CONGER LP GAS — FUELING LIFE

**congerlpgas.com**

117001

| 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 Jason Browin. RT# ____ RT. SEQ. ____ ACCT # 03.20547 DATE 7.15.25 INT. SL

MAILING ADDRESS 148 seminole drive. CO. ____ CITY ____

ADDRESS ____ APT/LOT NO. ____

CITY Moultrie STATE GA ZIP CODE 31768

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 ____

Change out water Heater.

email: Jasonbrowning40@Yahoo.com
cell # 229-560-0332
PAY BILL ONLINE @congerlpgas.com

DIRECTIONS:

| TANK PICKUP/SET | TANK SIZE | SERIAL # | TANK % | TANK DESTINATION | DOT PERMANENTLY INSTALLED CONTAINERS | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | MANUFACTURED DATE | LAST TEST DATE | SIZE | SERIAL # | % FULL |
| | | | | | | | | | |
| | | | | | | | | | |

| QTY | APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED | MODEL # | SERIAL NUMBER | UNIT PRICE | SALES AMOUNT |
|---|---|---|---|---|---|
| 1 | Rinnai RL75ep | RL75E | RCA-042066 | | 999 95 |

WORK PERFOMED: Changed TWH. Gas Check. Ok, no leaks.

REGULATION INFORMATION
MAKE: Rego MODEL: LV44C5139
DATE CODE: 0913/16 VENT: Down

| | | |
|---|---|---|
| APPLIANCES/ EQUIP. SOLD | CODE WH | 999 95 |
| PARTS/MAT. USED | | |
| TANK RENT | | |
| SALES TAX ____ % | | 80 00 |
| | | 1.20 |
| LABOR | LB | 180 00 |
| | CE | 14 95 |
| | GPC | 200 00 |
| INV. TOTAL | | 1076.10 |
| AMOUNT RECEIVED | Cash | 200 00 |
| | | 1276.10 |

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:

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

LEAK AND PRESSURE TEST

| HIGH: | 1st Stage | 2nd Stage | LOW |
|---|---|---|---|
| START LOCK-UP: | PSI | PSI | START LOCK-UP: 14 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: 14 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.

Jordan
SERVICE REP. SIGNATURE

7-15-25
DATE

X ____ CUSTOMER SIGNATURE

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