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INVOICE / WORK ORDER NO.

117195

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 Tammy/Jack Wilson RT# _____ RT. SEQ. _____ ACCT # 03-23672 DATE 9.17.25 INT 9/17/25

MAILING ADDRESS _____ CO. _____ CITY _____
ADDRESS 1783 Cook Rd APT/LOT NO. _____
CITY Moultrie STATE Ga ZIP CODE 31788

NEW CUSTOMER INFORMATION	
S.S. NO.	DELV
HOME PH	RENT
WORK PH	CREDIT
LITE PILOT	PC
EMPLOYER	
DR.	LEASE

SERVICE REQUESTED: CASH CHARGE DATE PROMISED _____

Hung Rinnai w/h

email: tammywilson@gmail.com
cell # 229-873-0900

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	<u>Rinnai Tankless w/h</u>	<u>RE180e</u>	<u>TD.UA-058720</u>		<u>1199.95</u>

WORK PERFORMED: <u>Hung w/h per customer - No gas in system yet</u>	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE
MAKE:	MODEL:	PARTS/MAT. USED	<u>WH 1199.95</u>
DATE CODE:	VENT:	TANK RENT	

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				SALES TAX	<u>CF 18.95</u>
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:				%	<u>1.52 96.00</u>
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>	LEAK AND PRESSURE TEST			LABOR	<u>LB 100.00</u>
	HIGH:	1st Stage	2nd Stage		
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A PAMPHLET NUMBER 54 <input type="checkbox"/>	START LOCK-UP:	PSI	PSI	START LOCK-UP:	W.C.
	TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE	W.C.
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	AFTER 10 MINUTES:	PSI	PSI	AFTER 10 MINUTES:	W.C.
	PRESSURE AS LEFT:	PSI	PSI	PRESSURE AS LEFT:	W.C.
PIPING PRESSURE TEST				INV. TOTAL	<u>1216.42</u>
START		PSIG	FINISH	PSIG	AMOUNT RECEIVED
				<u>GPC 200.00</u>	

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.
SERVICE REP. SIGNATURE [Signature] DATE 9.17.2025 x CUSTOMER SIGNATURE _____