

129866

NAME Artie Mosley RT# _____ RT. SEQ. _____ ACCT # 1-60204 DATE 9/1/26 INT 2

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 481 Oakridge Church Rd APT/LOT NO. _____

CITY Dickson STATE GA ZIP CODE 31784

NEW CUSTOMER INFORMATION	
S.S. NO. _____	DELV _____
HOME PH _____	RENT _____
WORK PH _____	CREDIT _____
LITE PILOT _____	PC _____
EMPLOYER _____	
DR. _____	USE _____ LEASE _____
email: <u>Worra@plattel.net</u>	
cell # <u>229-402-9319</u>	
PAY BILL ONLINE @congerlpgas.com	

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____

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	RELCOEP Rnm	WCUA-024218			1099.95
1	Service Vals				

WORK PERFORMED:	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE
	MAKE: _____ MODEL: _____		1099.95
	DATE CODE: _____ VENT: _____	PARTS/MAT. USED	
		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 _____ %	
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐	HIGH: 1st Stage 2nd Stage LOW		88.00
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: PRESSURE PSI PSI TANK OFF: PRESSURE W.C.		GPC <200.00>
	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	1187.95
	START PSIG FINISH PSIG	AMOUNT RECEIVED	987.95

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 Mitchell 9/16/26 x _____
 SERVICE REP. SIGNATURE DATE CUSTOMER SIGNATURE