CONGER FUELING LIFE **LP GAS**

congerlpgas.com

INVOICE / WORK ORDER NO. 105493

146 S. Ridge Ave. Tifton, GA 31794 (229) 386-5574 | 2840 Hwy 82 W. Sylvester, GA 31791 (229) 776-7336 | 604-B N. Broadfod Blvd. Vidalia, GA 30474 (912) 537-8722 | 3117 Veterans Parkway S. Moultrie, GA 31768 (229) 985-6942

NAME MTB INVESTMENTS RT# ____ RT. SEQ. ____ ACCT # 2-18262 DATE 8-2-24 INT JS

MAILING ADDRESS 243 Sawyer Rd. CO. ____ CITY ____

ADDRESS ____ APT/LOT NO. ____

CITY Sylvester STATE GA ZIP CODE 31791

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

email: USROD1972@gmail.co
cell # 334-797-8338

PAY BILL ONLINE @congerlpgas.com

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED ____

(1) 219 HANSEL Rd
(2) 215 HANSEL Rd

DIRECTIONS: Install tankless
Hansel Rd

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
	Rinna tankless (215)	RL75E	PBCA-030503		999 95
	Rinnai tankless (219)	RL75E	PBCA-031105		999 95
				(WH)	1999 90

WORK PERFOMED: hang water heater on wall / installed

REGULATION INFORMATION
MAKE: ____ MODEL: ____
DATE CODE: ____ VENT: ____

	CODE	
APPLIANCES/ EQUIP. SOLD		
PARTS/MAT. USED		
TANK RENT		
	ct	14 95
SALES TAX ____ %		160 00
		1 20
LABOR		100 00
	GR	(200 00)
	GR	(200 00)
INV. TOTAL		1876.05
AMOUNT RECEIVED		

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 8-2-24 X ____ CUSTOMER SIGNATURE

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