the qualifying appliance(s) or the associated gas system. The Southeast Propane Alliance and GA Propane Commission disclaims any liability for any personal injury, property damage, business losses or other damages of any nature whatsoever, whether special, indirect, consequential or compensatory, directly or indirectly arising from the installation of the qualifying appliance(s).*

Please submit your 2-page rebate form and receipt(s) to:

**Mail:** GA Propane Commission  
5109 Hollyridge Dr.  
Raleigh, NC 27612

**Fax:** 919 781-7481

**Email:** [info@gapropanerebates.com](mailto:info@gapropanerebates.com)

As of: 03/01/2023