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3117 Veterans Parkway S.
Moultrie, GA 31788
(229) 985-6942

2310-B Highway 84 W
Valdosta, GA 31602
(229) 469-4250

NAME Classic Homes by Weaver RT# _____ RT. SEQ. _____ ACCT # 04.19957 DATE 10.2.25 INT PH

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 208 Baell Trace Court APT/LOT NO. _____

CITY Moultrie STATE Ga ZIP CODE _____

NEW CUSTOMER INFORMATION

S.S. NO. _____ DELV _____

HOME PH _____ RENT _____

WORK PH _____ CREDIT _____

LITE PILOT _____ PC _____

EMPLOYER _____

DR. _____ USE _____ LEASE _____

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____

email: _____

cell # _____

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
<u>TS</u>	<u>120</u>	<u>1528468</u>	<u>10gal</u>	<u>AG on Site</u>					

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>1</u>	<u>Rinnai Tankless Water Heater</u>	<u>RE180e</u>	<u>TDUA-058718</u>		<u>899 95</u>
<u>15</u>	<u>3/8 Copper</u>				<u>33 60</u>
<u>2</u>	<u>3/8 Flare Nuts</u>				<u>2 16</u>
<u>1</u>	<u>Sediment Trap</u>				<u>21 83</u>
<u>1</u>	<u>BT6R Regulator</u>				<u>58 11</u>
<u>1</u>	<u>Cutoff Valve</u>				<u>13 11</u>
<u>1</u>	<u>MIP</u>				<u>1 99</u>

WORK PERFORMED: <u>Set 120 for Rinnai</u>	REGULATION INFORMATION		APPLIANCES/EQUIP. SOLD	CODE	<u>WH 899.95</u>	
<u>No leaks in system</u>	MAKE: <u>Rego</u>	MODEL: <u>TR9</u>	PARTS/MAT. USED	<u>MP</u>	<u>130.80</u>	
	DATE CODE <u>05D2025</u>	VENT: <u>Down</u>	TANK RENT	<u>MS</u>	<u>16.85</u>	
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE					<u>CF</u>	<u>18 95</u>
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:			LEAK AND PRESSURE TEST		SALES TAX	<u>1.35 72.00</u>
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐	HIGH:		1st Stage	2nd Stage	LOW	<u>1.52 10.46</u>
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐	START LOCK-UP:		<u>10</u> PSI	<u>PSI</u>	W.C.	<u>LB 150.00</u>
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	TANK OFF: PRESSURE		<u>6</u> PSI	<u>PSI</u>	W.C.	<u>GR 200.00</u>
	AFTER 10 MINUTES:		<u>6</u> PSI	<u>PSI</u>	W.C.	<u>GPC (200.00)</u>
	PRESSURE AS LEFT:		<u>10</u> PSI	<u>PSI</u>	W.C.	
X	CUSTOMER SIGNATURE		PIPING PRESSURE TEST		INV. TOTAL	<u>1301.88</u>
	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.

SERVICE REP. SIGNATURE

10.2.2025
DATE

CUSTOMER SIGNATURE

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