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111467

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

NAME Glenn Golden RT# _____ RT. SEQ. _____ ACCT # 03-22456 DATE 10-4-24 INT 10

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 282 Lilliquin dr APT/LOT NO. _____

CITY Thomasville STATE GA ZIP CODE 31757

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____

Set tank Water Heaters

DIRECTIONS:

Needs gas order

NEW CUSTOMER INFORMATION

S.S. NO. _____ DELV _____

HOME PH. _____ RENT _____

WORK PH. _____ CREDIT _____

LITE PILOT _____ PC _____

EMPLOYER _____

DR. _____ USE _____ LEASE _____

email:

cell # 229-622-1783

PAY BILL ONLINE @congerlpgas.com

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
TS	250	1K03724			MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	Reg RX 160 in		RLBA-131886		1599.95
3	Reg				239.85
2	Short off's				39.90
70	1/2" Poly				45.50
20	3/4" Trace				159.00
2	Straight Fittings				79.90
1	Misc Iron				60.00
	Trencher				160.00
2	Copper Cents				59.90

WORK PERFORMED:	REGULATION INFORMATION		APPLIANCES/EQUIP. SOLD	CODE
	MAKE: <u>Rego</u>	MODEL: <u>TR9</u>	PARTS/MAT. USED	WA 1599.95
	DATE CODE: <u>LP-24</u>	VENT: <u>Hor</u>	TANK RENT	MP 684.05
				MS 62.64
				CF 14.95

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:	135 W.C.
TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE	9 W.C.
AFTER 10 MINUTES:	PSI	PSI	AFTER 10 MINUTES:	9 W.C.
PRESSURE AS LEFT:	PSI	PSI	PRESSURE AS LEFT:	13.5 W.C.

PIPING PRESSURE TEST

START PSIG FINISH PSIG

SALES TAX	1.05	11.20	112.00
	11.20	11.60	4.38
LABOR	LB	360	00
	EQ	160	00
	TR	20	00
INV. TOTAL	GPC	200.00	
AMOUNT RECEIVED		2937.42	

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

DATE

X

CUSTOMER SIGNATURE



Residential Gas Appliance System Check

Company/Location Conger Moultrie
Call Date _____
Date GAS Check® Requested _____
Call-Taker's Name _____
Instructions _____

Account Number 03-22456
Name Glenn Golden
Address 282 Lillian dr
City, State, Zip Thomasville GA 31757
Telephone: Office _____ Home _____
229-622-1783

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	Generator
Manufacturer			Rinnai			Generac
Model No.			RX160			24kw
Serial No.			RLBA-131886			3015427865
Fuel			LP			LP
BTU Rating			160000			355000
Manual Shut-off (Installed/Existing)			Ins			Ins
Sediment Trap (Installed/Existing)			Ins			Ins Ext
Control Mfr./Model No.			—			—
Pilot(s)/Pilot Safety System			—			—
Ignition System(s): Mfr./Model No.			Auto			Auto
Thermostats: Mfr./Model No.			yes			—
Burner(s)/Combustion Chamber			Chamber			Chamber
Venting System/Draft Diverter			Vertical			Outside
Combustion Air			Ambient			Ambient
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	
250	1K0324	Ampro	87	23	OK	OK	OK	OK	OK	OK	OK	23	OK	OK

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	Poly	1/2"	4-24	Rego	New	TR9	Hor	1id	IN WC	IN WC
	2nd	Iron	3/4"	4-23	Rego	New	Y9	Vert	Eve	PSIG	PSIG
THIRD STAGE		Iron	3/4"	3-24	Rego	New	B46R	Vert	Eve	11.4 IN WC	13.5 IN WC

SYSTEM LEAK TEST

SINGLE STAGE/ INTEGRAL/ SECOND STATE	START PRESSURE	END PRESSURE	TIME HELD	SYSTEM OK
	(INCHES WC)	(INCHES WC)		
SECOND STAGE	1st			
	2nd			
THIRD STAGE	9"	9"	10min	OK

Comments _____
Reference Invoice No. 111467 Date 1-2-25

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.

I, _____ (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

(Customer's Signature)

(Service Technician's Signature)