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127677

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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 Ashley Robinson RT# _____ RT. SEQ. _____ ACCT # 7-18253 DATE 9-22-26 INT _____

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 61 N Prong Rd. APT/LOT NO. _____

CITY Swainsboro STATE GA ZIP CODE 30401

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 # 478 919 5175

PAY BILL ONLINE @congerlpgas.com

Needs w/H for inlaw suite
Spray foam will be done Saturday
DIRECTIONS _____

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 w/H	RX130Ni	WA.BA-012225	1699.95	1699.95

WORK PERFORMED: <u>Prong w/H, install outdoor</u>	REGULATION INFORMATION		APPLIANCES/ EQUIP. SOLD	CODE	1699.95
Cap.	MAKE:	MODEL:	PARTS/MAT. USED		
	DATE CODE:	VENT:	TANK RENT	OL	(200.00)

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 ☐	HIGH:	1st Stage	2nd Stage	LOW	
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐	START LOCK-UP:	PSI	PSI	START LOCK-UP:	W.C. LABOR
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	TANK OFF:	PSI	PSI	TANK OFF:	W.C.
	PRESSURE	PSI	PSI	PRESSURE	
	AFTER 10 MINUTES:	PSI	PSI	AFTER 10 MINUTES:	W.C.
	PRESSURE AS LEFT:	PSI	PSI	PRESSURE AS LEFT:	W.C.
X	CUSTOMER SIGNATURE		PIPING PRESSURE TEST		INV. TOTAL
	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