



congerlpgas.com

INVOICE / WORK ORDER NO.

115628

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 Pankaj Agrawal RT# _____ RT. SEQ. _____ ACCT # 04-23633 DATE 6-30-25 INT _____

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 4553 Tillman Bluff APT/LOT NO. _____

CITY Valdosta STATE GA ZIP CODE _____

NEW CUSTOMER INFORMATION

S.S. NO. _____ DELV _____

HOME PH _____ RENT _____

WORK PH _____ CREDIT _____

LITE PILOT _____ PC _____

EMPLOYER _____

DR. _____ USE _____ LEASE _____

email: _____

cell # 713-582-7166

PAY BILL ONLINE @congerlpgas.com

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____

DIRECTIONS: (Take w/you)
Tank set for Re 199el, and Hook up Generator. Generator set 6-30-25 by
Williams Elect.

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
<u>Set</u>	<u>250</u>				MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>1</u>	<u>Rinnai Re 199el</u>		<u>SLUA-168812</u>		<u>1399.95</u>
<u>55</u>	<u>5/8 copper</u>				<u>382.25</u>
<u>4</u>	<u>5/8 flare nuts</u>				<u>11.86</u>
<u>3</u>	<u>5/8-3/4 mip</u>				<u>11.83</u>
<u>1</u>	<u>3/4 cutoff</u>				<u>19.95</u>
<u>1</u>	<u>1/2 flare cutoff</u>				<u>19.95</u>
<u>2</u>	<u>1/2 flare nuts</u>				<u>5.90</u>
<u>3</u>	<u>1/2 copper</u>				<u>19.85</u>
<u>2</u>	<u>B46R</u>				<u>159.98</u>

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

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:		LEAK AND PRESSURE TEST			SALES TAX
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐		HIGH:	1st Stage	2nd Stage	LOW
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐		START LOCK-UP:	PSI	PSI	START LOCK-UP:
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.		TANK OFF:	PSI	PSI	TANK OFF:
		AFTER 10 MINUTES:	PSI	PSI	AFTER 10 MINUTES:
		PRESSURE AS LEFT:	PSI	PSI	PRESSURE AS LEFT:
X _____		PIPING PRESSURE TEST			INV. TOTAL
CUSTOMER SIGNATURE		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.

Seetha Subbar
SERVICE REP. SIGNATURE

7-9-25
DATE

Rinnai Rebate (200.00)
CUSTOMER SIGNATURE



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Valdosta, GA 31602
(229)469-4250

115628

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

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 _____

Call-Taker's Name _____

Instructions _____

Account Number _____

Name Pankaj

Address 4553 Tillman Bluff

City, State, Zip Valdosta Ga

Telephone: Office _____ Home _____

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Rinnai			Generac
Model No.			Rel99e			60072910
Serial No.			SL-11A-168872			3016902961
Fuel			LP			LP
BTU Rating			199,000			355,000
Manual Shut-off (Installed/Existing)			inst.			installed
Sediment Trap (Installed/Existing)			inst.			existing
Control Mfr./Model No.						
Pilot(s)/Pilot Safety System			OK			OK
Ignition System(s): Mfr./Model No.			electric			electric
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	
250	1546291	Quality	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	5/8	01B25	Rego	✓	TR9	Hor	lid	10 PSIG	10 PSIG
	2nd	Black	3/4	05D24	Rego	✓	B46R	vert	none	11 IN WC	13 IN WC
THIRD STAGE		Black	3/4	05D24	Rego	✓	B46R	vert	eve	11 IN WC	13 IN WC

SYSTEM LEAK TEST

SINGLE STAGE/ INTEGRAL/ SECOND STAGE		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)