

1st



INVOICE / WORK ORDER NO.

137219

Contractor

NAME Jmc Construction RT# _____ RT. SEQ. _____ ACCT # 23592 DATE 9-18-26 INT 10A

MAILING ADDRESS (*) New Build (*) CO. _____ CITY _____
Job: 3904 MJ Taylor Rd APT/LOT NO. _____
CITY Adel 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 _____

(*) Rough In (*) call Johnathon M.
for info.
DIRECTIONS: THWH Range #4 bollons in Tank*
BE199

email: _____
cell # 229-506-0375
PAY BILL ONLINE @congerlpgas.com

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
<u>T/S</u>	<u>120</u>	<u>1546546</u>			MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

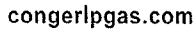
QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>1</u>	<u>Rinnai TWH</u>	<u>RE1992</u>	<u>WE-DA-00</u>		<u>1599 95</u>
<u>1</u>	<u>3/4 Sediment Trap</u>		<u>WE-DA-056930</u>		<u>34 95</u>
<u>2.15</u>	<u>Feet 1/2 Poly Pipe</u>				<u>182 75</u>
<u>1</u>	<u>1/2 Poly Tee</u>				<u>94 95</u>
<u>3</u>	<u>1/2 copper Sect</u>				<u>284 85</u>
<u>2</u>	<u>1/2 FL Nuts</u>				<u>5 90</u>
<u>1</u>	<u>3/8 FL Nut</u>				<u>1 95</u>
<u>10</u>	<u>Feet 1/2 copper</u>				<u>79 50</u>
<u>5</u>	<u>Feet 3/8 copper</u>				<u>29 75</u>

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

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE					CF	
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:					SALES TAX	
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐					128	1599 95
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐					13.20	1176 70
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.						128 20
X						18 95
CUSTOMER SIGNATURE						94.14
						10.26
						1.52
						960 00
						165 00
						100.00
						200.00
						4154.92
						4295.92

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.

Cole/Lane/Horley 9-22-26 x _____
SERVICE REP. SIGNATURE DATE CUSTOMER SIGNATURE



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

137219

NAME JMC Construction RT# _____ RT. SEQ. _____ ACCT# _____ DATE _____ INT _____

[illegible]

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

WHITE/FILE COPY: YELLOW/CUSTOMER COPY: PINK/POSTING/OFFICE COPY



Residential Gas Appliance System Check

Account Number _____
Name Johnathan Myers
Address 3904 MJ Taylor Rd
City, State, Zip Adel GA
Telephone: Office _____ Home _____

Company/Location Va/dosta
Call Date _____
Date GAS Check® Requested _____
Call-Taker's Name _____
Instructions _____

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Rinnai	Frigidaire		
Model No.			RE199e	GCEG3060BFE		
Serial No.			WENA-05693	VF61273064		
Fuel			LP	LP		
BTU Rating			199,000	88,500		
Manual Shut-off (Installed/Existing)			Installed	Installed		
Sediment Trap (Installed/Existing)			Installed	—		
Control Mfr./Model No.			—	—		
Pilot(s)/Pilot Safety System			OK	OK		
Ignition System(s): Mfr./Model No.			electric	electric		
Thermostats: Mfr./Model No.			—	—		
Burner(s)/Combustion Chamber			OPEN	open		
Venting System/Draft Diverter			OPEN	open		
Combustion Air			Qmbi	Qmbi		
Red Tag (removed from service)/Recall			—	—		

TANK/CYLINDER (Additional Serial Numbers):

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	
120	1546546	QUALITY Steel	2025	2026	Back	New	new	new	new	new	new	25	yes	OK

PIPING/REGULATOR OPERATION/CONDITION

SINGLE STAGE		PIPING		REGULATOR MFR. DATE (CODE)	MFR.	REGULATOR CONDITION	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE	LOCK-UP PRESSURE
		MATERIAL	SIZE								
SECOND STAGE	1st	Poly	1/2	05E2026	Rego	new	TR9	Down	lid	9.5 PSIG	10 PSIG
	2nd	CSST	1/2	0702026	Rego	new	B46R	Down	eve	11 IN WC	13 IN WC
THIRD STAGE		Bi	3/4	09A2024	Rego	new	B66	Down	eve	11 IN WC	13 IN WC

SYSTEM LEAK TEST

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

Comments _____

Reference Invoice No. _____ Date 09/24/26

This inspection covers (propane/LP-gas) items and equipment visible and accessible to the service technician and represents the conditions existing on the date of inspection. It does not cover latent or manufacturing defects, the internal working of sealed equipment, or structural components, and cannot be construed to cover future or unforeseen happenings.

I, _____ (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.

(Customer's Signature)

I, Lane Hall (please print name)
certify that I have completed the System Check as prescribed.

Performed Odor Test ☒ Yes
Performed Leak/Pressure Test ☒ Yes
Placed Safety Decal ☒ Yes
Left Consumer Safety Information and Material ☒ Yes

Lane Hall
(Service Technician's Signature)