



gas

INVOICE / WORK ORDER NO.

132668

NAME Don Jones RT# BA RT. SEQ. 0255 ACCT # 1-20999 DATE 9/18/26 INT HP

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 48 Edgewater Dr APT/LOT NO. _____

CITY Tifton STATE GA ZIP CODE 31793

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____

Needs water heater in stalled under house

DIRECTIONS: Central Plumbing told them to call us for Tankless

NEW CUSTOMER INFORMATION

S.S. NO. _____ DELV _____
HOME PH _____ RENT _____
WORK PH _____ CREDIT _____
LITE PILOT _____ PC _____
EMPLOYER _____
DR. _____ USE _____ LEASE _____

email: djones@1stproducts.com
cell # (909) 392-3620
PAY BILL ONLINE @congerlpgas.com

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	Refrigerator	Rinnai			Rel60E	WL04-1024216	1099.95	1099.95
20	3/8 copper						19.00	380.00
1	B46R Reg						92.95	92.95
1	Sediment trap						50.00	50.00
1	1/2 x 1/2 Nip cotoff						24.95	24.95
1	3/8 Union						3.95	3.95
4	3/8 Fl nuts						11.80	47.20

WORK PERFORMED:	MAKE:	MODEL:	APPLIANCES/ EQUIP. SOLD	CODE
Water Heater	Hung	Rinnai	1099.95	
			307.65	
			18.95	

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:

1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 98 ☐

2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐

I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.

LEAK AND PRESSURE TEST				SALES TAX	
HIGH:	1st Stage	2nd Stage	LOW	_____	_____ %
START LOCK-UP:	PSI	PSI	START LOCK-UP:	W.C.	LABOR
TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE	W.C.	
AFTER 10 MINUTES: PRESSURE	PSI	PSI	AFTER 10 MINUTES: PRESSURE	W.C.	
AS LEFT: PSI	PSI	PSI	AS LEFT: PSI	W.C.	
PIPING PRESSURE TEST				INV. TOTAL	1648.11
CUSTOMER SIGNATURE				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 Don Jones

DATE 9-18-26

CUSTOMER SIGNATURE _____