



congerlpgas.com

INVOICE / WORK ORDER NO.

Ga:

122431

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 Donna Nesmith RT# _____ RT. SEQ. _____ ACCT # 1-22874 DATE 2/4/26 INT 2P

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 430 Nesmith Road APT/LOT NO. _____

CITY Sycamore STATE GA ZIP CODE 31790

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 _____

Needs Rinnai Tankless WH installed

email: donna.nesmith22@gmail.com
cell # (229) 567-5033

PAY BILL ONLINE @congerlpgas.com

DIRECTIONS: _____

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
					MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
<u>COT</u>	<u>250</u>	<u>4799-279</u>		<u>on site</u>					

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>1</u>	<u>RE 160 e Rinnai</u>	<u>Re160e</u>	<u>TG-UA-098202</u>		<u>1099 95</u>
	<u>misc fl</u>				<u>50 00</u>
<u>1</u>	<u>B9</u>				<u>134 95</u>
	<u>misc supplies</u>				<u>21 90</u>

WORK PERFORMED: <u>Swapped her WH to a Rinnai / changed out her B9 that was leaking</u>	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE
MAKE: <u>Rinnai</u>	MODEL: <u>B9</u>	PARTS/MAT. USED	<u>1099.95</u>
DATE CODE: <u>09B 2023</u>	VENT: <u>Down</u>	TANK RENT	<u>184.95</u>

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE

1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/> 2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A PAMPHLET NUMBER 54 <input type="checkbox"/> I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	LEAK AND PRESSURE TEST				SALES TAX _____ %	LABOR	GPC GA (200.00) (8)
	HIGH:	1st Stage	2nd Stage	LOW			
	START LOCK-UP:	PSI	PSI	START LOCK-UP:	<u>17</u>	W.C.	<u>180 00</u>
	TANK OFF: PRESSURE	PSI	PSI	TANK OFF: PRESSURE	<u>7</u>	W.C.	<u>21 90</u>
	AFTER 10 MINUTES: PRESSURE AS LEFT:	PSI	PSI	AFTER 10 MINUTES: PRESSURE AS LEFT:	<u>7</u>	W.C.	<u>(200.00)</u>
		PSI	PSI		<u>17</u>	W.C.	
CUSTOMER SIGNATURE _____				PIPING PRESSURE TEST		INV. TOTAL <u>1425.08</u>	
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 04 Feb 26 CUSTOMER SIGNATURE _____