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(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 David Norman RT# _____ RT. SEQ. _____ ACCT# 03.23649 DATE 7-2-25 INT DB

MAILING ADDRESS 549 Clarence Norman rd. CO. _____ CITY _____

ADDRESS AT Lane's House APT/LOT NO. _____

CITY Moultrie STATE GA ZIP CODE 31788

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: 1987davidnorman@msn.com

cell # 229-985-0249

PAY BILL ONLINE @congerlpgas.com

DIRECTIONS:

TANK PICKUP/SE	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
	<u>120</u>	<u>154651P</u>	<u>10</u>	<u>Gallons</u>	MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
				<u>Need GAS order.</u>					

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>1</u>	<u>KL 75e</u>	<u>KL 75e</u>	<u>PCA-040636</u>		<u>999.95</u>
<u>50</u>	<u>feet 1/2" MTC pipe</u>				<u>298.00</u>
<u>1</u>	<u>maxi control regulators</u>				<u>69.95</u>
<u>1</u>	<u>w/ off</u>				<u>20.00</u>
<u>1</u>	<u>sediment trap</u>				<u>20.00</u>
<u>3</u>	<u>90° elbows</u>				<u>160.00</u>
	<u>10 * 3.849 = 38.49 + 4.28 + 14.95 =</u>				<u>57.72</u>

WORK PERFORMED: <u>set 120 tank</u>	REGULATION INFORMATION	APPLIANCES/ EQUIP. SOLD	CODE	SALES AMOUNT
<u>Ran new gas line to water heater</u>	MAKE: <u>Riso</u> MODEL: <u>LV40479</u>	PARTS/MAT. USED	<u>MP</u>	<u>567.95</u>
	DATE CODE: <u>10-22</u> VENT: <u>Horiz</u>	TANK RENT	<u>MS</u>	<u>448.88</u>
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				<u>CF</u> <u>14.95</u>
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:				SALES TAX <u>3.59</u> <u>50.00</u>
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐				<u>1.20</u> <u>45.44</u>
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐				<u>LB</u> <u>180.00</u>
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.				<u>GPC</u> <u>2000.00</u>
X _____ CUSTOMER SIGNATURE				INV. TOTAL <u>1795.68</u>
LEAK AND PRESSURE TEST				AMOUNT RECEIVED <u>200.00</u>
HIGH: 1st Stage 2nd Stage LOW				
START LOCK-UP: <u>213</u> PSI PSI START LOCK-UP: _____ W.C. LABOR				
TANK OFF: PRESSURE <u>216</u> PSI PSI TANK OFF: PRESSURE _____ W.C.				
AFTER 10 MINUTES: <u>216</u> PSI PSI AFTER 10 MINUTES: _____ W.C.				
PRESSURE AS LEFT: <u>216</u> PSI PSI PRESSURE AS LEFT: _____ W.C.				
PIPING PRESSURE TEST				
START PSIG FINISH PSIG				

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

7/2/2025
DATE

[Signature]
CUSTOMER SIGNATURE