



congerlpgas.com

INVOICE / WORK ORDER NO.

127212

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 Logan Moore RT# _____ RT. SEQ. _____ ACCT # 03-25323 DATE 4-27-26 INT _____

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 9861 River Rd. APT/LOT NO. _____

CITY Camilla STATE Ga ZIP CODE 31730

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____

Rough in

DIRECTIONS: _____

NEW CUSTOMER INFORMATION

S.S. NO. _____ DELV _____

HOME PH _____ RENT _____

WORK PH _____ CREDIT _____

LITE PILOT _____ PC _____

EMPLOYER _____

DR. _____ USE _____ LEASE _____

email: lmoore1208@icloud.com

cell # 229-869-9119

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
20	<u>1/2 Trax</u>				159 00
1	<u>1/2 Flange</u>				44 25
1	<u>1/2 Wall Box</u>				89 95
1	<u>Rinnai Water Heater</u>	<u>RE180P</u>	<u>WC-NA-023201</u>		1299 95

WORK PERFORMED: <u>Rough in for stove</u>	REGULATION INFORMATION		APPLIANCES/ EQUIP. SOLD	CODE
<u># hung w/h</u>	MAKE:	MODEL:	PARTS/MAT. USED	<u>WH 1299 95</u>
	DATE CODE:	VENT:	TANK RENT	<u>MP 293 90</u>
				<u>MS 28 43</u>

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:		LEAK AND PRESSURE TEST		
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐	HIGH:		1st Stage	2nd Stage
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A PAMPHLET NUMBER 54 ☐	START LOCK-UP:		PSI	PSI
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	TANK OFF: PRESSURE		PSI	PSI
	AFTER 10 MINUTES:		PSI	PSI
	PRESSURE AS LEFT:		PSI	PSI
	START		PSIG	FINISH PSIG
X _____		PIPING PRESSURE TEST		
CUSTOMER SIGNATURE		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 4.27.2026 X CUSTOMER SIGNATURE _____

WHITE/FILE COPY; YELLOW/CUSTOMER COPY; PINK/POSTING COPY