



congerlpgas.com

INVOICE / WORK ORDER NO.

119854

146 S. Ridge Ave.
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

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

NAME Owens Vinyl RT# _____ RT. SEQ. _____ ACCT # 20152 DATE 9/14/24 INT RM

MAILING ADDRESS _____ CO. _____ CITY _____ S.S. NO. _____ DELV _____
ADDRESS 314 Barry Field APT/LOT NO. _____ HOME PH _____ RENT _____
CITY Hahira STATE GA ZIP CODE _____ WORK PH _____ CREDIT _____
LITE PILOT _____ PC _____
EMPLOYER _____
DR. _____ USE _____ LEASE _____

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____ email: _____
cell # _____
PAY BILL ONLINE @congerlpgas.com

DIRECTIONS: Hang RE160e, put line in ground for inspection.

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
					MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
1	Rinnai	RE160e	WC.4A-UZ4182		999.95
15'	3/8" Copper				49.95
2	3/8" F1 nuts				3.90
1	Permit				77.62

WORK PERFORMED: <u>Hang TWH and run</u>	REGULATION INFORMATION	APPLIANCES/ EQUIP. SOLD	CODE	999.95	
<u>Yard line</u>	MAKE: _____ MODEL: _____	PARTS/MAT. USED	MP	53.85	
	DATE CODE: _____ VENT: _____	TANK RENT			
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				CF	18.95
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:				SALES TAX	4.31
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐					80.00
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐					1.52
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.				LABOR ² men / hr	180.00
X _____				PE	77.62
CUSTOMER SIGNATURE				Pimai Reback	(100.00)
				GPC Reback	(200.00)
PIPING PRESSURE TEST				INV. TOTAL	1416.20
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.

Cl. TWH SERVICE REP. SIGNATURE 9/15/24 DATE X _____ CUSTOMER SIGNATURE

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