



congerlpgas.com

INVOICE / WORK ORDER NO.

115613

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 Joaquin Gonzales RT# _____ RT. SEQ. _____ ACCT # 4-20282 DATE 6-13-25 INT _____

Bill to: MAILING ADDRESS 3812 Sirmans Lane CO. _____ CITY _____

Job: ADDRESS 2302 Dukes Ave 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: landaverdejj@gmail.com cell # 229-237-0062

PAY BILL ONLINE @congerlpgas.com

SERVICE REQUESTED: CASH CHARGE DATE PROMISED _____

DIRECTIONS: Hang / RE180 ep, Pull permit, Tank
Set 120
10 gallons in tank

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
					MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
Set	120	1540A78							

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	Rinnai	RE180e	TB.4A-021745		1199.95
25'	1/2" Copper				123.75
2	1/2" fl nuts				5.90
1	1/2" cutoff				19.95
1	Regu B46R				79.95
1	3/4" Sediment trap				31.50

WORK PERFORMED: <u>Hang TWH, set tank, run lines, and hooked up. Safety check, systems</u>	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE	<u>WTH</u>	<u>1199.95</u>
MAKE: _____ MODEL: _____	DATE CODE: _____ VENT: _____	PARTS/MAT. USED		<u>MP</u>	<u>261.05</u>
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE		TANK RENT		<u>MS</u>	<u>302.60</u>
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:		CF			<u>16.95</u>
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>		SALES TAX		<u>96%</u>	<u>20.88</u>
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A PAMPHLET NUMBER 54 <input type="checkbox"/>		LABOR	<u>mun</u>	<u>2.5hr</u>	<u>250.00</u>
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.		FINISH		<u>1/5</u>	<u>10.00</u>
X _____ CUSTOMER SIGNATURE		START LOCK-UP: _____ PSI	START LOCK-UP: _____ PSI		<u>Rinnai Rebate (200.00)</u>
		TANK OFF: _____ PSI	TANK OFF: _____ PSI		<u>GPC Rebate (400.00)</u>
		AFTER 10 MINUTES: _____ PSI	AFTER 10 MINUTES: _____ PSI		<u>1984.10</u>
		PRESSURE AS LEFT: _____ PSI	PRESSURE AS LEFT: _____ PSI		<u>1879.30</u>
		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.

CL TWH
SERVICE REP. SIGNATURE

8/15/25
DATE

X

CUSTOMER SIGNATURE



Remodel Job



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 Joaquin Gonzales

Address 2302 Duker Ave

City, State, Zip Valdosta, GA

Telephone: Office Home

Table with columns: PERFORMANCE CHECK: ITEM, Central Heating 1, Room Heating 2, Water Heater 3, Range 4, Clothes Dryer 5, 6. Rows include Manufacturer (Rinnai), Model No. (RE180e), Serial No. (TR-4A-02745), Fuel (LP), BTU Rating (1801000), Manual Shut-off (Installed/Existing), Sediment Trap (Installed/Existing), Control Mfr./Model No., Pilot(s)/Pilot Safety System (Electric), Ignition System(s): Mfr./Model No. (Electric), Thermostats: Mfr./Model No., Burner(s)/Combustion Chamber (open), Venting System/Draft Diverter (open), Combustion Air (ambi).

TANK/CYLINDER (Additional Serial Numbers): Table with columns: 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. Row 1: 120, 1546478, Quality, 2025, 2025, Left, New, New, New, New, New, New, 2024, Yes, OK.

PIPING/REGULATOR OPERATION/CONDITION Table with columns: SINGLE STAGE, PIPING (MATERIAL, SIZE), REGULATOR MFR. DATE (CODE), MFR., REGULATOR CONDITION, MODEL, REG. VENT POSITION, HOW PROTECTED, FLOW PRESSURE, LOCK-UP PRESSURE. Rows for 1st and 2nd stages.

SYSTEM LEAK TEST Table with columns: SINGLE STAGE/INTEGRAL/SECOND STATE, START PRESSURE (INCHES WC), END PRESSURE (INCHES WC), TIME HELD, SYSTEM OK. Row 1: 9.0 WC, 9.0 WC, 10 mins, OK.

Comments

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.

Reference Invoice No. Date

I, Cole Truitt (please print name) certify that I have completed the System Check as prescribed.

- Performed Odor Test [X] Yes
Performed Leak/Pressure Test [X] Yes
Placed Safety Decal [X] Yes
Left Consumer Safety Information and Material [X] Yes

(Customer's Signature)

(Service Technician's Signature)