



congerlpgas.com

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Tifton, GA 31794
(229) 386-5574306 S. Main St.
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(912) 537-87223117 Veterans Parkway S.
Moultrie, GA 31788
(229) 985-69423310-B Highway 84 W
Valdosta, GA 31602
(229) 469-4250

INVOICE / WORK ORDER NO.

116384

NAME Overs Vinyl RT# _____ RT. SEQ. _____ ACCT # _____ DATE 1-25 INT _____

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 3923 Lu Lane APT/LOT NO. _____CITY Valdosta Ga STATE _____ 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	20	11-174146	33%						

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	B46R				58.11
1	DISP100				21.83
1	3/8 cut off				13.11
1	Refriger	REP160	PK.UA-111389		899.95
15	Appar				33.60
2	Accessories				2.16
1	Permit				77.62
1	3/8 x 1/2 MIP				1.99

WORK PERFORMED	REGULATION INFORMATION		APPLIANCES/ EQUIP. SOLD	CODE
	MAKE:	MODEL:	PARTS/MAT. USED	
	DATE CODE:	VENT:	TANK RENT	

SERVICE MAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

SERVICE MAN TO COMPLETE IN PRESENCE OF CUSTOMER:		LEAK AND PRESSURE TEST		SALES TAX _____ %
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.E.P.A. PAMPHLET NUMBER 58 ☐	HIGH:	1st Stage	2nd Stage	LOW
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.E.P.A. PAMPHLET NUMBER 54 ☐	START LOCK-UP:	PSI	PSI	START LOCK-UP:
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	TANK OFF:	PSI	PSI	TANK OFF:
	PRESSURE	PSI	PSI	PRESSURE
	AFTER 10 MINUTES:	PSI	PSI	AFTER 10 MINUTES:
	PRESSURE AS LEFT:	PSI	PSI	PRESSURE AS LEFT:
X _____	PIPING PRESSURE TEST		INV. TOTAL	
CUSTOMER SIGNATURE	START	PSIG	FINISH	PSIG
			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