

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

306
Sylvest
(229

Application ☒ Rinnai _____ GPC _____
Gas Check ☒ Warranty ☒ Inv _____
New Cust Pkg _____ 5 Yr _____ Letter _____
Lease/Rent/Amt ☒ \$ 0 / 4 / 60

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

111113

NAME Lloyd White RT# _____ RT. SEQ. _____ ACCT # 03-22663 DATE 11-20-24 INT BP

MAILING ADDRESS 7980 Breast Station Rd CO. _____ CITY _____

ADDRESS _____ APT/LOT NO. _____

CITY Baconton STATE GA ZIP CODE 31716

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: lloywhite@yahoo.com

cell # 229 985-8473

PAY BILL ONLINE @congerlpgas.com

DIRECTIONS:

TWH Fire box + Trencher
with logs 1/2000

Need gas order

[illegible]

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	36" Fire Box				799.95
1	RL75ep		PD.CA-069942		999.95
1	Misc Iron				600.00
1	Shut off key				19.95
1	Copper cert				39.95
1	Flex Riser 1/2"				54.95
50	1/2" Poly				32.50
	Trencher Rental				1100.00

WORK PERFORMED:	TS hang TWM	REGULATION INFORMATION		APPLIANCES/ EQUIP. SOLD	CODE	999.95
gas ck No leaks		MAKE: Rego	MODEL: TR9	PARTS/MAT. USED	AP	799.95
		DATE CODE: 2-24	VENT: Hor	TANK RENT	MP	207.35

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:

LEAK AND PRESSURE TEST

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.

X

CUSTOMER SIGNATURE

HIGH:	1st Stage	2nd Stage	LOW	
START LOCK-UP:	PSI	PSI	START LOCK-UP:	13 W.C.
TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE	9 W.C.
AFTER 10 MINUTES:	PSI	PSI	AFTER 10 MINUTES:	9 W.C.
PRESSURE AS LEFT:	PSI	PSI	PRESSURE AS LEFT:	13 W.C.

PIPING PRESSURE TEST

START	PSIG	FINISH	PSIG
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SALES TAX _____ %

LABOR

[illegible][illegible][illegible]

INV TOTAL

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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 _____

CUSTOMER SIGNATURE _____