



congerlpgas.com

INVOICE / WORK ORDER NO.

116328

146 S. Ridge Ave.
Tifton, GA 31794
(229) 386-5574306 S. Main St.
Sylvester, GA 31791
(229) 776-7336604-B N. Broadfoot Blvd.
Vidalia, GA 30474
(912) 537-87223117 Veterans Parkway S.
Moultrie, GA 31788
(229) 985-69422310-B Highway 84 W
Valdosta, GA 31602
(229) 469-4250NAME Harry Duncan RT# _____ RT. SEQ. _____ ACCT # 04-23083 DATE 2-20-25 INT _____

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 2014 Tottenham Dr. APT/LOT NO. _____CITY Hahira STATE GA ZIP CODE _____SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____

NEW CUSTOMER INFORMATION

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

email: _____

cell # _____

PAY BILL ONLINE @congerlpgas.com

DIRECTIONS:

Run new line to TktWH.
Blk iron drop down into Garage. Update Gas check.

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
1	Rinnai	Rep160	PK. UA-111381		999.95
33'	3/4 CSST				437.25
1	3/4-1/2 Straight end				39.95
2	1/2 Straights				79.90
1	1/2 Black T				3.95
4	3/4 Straights				179.80
1	3/4 coupling				3.95
1	3/4 elbow				3.95
93"	3/4 Black				29.62

WORK PERFORMED:	REGULATION INFORMATION		APPLIANCES/ EQUIP. SOLD	CODE	
	MAKE:	MODEL:	PARTS/MAT. USED	MP	899.32
	DATE CODE:	VENT:	TANK RENT	MS	76.48
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE					OF 14.95
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:			SALES TAX	80.00	6.40
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>			%	71.58	1.20
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>			LABOR	2hr	360.00
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.					100.00
X _____			INV. TOTAL		2505.00
CUSTOMER SIGNATURE			AMOUNT RECEIVED		
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

CUSTOMER SIGNATURE

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



Company/Location Conger / W9 / destn
 Call Date 3-7-25
 Date GAS Check® Requested _____
 Call-Taker's Name _____
 Instructions _____

Account Number 4-230 83
Name Harry Duncan
Address 2014 Tottenham
City, State, Zip Hahira, GA
Telephone: Office _____ Home 229-412-3712

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	Generator 6
Manufacturer			Rinnai	Wolf		Kohler
Model No.			REP160c	DF30450SP		CH100bEP
Serial No.			PK.UA-111381	306033241153		5434812243
Fuel			LP	LP		LP
BTU Rating			160,000	60,000		350,000
Manual Shut-off (Installed/Existing)			Existing	Existing		Existing
Sediment Trap (Installed/Existing)			Existing			Existing
Control Mfr./Model No.						
Pilot(s)/Pilot Safety System			electric	electric		electric
Ignition System(s): Mfr./Model No.			electric	electric		electric
Thermostats: Mfr./Model No.						
Burner(s)/Combustion Chamber			open	open		open
Venting System/Draft Diverter			Exterior	open		open
Combustion Air						
Red Tag (removed from service)/Recall						

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	
420	2594542	Worthington	2024	2024	Left	N	N	N	N	N	N	24	yes	OK
420	2594648	Worthington	2024	2024	Left	N	N	N	N	N	N	24	yes	OK

SINGLE STAGE	PIPING		REGULATOR MFR. DATE (CODE)	MFR.	REGULATOR CONDITION	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE	LOCK-UP PRESSURE	
	MATERIAL	SIZE									
									IN WC	IN WC	
SECOND STAGE	1st	Copper	1/2	09 D 24	Rego	N	TR9	Horizon	Done	8 PSIG	10 PSIG
	2nd	Iron	3/4	04 P 24	Rego	N	Y46B	Down	Eve	1.5 PSI IN WC	2.0 PSI IN WC
THIRD STAGE		Iron	3/4	04 C 24	Rego	N	B46B	Down	Open	11 IN WC	13 IN WC

SINGLE STAGE/ INTEGRAL/ SECOND STATE		START PRESSURE (INCHES WC)	END PRESSURE (INCHES WC)	TIME HELD	SYSTEM OK
SECOND STAGE	1st	9.0wc	9.0wc	10	yes
	2nd				
THIRD STAGE					

Comments

Reference Invoice No. _____ **Date** _____

I, Harvey J. Mingo (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.

Reference Invoice No. _____ Date _____
I, Matthew Ray (please print name)
certify that I have completed the System Check as prescribed.

Performed Odor Test	<input checked="" type="checkbox"/> Yes
Performed Leak/Pressure Test	<input checked="" type="checkbox"/> Yes
Placed Safety Decal	<input checked="" type="checkbox"/> Yes
Left Consumer Safety Information and Material	<input checked="" type="checkbox"/> Yes

(Service Technician's Signature)

Required Safety inspections

This page must be completed and included with the rebate application. Failure to include this page will automatically disqualify the customer for the safety rebate.

Test	Beginning Pressure	Ending Pressure	Test Duration
Pressure test (when required by code or local authority)	9.0	9.0	10 min
Leak test	9.0	9.0	10 min
Flow test			
Lock-up pressure			

Technician's Certification: I, Matt Ray, certify that the above tests were performed and the results were recorded correctly.

Date of Inspection: 3/11/25

Propane Dealer's Signature: Matt Ray

This paperwork must be submitted to the GA Propane Commission within 30 days of appliance inspection date to receive rebate.

Disclaimer:

The propane dealer seeking a rebate must submit a full and complete Application form. Submission of the Application form constitutes a representation on the part of the participating propane dealer that the work shown on the form has actually been completed. A safety inspection must be performed by the participating propane dealer after the installation of each new qualifying appliance(s) and the result of that inspection must be documented on the Application form. The safety inspection for qualifying appliance installations must, at a minimum, include the following: 1) a leak test; 2) a pressure test if required by applicable laws, rules and regulations; and 3) a flow and lock up test on the regulator[s]. The propane dealer agrees to comply with all laws, rules and regulations governing the installation of the qualifying appliance and with the manufacturer's installation instructions. The Southeast Propane Alliance and GA Propane Commission assumes no responsibility whatsoever for the installation, inspection, or testing of the qualifying appliance(s) or any associated gas system and, by issuing a rebate, makes no representation, warranty or guarantee regarding the qualifying appliance(s) or the associated gas system. The Southeast Propane Alliance and GA Propane Commission disclaims any liability for any personal injury, property damage, business losses or other damages of any nature whatsoever, whether special, indirect, consequential or compensatory, directly or indirectly arising from the installation of the qualifying appliance(s).

Please submit your 2-page rebate form and receipt(s) to:

Mail: GA Propane Commission
5109 Hollyridge Dr.
Raleigh, NC 27612

Fax: 919 781-7481

Email: info@gapropanerebates.com

As of: 03/01/2023