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INVOICE / WORK ORDER NO.

115789

146 S. Ridge Ave.
Tifton, GA 31794
(229) 386-5574306 S. Main St.
Sylvester, GA 31791
(229) 776-7336604-B N. Broadfoot Blvd.
Vidalia, GA 30474
(912) 537-87223117 Veterans Parkway S.
Moultrie, GA 31788
(229) 985-69422310-B Highway 84 W
Valdosta, GA 31602
(229) 469-4250NAME Owens Vinyl RT# _____ RT. SEQ. _____ ACCT # 20152 DATE 6/30/05 INT PerMAILING ADDRESS 5084 CO. _____ CITY _____Job: ADDRESS Hamilton Green Circle APT/LOT NO. 5084CITY Valdosta 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: owensvinyl@hotmail.comcell # 229-482-3375

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	RX160i	RLBA131930		1099.99

WORK PERFORMED:	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE	
	MAKE:	MODEL:	PARTS/MAT. USED	MS
	DATE CODE:	VENT:	TANK RENT	CF
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:				SALES TAX
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>				%
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>				
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 <u>1 Hr</u>				
TANK OFF: PRESSURE PSI PSI TANK OFF: PRESSURE W.C. Rinnai Rebate				
AFTER 10 MINUTES: PSI PSI AFTER 10 MINUTES: W.C. GPC Rebate				
PRESSURE AS LEFT: PSI PSI PRESSURE AS LEFT: W.C.				
PIPING PRESSURE TEST				INV. TOTAL
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.

Matt Ray
SERVICE REP. SIGNATURE6-20-25
DATE

X

CUSTOMER SIGNATURE

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