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111736

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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 Terry Hurst RT# _____ RT. SEQ. _____ ACCT # 3-22044 DATE 04-03-25 INT TJ

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 227 S. Green St APT/LOT NO. _____

CITY Boston STATE GA ZIP CODE _____

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 _____

email: _____

cell # _____

PAY BILL ONLINE @congerlpgas.com

DIRECTIONS: _____

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
					MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
Set	120	1525638	10	601104					

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
55'	1/2" Poly				22.00
50'	3/4" Poly				32.50
10'	1/2" Copper				49.50
2	1/2" Poly x 1/2" Copper Certs				139.90
2	1/2" fl nuts				5.90
1	1/2" fl x 1/2" mpt Cutoff				19.99
1	Rego Y46R				64.95
2	3/4" Street elbows				7.90
1	3/4" x 12" BI Nipple				6.95

WORK PERFORMED: Set tank, dug trench

REGULATION INFORMATION

MAKE: _____ MODEL: _____

DATE CODE: _____ VENT: _____

APPLIANCES/
EQUIP. SOLD

CODE

PARTS/MAT.
USED

MP

TANK RENT

MS

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:

LEAK AND PRESSURE TEST

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

HIGH: 1st Stage 2nd Stage LOW

START LOCK-UP: PSI PSI START LOCK-UP: W.C. LABOR

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

INV. TOTAL

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.

SERVICE REP. SIGNATURE

DATE

CUSTOMER SIGNATURE

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



2310-B Highway 84 W
Valdosta, GA 31602
(229)469-4250

11736

NAME Terry Hurst RT # _____ RT. SEQ. _____ ACCT # _____ DATE 11/23/24 INT _____

REGULATOR INFORMATION			MAKE:			MODEL:			DATE CODE:			VENT:	
LEAK AND PRESSURE TEST		START LOCK UP:	PSI	TANK OFF PRESSURE:	PSI	AFTER 10 MINUTES:	PSI	PRESSURE AS LEFT:	PSI	PIPING PRESSURE TEST			
		STOCK LOCK UP:	W.C.	TANK OFF PRESSURE:	W.C.	AFTER 10 MINUTES:	W.C.	PRESSURE AS LEFT:	W.C.	START	PSIG	FINISH	PSIG

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