



congerlpgas.com

INVOICE / WORK ORDER NO.

116239

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 Classic Homes by Weaver RT# _____ RT. SEQ. _____ ACCT # _____ DATE 6-2-25 INT _____
Austin Weaver

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 3944 Lu Lane 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

Need to Set 120, TWH, Grand Line, Permit

DIRECTIONS:

Do before Thursday 5th

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
TS	120	1546560	10	Gallons	MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
15	3/4 copper				38 40
1	Rinnai	Bellco	SF-UA-07844		999 99
1	Permit				8 00
2	3/8 flare nuts				3 90
1	3/4 DRD Reg				31 50
1	1/2-3/8 cutoff				19 95
1	B46R				60 73

WORK PERFORMED:	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE
	MAKE: _____ MODEL: _____	PARTS/MAT. USED	
	DATE CODE: _____ VENT: _____	TANK RENT	
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE		CF	14 95
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:		SALES TAX _____ %	
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐	HIGH: 1st Stage 2nd Stage LOW	LABOR 1 min 1 hour	150 00
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A PAMPHLET NUMBER 54 ☐	START LOCK-UP: PSI PSI START LOCK-UP: W.C.	Pinnai Rebate	200 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.	GAC	400 00
	AFTER 10 MINUTES: PSI PSI AFTER 10 MINUTES: W.C.		
	PRESSURE AS LEFT: PSI PSI PRESSURE AS LEFT: W.C.		
	PIPING PRESSURE TEST		INV. TOTAL
X _____ 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.

[Signature]
SERVICE REP. SIGNATURE

6-2-25
DATE

X _____
CUSTOMER SIGNATURE