CONGER LP GAS — FUELING LIFE

congerlpgas.com

INVOICE / WORK ORDER NO. 115686

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 Building Valdosta RT# ____ RT. SEQ. ____ ACCT # 4.20871 DATE 7-15-25 INT ____

MAILING ADDRESS 231 Northside Drive Valdosta, GA 31602 CO. ____ CITY ____

Job: ADDRESS 3039 Mary Powell APT/LOT NO. ____

CITY Hahira 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: buildingvaldosta@gmail.com
cell # 229-740-0978
PAY BILL ONLY ONLINE @congerlpgas.com

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED ____

Ready for Tank set, (2) THWH, Convect Range, Gas check. 10 gallons in tank

DIRECTIONS:

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
					MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
Set	120	1546473	100%	Rear	2025	2025			

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	Rinnai RL180E	RL180E	TR-UA-021752		1099 95
1	3/4 Leg				31 50
2	3/4" Nipple 3/4				1 40
2	Manifold regulators 1/2"				56 12
1	1/2" cutoff valve				15 07
1	Y46R				23 55
1	B46R				60 73
4	straight in 1/2"				81 84
1	1inch 3/4 nipple				1 93

WORK PERFOMED:

REGULATION INFORMATION
MAKE: MODEL:
DATE CODE: VENT:

	CODE	
APPLIANCES/ EQUIP. SOLD	WH	1099.95
PARTS/MAT. USED	MP	473.47
TANK RENT	MS	60.85
	CF	14.95
SALES TAX ____ %	SS.00 .080	37.88 4.56 1.20
LABOR 2man	3	540.00
	T/S	10.00
Rinnai Rebate		(200.00)
GPC Rebate		(400.00)
INV. TOTAL		2321.12
AMOUNT RECEIVED		

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: W.C.
TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE W.C.
AFTER 10 MINUTES:	PSI	PSI	AFTER 10 MINUTES: W.C.
PRESSURE AS LEFT:	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.

Seth Walker — SERVICE REP. SIGNATURE

7-21-25 — DATE

X ____ CUSTOMER SIGNATURE

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

3039 Mary Rose II

CONGER FUELING LIFE LP GAS

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Tifton, GA 31794	Sylvester, GA 31791	Vidalia, GA 30474	Moultrie, GA 31768	Valdosta, GA 31602
(229) 386-5574	(229) 776-7336	(912) 537-8722	(229) 985-6942	(229)469-4250

INVOICE / WORK ORDER NO. 115636

CONTINUATION SHEET

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

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	3/4 Black Tee					4	95
1	Flex Line water heater					8	31
1	3/4 bell reducer					2	93
2	1/2 Flare Nuts					3	90
36	1/2" copper					104	25
1	1/2" X48" appliance Conector					24	95

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

CONGER FUELING LIFE LP GAS

GASCheck® Safeguarding you and your propane system

Residential Gas Appliance System Check

Company/Location Conger / Valdosta

Call Date

Date GAS Check® Requested

Call-Taker's Name

Instructions

Account Number

Name JD Yeager

Address 3039 Mary Powell

City, State, Zip Hahira, GA

Telephone: Office Home

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Rinnai	GE		
Model No.			RE18e	GGS6OLAV2FS		
Serial No.			TB.4A-021752	GA0331666		
Fuel			LP	LP		
BTU Rating			180,000	75,000		
Manual Shut-off (Installed/Existing)			installed	installed		
Sediment Trap (Installed/Existing)			installed	—		
Control Mfr./Model No.			—	—		
Pilot(s)/Pilot Safety System			electric	electric		
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: TANK	PAINT	PIGTAIL	FITTINGS	GAUGE	RELIEF VALVE COND.	DATE	CAP	FITTINGS LEAK TEST
120	1546473	Quality	2025	2025	Rear	New	New	New	New	New	New	2024	Yes	Ok

PIPING/REGULATOR OPERATION/CONDITION

		PIPING MATERIAL	PIPING SIZE	REGULATOR MFR. DATE (CODE)	MFR.	REGULATOR CONDITION	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE	LOCK-UP PRESSURE
SINGLE STAGE		Copper	1/2"	03D2025	Rego	New	TR9	Down	Dome	9.5 ~~PSIG~~	10 ~~PSIG~~ IN WC
SECOND STAGE	1st	CSST	1/2"	04E2024	Rego	New	146R	Down	eve	1.5 PSIG	2 PSIG
	2nd	BI	3/4"	09D2024	Rego	New	B46R	Down	eve	11 IN WC	13 IN WC
THIRD STAGE		CSST	1/2"	unknown	maxitrol	New	1/2"	Horiz	attic	11 IN WC	13 IN WC

SYSTEM LEAK TEST

SINGLE STAGE/ INTEGRAL/ SECOND STATE		START PRESSURE (INCHES WC)	END PRESSURE (INCHES WC)	TIME HELD	SYSTEM OK
SECOND STAGE	1st	9.0wc	9.0wc	10mins	Ok
	2nd				
THIRD STAGE					

Comments

Reference Invoice No. Date

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, Cole Truett (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

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)

Cole Truett (Service Technician's Signature)