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INVOICE / WORK ORDER NO.

118151

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 10 mile Construction RT# _____ RT. SEQ. _____ ACCT # 4.20995 DATE 9-25-25 INT RMMAILING ADDRESS Cole Livingston
930 W Hwy 64, Lakeland CO. _____ CITY _____

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

Job: 222 Langford
ADDRESS _____ APT/LOT NO. _____CITY Nashville STATE GA ZIP CODE _____SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____email: tenmilecreek111@aol.comcell # 229-292-4635

PAY BILL ONLINE @congerlpgas.com

DIRECTIONS: Ready for Tankers and Tank set.
<10 gal>

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
<u>Set</u>	<u>120</u>	<u>1546513</u>			MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>1</u>	<u>Binnai</u>	<u>R8160</u>	<u>PB.0A-049594</u>		<u>999.95</u>
<u>1</u>	<u>Dr. Pleg</u>				<u>31.50</u>
<u>1</u>	<u>B46R</u>				<u>79.95</u>
<u>1</u>	<u>1/2 cutoff</u>				<u>19.95</u>
<u>20</u>	<u>1/2 COPPER</u>				<u>99.08</u>
<u>2</u>	<u>1/2 flare nuts</u>				<u>5.90</u>

WORK PERFORMED:	REGULATION INFORMATION		APPLIANCES/EQUIP. SOLD	CODE	999.95
	MAKE:	MODEL:	PARTS/MAT. USED	MP	236.30
	DATE CODE:	VENT:	TANK RENT	MS	24.98
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE					CF 18.95
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:			SALES TAX	80%	18.90
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐	LEAK AND PRESSURE TEST				2.00
	HIGH:	1st Stage	2nd Stage	LOW	1.52
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐	START LOCK-UP:	PSI	PSI	START LOCK-UP:	W.C. LABOR 2 1hr 180.00
	TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE	W.C. CPC Debate (400.00)
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	AFTER 10 MINUTES: PRESSURE AS LEFT:	PSI	PSI	AFTER 10 MINUTES: PRESSURE AS LEFT:	W.C. Binnai Debate (200.00)
X	CUSTOMER SIGNATURE		PIPING PRESSURE TEST		INV. TOTAL 1562.60
	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.

Seth Weeks

SERVICE REP. SIGNATURE

9-25-25

DATE

x

CUSTOMER SIGNATURE



Residential Gas Appliance System Check

Company/Location Conger/Valdosta

Call Date 9-25-25

Date GAS Check® Requested

Call-Taker's Name

Instructions

Account Number

Name Cole Livingston

Address 222 Langford

City, State, Zip Nashville, GA

Telephone: Office _____ Home _____

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Burner			
Model No.			Bell			
Serial No.			PG-4A-049594			
Fuel			LP			
BTU Rating			160,000			
Manual Shut-off (Installed/Existing)			inst			
Sediment Trap (Installed/Existing)			inst			
Control Mfr./Model No.						
Pilot(s)/Pilot Safety System			OK			
Ignition System(s): Mfr./Model No.			electr			
Thermostats: Mfr./Model No.						
Burner(s)/Combustion Chamber			open			
Venting System/Draft Diverter			open			
Combustion Air			ambi			
Red Tag (removed from service)/Recall						

TANK/CYLINDER (Additional Serial Numbers):	

SIZE	SERIAL NUMBER	MFR.	MFR. DATE	LAST TEST DATE	LOCATION	CONDITION OF:					RELIEF VALVE			FITTINGS LEAK TEST
						TANK	PAINT	PIGTAIL	FITTINGS	GAUGE	COND.	DATE	CAP	
120	154653	Quality	2025	2025	back	/	/	/	/	/	/	25	/	/
PIPING/REGULATOR OPERATION/CONDITION														

PIPING/REGULATOR OPERATION/CONDITION

SINGLE STAGE		PIPING		REGULATOR MFR. DATE (CODE)	MFR.	REGULATOR CONDITION	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE	LOCK-UP PRESSURE
		MATERIAL	SIZE								
SECOND STAGE	1st	Copper	1/2	05D25	Rego	✓	TRG	Hor	1/2	10 IN WC	10 IN WC
	2nd	Black	3/4	09D24	Rego	✓	B46R	vert	none	10 PSIG	10 PSIG
THIRD STAGE										11 IN WC	15 IN WC
SYSTEM LEAK TEST										IN WC	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				
	2nd	8	8	10 min	OK
THIRD STAGE					

Comments

Reference Invoice No. _____ Date _____

I, SETH W. GIB (please print name)
certify that I have completed the System Check as prescribed.

Performed Odor Test

Performed Leak/Pressure Test

Placed Safety Decal

Left Consumer Safety Information and Material ☒ Yes

[Signature]
(Service Technician's Signature)

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.

(Customer's Signature)

(Service Technician's Signature)