



congerlpgas.com

INVOICE / WORK ORDER NO.

116388

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) 985-69422310-B Highway 84 W  
Valdosta, GA 31602  
(229) 469-4250NAME Makayla McGhee RT# \_\_\_\_\_ RT. SEQ. \_\_\_\_\_ ACCT # 4-23421 DATE 4-14-25 INT \_\_\_\_\_

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

ADDRESS 169 Lees place APT/LOT NO. \_\_\_\_\_CITY Lake park STATE Ga ZIP CODE \_\_\_\_\_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: \_\_\_\_\_

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

PAY BILL ONLINE @congerlpgas.com

DIRECTIONS: Hung Water Heater & set 420 off to side. waiting for customer to call when ready to finish setting tank & hookup to Rinnai

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
<u>Set</u>	<u>420</u>	<u>2670852</u>	<u>15</u>	<u>(18 Gallons)</u>	MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	<u>Rinnai</u>	<u>Replko</u>	<u>PK-4A-113442</u>		<u>999.95</u>
1	<u>Drip Leg</u>				<u>31.30</u>
1	<u>3/4" BR</u>				<u>79.95</u>
24	<u>1/2 copper</u>				<u>123.75</u>
2	<u>1/2 Flare nuts</u>				<u>5.90</u>
1	<u>perm.it</u>				<u>77.62</u>
1	<u>1/2 cutoff</u>				<u>24.95</u>
				<u>G.P.C.</u>	<u>400.00</u>
				<u>Rinnai Rent</u>	<u>200.00</u>

WORK PERFORMED:	REGULATION INFORMATION		APPLIANCES/EQUIP. SOLD	CODE	999.95	
	MAKE:	MODEL:	PARTS/MAT. USED	MP	2606.05	
	DATE CODE:	VENT:	TANK RENT	MS	339.60	
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE					CF	14.95
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:		LEAK AND PRESSURE TEST		SALES TAX	80.00 5.06	
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>		HIGH: 1st Stage 2nd Stage LOW		%	2372 1.80	
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>		START LOCK-UP: PSI PSI		LABOR	2128 1.20	
TANK OFF: PRESSURE PSI PSI		START LOCK-UP: W.C. W.C.		1-man	300.00	
AFTER 10 MINUTES: PSI PSI		TANK OFF: PRESSURE W.C. W.C.		TS	10.00	
PRESSURE AS LEFT: PSI PSI		AFTER 10 MINUTES: W.C. W.C.		01	71.98	
		PRESSURE AS LEFT: W.C. W.C.		PE	77.62	
X _____		PIPING PRESSURE TEST		INV. TOTAL	1886.27	
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.

SERVICE REP. SIGNATURE

DATE

X

CUSTOMER SIGNATURE

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





Safeguarding you and your propane system

## Residential Gas Appliance System Check

Company/Location Conger / Valdosta

Call Date \_\_\_\_\_

Date GAS Check® Requested \_\_\_\_\_

Call-Taker's Name \_\_\_\_\_

Instructions \_\_\_\_\_

Account Number

Name Makayla M<sup>c</sup>Ghee

Address 169 Lees Place

City, State, Zip Lake Park GA

Telephone: Office \_\_\_\_\_ Home \_\_\_\_\_

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Rinnai			
Model No.			Repl60			
Serial No.			PK-4A-113442			
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			OK			
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	
✓ 420	2676852	Worthington	2024	2025	side	✓	✓	✓	✓	✓	✓	24	✓	✓

### 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	1/2	05024	Rego	OK	TR9	Hor	lid	10 PSIG	10 PSIG
	2nd	Black	3/4	05024	Rego	OK	B416R	vert	eve	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	9	10 min OK
THIRD STAGE				

Comments \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

I, Seth Weeks (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

Seth Weeks  
(Service Technician's Signature)

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)