



113802

Application l Rinnai GPC
 Gas Check ✓ Warranty customer Inv l
 New Cust Pkg l 5 Yr l Letter ✓
 Lease/Rent/Amt l l l l

3117 Veterans Parkway S.
 Moultrie, GA 31788
 (229) 985-6942

831-5964 146 S. Ridge Ave.
 Tifton, GA 31794
 (229) 386-5574

NAME Dawn Stewart RT# AM RT. SEQ. 0054 ACCT # 1-50286 DATE 4/11/25 INT SR

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 326 Crystal Lake Rd APT/LOT NO. _____

CITY Rebeem STATE GA ZIP CODE 31783

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: KatrinaStewart@gmail.com

cell # 229-831-5964

PAY BILL ONLINE @congerlpgas.com

DIRECTIONS:

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
<u>DOT</u>			<u>✓</u>	<u>ONSITE</u>	MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
	<u>Rinnai</u>	<u>REP160C</u>	<u>PKUA113458</u>		<u>999.95</u>
	<u>E9 Reg</u>				<u>129.95</u>
<u>2</u>	<u>1/2" MARI</u>			<u>179.95</u>	<u>359.90</u>
<u>1</u>	<u>Sediment Trap</u>				<u>50.00</u>
<u>1</u>	<u>PITTS</u>				<u>1300.00</u>
	<u>PLUMBING</u>				<u>100.00</u>
	<u>misc supplies</u>				<u>43.43</u>
	<u>MRP</u>				<u>3.95</u>

WORK PERFORMED:	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE	SALES AMOUNT
<u>Installed</u>	MAKE: <u>Rinnai</u> MODEL: <u>E9</u>	PARTS/MAT. USED	<u>MP</u>	<u>363.85</u>
	DATE CODE: <u>11A203</u> VENT: <u>DOWN</u>	TANK RENT		

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:	LEAK AND PRESSURE TEST	SALES TAX	LABOR	SALES AMOUNT
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐	HIGH: 1st Stage 2nd Stage LOW	<u>8</u> %	<u>LB</u>	<u>360.00</u>
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐	START LOCK-UP: <u>11</u> PSI PSI START LOCK-UP: _____ W.C.	<u>06</u>	<u>MS</u>	<u>43.43</u>
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	TANK OFF: <u>9</u> PSI PSI TANK OFF: _____ W.C.			
	AFTER 10 MINUTES: <u>9</u> PSI PSI AFTER 10 MINUTES: _____ W.C.			
	PRESSURE AS LEFT: <u>11</u> PSI PSI PRESSURE AS LEFT: _____ W.C.			
X _____	PIPING PRESSURE TEST	INV. TOTAL		<u>1,895.94</u>
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.

Eric Finkbeiner
 SERVICE REP. SIGNATURE

4-11-25
 DATE

X

 CUSTOMER SIGNATURE