CONGER FUELING LIFE LP GAS

congerlpgas.com

INVOICE / WORK ORDER NO. 111668

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 Ryan Goble RT# ____ RT. SEQ. ____ ACCT # 4-22651 DATE 11/11/24 INT KS

MAILING ADDRESS ____ CO. ____ CITY ____

ADDRESS 5710 JP Carter Rd. APT/LOT NO. ____

CITY Naylor STATE GA ZIP CODE 31641

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 ____

Tank set 120 + tankless water heater

email:
cell # 229-292-8087
PAY BILL ONLINE @congerlpgas.com

DIRECTIONS: Set tank Hung tankless W/H. Tied together and Safety Check - OK. Customer Has Southern Quality - 60 gallon for logs. Will come Back after tank emptied. and tie into Our System. 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	1525705							

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	Rinnai	RL75e	PB.CA-028531		999 99
1	B46R				79 99
1	3/4 Sediment trap				31 50
1	1/2 FL X 1/2 mpt Cutoff				19 99
2	1/2 FL nut				4 90
15	ft 1/2 copper				74 25
	GPC Rebate				-400 00
				MS	34 24

WORK PERFOMED:

REGULATION INFORMATION
MAKE: MODEL:
DATE CODE: VENT:

	CODE	
APPLIANCES/ EQUIP. SOLD	AP	999 99
PARTS/MAT. USED	MP	210 63
TANK RENT	TR	10 00
	CF	14 95
SALES TAX ____ %		2.74 80 00 1.20 16 85 .80 3 12
LABOR 2 man	2 hours	360 00
	01	38 99
INV. TOTAL		1773.51
AMOUNT RECEIVED GPC Rebate		-400.00 1373.51

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

PIPING PRESSURE TEST
START PSIG FINISH PSIG

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 11-21-24 X ____ CUSTOMER SIGNATURE

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