



congerlpgas.com

INVOICE / WORK ORDER NO.

113267

146 S. Ridge Ave.
Tifton, GA 31794
(229) 386-5574306 S. Main St.
Sylvester, GA 31791
(229) 776-7336604-B N. Broadfoot Blvd.
Vidalia, GA 30474
(912) 537-87223117 Veterans Parkway S.
Moultrie, GA 31788
(229) 985-6942NAME Robert Maynard RT# _____ RT. SEQ. _____ ACCT # 4.23039 DATE _____ INT _____MAILING ADDRESS 0 CO. _____ CITY _____ADDRESS 2005 Tottenham Dr APT/LOT NO. _____CITY Hahira STATE GA ZIP CODE 31632SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____**NEW CUSTOMER INFORMATION**
S.S. NO. _____ DELV _____
HOME PH _____ RENT _____
WORK PH _____ CREDIT _____
LITE PILOT _____ PC _____
EMPLOYER _____
DR. _____ USE _____ LEASE _____

email: _____

cell # _____

PAY BILL ONLINE @congerlpgas.comDIRECTIONS: 10 gallons in tank

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
Set	420	2594524			MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	Rinnai	RF160e	PK4A11382		999.95
20'	3/8" Copper				74.00
2	3/8" + 1 nut				3.90
1	3/8" FI x 1/2" mpt Cutoff				19.95
1	Rego B46R				79.95
1	3/4" x 3" sediment trap nipple				1.95
1	3/4" sediment trap				31.00

WORK PERFORMED:	Set tank, run lines	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE	999.95	
Hang w/H and hooked up gas	MAKE:	MODEL:	PARTS/MAT. USED	MP	215.75	
Check system o/c	DATE CODE:	VENT:	TANK RENT	SM	30.95	
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE					CD	14.95
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:		LEAK AND PRESSURE TEST		SALES TAX	80.00 17.26	
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>	HIGH:	1st Stage	2nd Stage	LOW	80.00 17.26	
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>	START LOCK-UP:	PSI	PSI	START LOCK-UP:	W.C. LABOR mar 3hrs 300.00	
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE	W.C. 01 39.99	
	AFTER 10 MINUTES: PRESSURE	PSI	PSI	AFTER 10 MINUTES: PRESSURE	W.C. TS 10.00	
	AS LEFT: PRESSURE	PSI	PSI	AS LEFT: PRESSURE	W.C. Robert R. 200.00	
X	PIPING PRESSURE TEST			INV. TOTAL	1716.53	
CUSTOMER SIGNATURE	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 TA
SERVICE REP. SIGNATURE2/7/25
DATE

X

CUSTOMER SIGNATURE



Safeguarding you and your propane system

Residential Gas Appliance System Check

Company/Location Conger/Caldosta

Call Date 2/7/25

Date GAS Check® Requested _____

Call-Taker's Name _____

Instructions _____

Account Number 04-23039

Name Robert Maynard

Address 2005 Tottenham Dr.

City, State, Zip Hahira, GA 31632

Telephone: Office _____ Home (cell) 229-561-0723

email: robert.maynard05@yahoo.com

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Bosch			
Model No.			REPI60e			
Serial No.			PKQA-111382			
Fuel			LP			
BTU Rating			160,000			
Manual Shut-off (Installed/Existing)			installed			
Sediment Trap (Installed/Existing)			installed			
Control Mfr./Model No.						
Pilot(s)/Pilot Safety System			electric			
Ignition System(s): Mfr./Model No.			electric			
Thermostats: Mfr./Model No.						
Burner(s)/Combustion Chamber			open			
Venting System/Draft Diverter			open			
Combustion Air			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) 420	2544524	worthington	2024	2024	Left	New	New	New	New	New	New	2024	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								
SECOND STAGE	1st	Copper	3/8"	09D2024	Regd	New	TR4	Down	Dome	9.5 PSIG	10 PSIG
	2nd	BI	3/4"	04C2024	Reg	New	B46R	Down	2UR	11 IN WC	13 IN WC
THIRD STAGE										IN WC	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				

Comments _____

Reference Invoice No. _____

Date 2/7/25

I, Cole Truett (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

Cole Truett
(Service Technician's Signature)

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, Robert Maynard (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.

Robert Maynard
(Customer's Signature)