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INVOICE / WORK ORDER NO.

122938

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 Sharpe CO RT# RT. SEQ. ACCT # 20202 DATE 2/16/15 INT TJ

MAILING ADDRESS F.O. Box 3701 Valdosta 31604 CO. CITY NEW CUSTOMER INFORMATION
ADDRESS 6948 Simpson rd APT/LOT NO. HOME PH RENT WORK PH CREDIT LITE PILOT PC EMPLOYER DR. USE LEASE

SERVICE REQUESTED: [] CASH [] CHARGE DATE PROMISED email: nette.sharpeco@gmail.com cell # 229-292-1250 PAY BILL ONLINE @congerlpgas.com

DIRECTIONS:

Table with columns: TANK PICKUP/SET, TANK SIZE, SERIAL #, TANK %, TANK DESTINATION, DOT PERMANENTLY INSTALLED CONTAINERS (MANUFACTURED DATE, LAST TEST DATE, SIZE, SERIAL #, % FULL)

Table with columns: QTY, APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED, MODEL #, SERIAL NUMBER, UNIT PRICE, SALES AMOUNT

Table with columns: WORK PERFORMED, REGULATION INFORMATION (MAKE, MODEL, DATE CODE, VENT), APPLIANCES/EQUIP. SOLD, CODE, PARTS/MAT. USED, TANK RENT

Table with columns: LEAK AND PRESSURE TEST (HIGH, 1st Stage, 2nd Stage, LOW), START LOCK-UP, TANK OFF PRESSURE, AFTER 10 MINUTES PRESSURE AS LEFT, PIPING PRESSURE TEST (START, PSIG, FINISH, PSIG), SALES TAX, LABOR, INV. TOTAL, 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: [Signature] DATE: 2-12-16 CUSTOMER SIGNATURE



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CONTINUATION SHEET

NAME Sharp CO RT # _____ RT. SEQ. _____ ACCT # _____ DATE _____ INT _____

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
2	3/4 STR L				9 90
1	3/4 elbow				3 95
3	close n.p 3/4				5 85
1	3/4 coupling				3 95
	Rinnai	RE180	TJ-4A-128365		1199 95
	Rinnai	RE180	TJ-4A-128357		1199 95
1	3/4-1/2 n.p				3 95
1	3/4-1/2 n.p elbow				6 95
1	3/4-5/8 n.p				3 95
4	1/2 straight				159 84
2	3/4 straight				89 92
2	1/2 maxitrol				99 90
2	3/4 maxitrol				179 92
1	y46R				89 95
1	Peterson	G10	2133216		1444 95
1	Peterson	G10	2133215		1444 95
1	1/2" 48"				30 06
2	1/2 n.p				5 97
1	Gas connect valve Rinnai				

ADDITIONAL COMMENTS

REGULATOR INFORMATION		MAKE:	MODEL:	DATE CODE:	VENT:						
LEAK AND PRESSURE TEST	START LOCK UP:	PSI	TANK OFF PRESSURE:	PSI	AFTER 10 MINUTES:	PSI	PRESSURE AS LEFT:	PSI	PIPING PRESSURE TEST		
	STOCK LOCK UP:	W.C.	TANK OFF PRESSURE:	W.C.	AFTER 10 MINUTES:	W.C.	PRESSURE AS LEFT:	W.C.	START	PSIG	FINISH



Residential Gas Appliance System Check

Company/Location Conger LP Gas/valdosta

Call Date _____

Date GAS Check® Requested 10/16/16

Call-Taker's Name _____

Instructions Homeowner: Josh Slaughter

Account Number 04-23869
 Name Alex Sharp
 Address 6948 Simpson rd
 City, State, Zip Hahira Ga
 Telephone: Office _____ Home _____

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	Log 6
Manufacturer		Binnai	Binnai	P Zinc	Peterson	Peterson
Model No.		Re180	Re180		610	610
Serial No.		DJUA-125357	DJUA-125355		2133216	2133215
Fuel		LP	LP	LP	LP	LP
BTU Rating		180,000	180,000		57,600	57,600
Manual Shut-off (Installed/Existing)		inst	inst	inst	inst	inst
Sediment Trap (Installed/Existing)		inst	inst	-	-	-
Control Mfr./Model No.		-	-	-	-	-
Pilot(s)/Pilot Safety System		OK	OK	OK	OK	OK
Ignition System(s): Mfr./Model No.		electric	electric	electric	electric	electric
Thermostats: Mfr./Model No.		-	-	-	-	-
Burner(s)/Combustion Chamber		open	open	open	open	open
Venting System/Draft Diverter		open	open	open	open	open
Combustion Air		ambi	ambi	ambi	ambi	ambi
Red Tag (removed from service)/Recall		-	-	-	-	-

TANK/CYLINDER (Additional Serial Numbers):

SIZE	SERIAL NUMBER	MFR.	MFR. DATE	LAST TEST DATE	LOCATION	CONDITION OF:				RELIEF VALVE		FITTINGS LEAK TEST
						TANK	PAINT	PIGTAIL	FITTINGS	GAUGE	COND.	
250	1650891	America	1984	2026	Side	/	/	/	/	/	25	/

PIPING/REGULATOR OPERATION/CONDITION

SINGLE STAGE	PIPING		REGULATOR MFR. DATE (CODE)	MFR.	REGULATOR CONDITION	MODEL	REG. VENT POSITION	HOW PROTECTED	FLOW PRESSURE	LOCK-UP PRESSURE	
	MATERIAL	SIZE								IN WC	IN WC
1st	Copper	5/8	04N23	Rego	✓	TR4	Hor	lid	10 PSIG	10	PSIG
2nd	CSST	3/4	04L23	Rego	✓	Y46R	vert	none	2PSI	IN WC	2PSI
THIRD STAGE	Black	3/4		maxitail	✓	3/4	vert	none	7	IN WC	9

SYSTEM LEAK TEST

SINGLE STAGE/ INTEGRAL/ SECOND STATE	START PRESSURE (INCHES WC)	END PRESSURE (INCHES WC)	TIME HELD	SYSTEM OK
SECOND STAGE 1st				
2nd	OK	OK	10min	OK
THIRD STAGE				

Comments _____

This inspection covers (propane/LP-gas) items and equipment visible and accessible to the service technician and represents the conditions existing on the date of inspection. It does not cover latent or manufacturing defects, the internal working of sealed equipment, or structural components, and cannot be construed to cover future or unforeseen happenings.

I, _____ (Please print name)

- Know how to turn off the gas in case of emergency.
- Have smelled propane and can detect its odor.
- Have received the consumer safety information and material.
- Had gas system deficiencies and/or corrections, if any, clearly explained to me.
- Am satisfied with the service work performed.

Reference Invoice No. _____ Date _____

I, Seth Weeks (please print name) certify that I have completed the System Check as prescribed.

- Performed Odor Test Yes
- Performed Leak/Pressure Test Yes
- Placed Safety Decal Yes
- Left Consumer Safety Information and Material Yes

Seth Weeks
 (Service Technician's Signature)

 (Customer's Signature)