



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

306 S
Sylveste
(229)

Application Rinnai GPC
Gas Check Warranty Inv J
New Cust Pkg 1 5 Yr Letter
Lease/Rent/Amt l / l / l

INVOICE / WORK ORDER NO.

113605

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

NAME KIRK LAW RT# AA RT. SEQ. _____ ACCT # 01-21643 DATE 4-15-25 INT EP

MAILING ADDRESS Kirk's house CO. _____ CITY _____

ADDRESS 88 Chula Whidden Mill Rd APT/LOT NO. _____

CITY Chula STATE GA ZIP CODE 31733

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: lawsoncompany@gmail.com
cell # 229-397-9362

PAY BILL ONLINE @ congerlpgas.com

DIRECTIONS:

INSTALL REP160

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
	<u>120</u>	<u>682304</u>	<u>100</u>	<u>ON SITE</u>	MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>1</u>	<u>Rinnai</u>	<u>REP160</u>	<u>TBUA022648</u>		<u>1199.95</u>
	<u>Plumbing Parts</u>				<u>49.95</u>
	<u>misc supplies</u>				<u>9.00</u>

WORK PERFORMED:	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE	
<u>Install Rinnai</u>	MAKE: <u>Rinnai</u> MODEL: <u>TR7</u>	PARTS/MAT. USED	<u>WH</u>	<u>1,199.95</u>
	DATE CODE: <u>802024</u> VENT: <u>DOWN</u>	TANK RENT	<u>MP</u>	<u>49.95</u>

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:		LEAK AND PRESSURE TEST		SALES TAX		
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>		HIGH: 1st Stage 2nd Stage LOW		<u>8</u> %	<u>08</u>	<u>96.00</u> <u>1.20</u>
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>		START LOCK-UP: <u>4</u> PSI PSI	START LOCK-UP: W.C.	LABOR	<u>CB</u>	<u>100.00</u>
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.		TANK OFF: PRESSURE <u>9</u> PSI PSI	TANK OFF: PRESSURE W.C.		<u>ms</u>	<u>9.00</u>
		AFTER 10 MINUTES: <u>9</u> PSI PSI	AFTER 10 MINUTES: W.C.	<u>GPC</u>	<u>GR</u>	<u>(400.00)</u>
		PRESSURE AS LEFT: <u>11</u> PSI PSI	PRESSURE AS LEFT: W.C.			
X _____ CUSTOMER SIGNATURE		PIPING PRESSURE TEST		INV. TOTAL		<u>1,075.77</u>
		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 [Signature]
SERVICE REP. SIGNATURE

4-15-25
DATE

X _____
CUSTOMER SIGNATURE