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INVOICE / WORK ORDER NO.

115736

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

Contractor:

NAME Owens Vinyl RT# _____ RT. SEQ. _____ ACCT# 4-2052 DATE 5-27-25 INT _____

MAILING ADDRESS _____ CO. _____ CITY _____

Job: ADDRESS 1935 Old Coffee Rd APT/LOT NO. _____CITY Barney 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: TWH installed 5/27/25 CT (10 gal)

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
Set	420	2594702			MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	Rinnai	RE1802	TB-4A-021744		1099.95
1	VR				73.55
1	B46R				60.73
1	1/2 maxitrol				28.06
2	1/2 Straights				40.92
1	Dripleg				31.00
1	3/4 cutoff				18.60
1	1/2 cutoff flange				6.18
2	Bell reducer				2.74

WORK PERFORMED:	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE	SALES AMOUNT
	MAKE: _____ MODEL: _____	PARTS/MAT. USED	WH	1099.95
	DATE CODE: _____ VENT: _____	TANK RENT	MP	351.36
			M5	36.08
			CF	14.95
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				38.00
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:				25.11
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>				2.84
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>				1.00
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: W.C. LABOR / min 2.5 hrs				250.00
TANK OFF: PRESSURE PSI PSI TANK OFF: PRESSURE W.C.				GPC Rebate (400.00)
AFTER 10 MINUTES: PSI PSI AFTER 10 MINUTES: W.C.				Rinnai Rebate (200.00)
PRESSURE AS LEFT: PSI PSI PRESSURE AS LEFT: W.C.				
PIPING PRESSURE TEST				INV. TOTAL 1872.54
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

CUSTOMER SIGNATURE

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



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CONTINUATION SHEET

NAME Owens Vinyl RT # _____ RT. SEQ. _____ ACCT # _____ DATE _____ INT _____

[illegible][illegible]**ADDITIONAL COMMENTS**

REGULATOR INFORMATION			MAKE:			MODEL:			DATE CODE:			VENT:		
LEAK AND PRESSURE TEST		START LOCK UP:	PSI	TANK OFF PRESSURE:	PSI	AFTER 10 MINUTES:	PSI	PRESSURE AS LEFT:	PSI	PIPING PRESSURE TEST				
		STOCK LOCK UP:	W.C.	TANK OFF PRESSURE:	W.C.	AFTER 10 MINUTES:	W.C.	PRESSURE AS LEFT:	W.C.	START	PSIG	FINISH	PSIG	

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



Residential Gas Appliance System Check

Company/Location Conger LP Gas / Valdosta
Call Date _____
Date GAS Check® Requested 6-4-25
Call-Taker's Name _____
Instructions _____

Account Number _____
Name John Owens
Address 1935 Old Coffee Rd
City, State, Zip Barney GA
Telephone: Office _____ Home _____

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Rinnai	Fridge air		
Model No.			Reiko	GLC3304SAS		
Serial No.			TA-4A-021744	1F44190641		
Fuel			LP	LP		
BTU Rating			180,000	450,000		
Manual Shut-off (Installed/Existing)			installed	installed		
Sediment Trap (Installed/Existing)			installed			
Control Mfr./Model No.						
Pilot(s)/Pilot Safety System			OK	OK		
Ignition System(s): Mfr./Model No.			electrical	electrical		
Thermostats: Mfr./Model No.						
Burner(s)/Combustion Chamber			open	open		
Venting System/Draft Diverter			open	open		
Combustion Air			ambi	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	2594702	Worthington	2025	2025	back	✓	✓	✓	✓	✓	✓	25	✓	✓

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								
										IN WC	IN WC
SECOND STAGE	1st	copper	1/2	None	Rego	✓	TR9	Hor	lid	10 PSIG	10 PSIG
	2nd	CSst	1/2	None	Rego	✓	Y46R	vert	eve	23.5 IN WC	23.5 IN WC
THIRD STAGE		Black	3/4	None	Rego	✓	B46R	vert	eve	11 IN WC	13 IN WC

SYSTEM LEAK TEST

SINGLE STAGE/ INTEGRAL/ SECOND STATE	START PRESSURE	END PRESSURE	TIME HELD	SYSTEM OK
	(INCHES WC)	(INCHES WC)		
SECOND STAGE	1st			
	2nd	8	8	10 min OK
THIRD STAGE				

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, _____ (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)

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)