



congerlpgas.com

INVOICE / WORK ORDER NO.

117481

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 Janie Rosales (Sanjuana) RT# _____ RT. SEQ. _____ ACCT # 03-19694 DATE 5-7-25 INT ☒

MAILING ADDRESS 1089 GA-33 CO. _____ CITY _____

ADDRESS 281 Edwards St APT/LOT NO. _____

CITY Moultrie STATE GA ZIP CODE 31768

SERVICE 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: Sanj.rosales@gmail.comcell # 229-319-4897

PAY BILL ONLINE @congerlpgas.com

DIRECTIONS:

229-891-5686

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

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	Rinnai RL2SEP		RC-CA-042985	509.98	509.98
					635.75

WORK PERFORMED:	REGULATION INFORMATION		APPLIANCES/EQUIP. SOLD	635.75																				
	MAKE:	MODEL:	PARTS/MAT. USED																					
	DATE CODE:	VENT:	TANK RENT																					
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE																								
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:			SALES TAX	50.86																				
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.			LEAK AND PRESSURE TEST <table border="1"> <tr> <td>HIGH:</td> <td>1st Stage</td> <td>2nd Stage</td> <td>LOW</td> </tr> <tr> <td>START LOCK-UP:</td> <td>PSI</td> <td>PSI</td> <td>START LOCK-UP: W.C.</td> </tr> <tr> <td>TANK OFF: PRESSURE</td> <td>PSI</td> <td>PSI</td> <td>TANK OFF: PRESSURE W.C.</td> </tr> <tr> <td>AFTER 10 MINUTES: PRESSURE</td> <td>PSI</td> <td>PSI</td> <td>AFTER 10 MINUTES: W.C.</td> </tr> <tr> <td>AS LEFT:</td> <td>PSI</td> <td>PSI</td> <td>AS LEFT: W.C.</td> </tr> </table>		HIGH:	1st Stage	2nd Stage	LOW	START LOCK-UP:	PSI	PSI	START LOCK-UP: W.C.	TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE W.C.	AFTER 10 MINUTES: PRESSURE	PSI	PSI	AFTER 10 MINUTES: W.C.	AS LEFT:	PSI	PSI	AS LEFT: W.C.
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TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE W.C.																					
AFTER 10 MINUTES: PRESSURE	PSI	PSI	AFTER 10 MINUTES: W.C.																					
AS LEFT:	PSI	PSI	AS LEFT: W.C.																					
X _____ CUSTOMER SIGNATURE			PIPING PRESSURE TEST <table border="1"> <tr> <td>START</td> <td>PSIG</td> <td>FINISH</td> <td>PSIG</td> </tr> </table>		START	PSIG	FINISH	PSIG																
START	PSIG	FINISH	PSIG																					
			INV. TOTAL	286.61																				
			AMOUNT RECEIVED	400.00																				

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