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ias

116824

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 Gage Helton RT# _____ RT. SEQ. _____ ACCT # 03-24614 DATE 2.3.26 INT APP

MAILING ADDRESS _____ CO. _____ CITY _____
ADDRESS 2737 Fredonia Rd. APT/LOT NO. _____
CITY Thomasville STATE Ga ZIP CODE 31792

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 _____

email: gagelhelton@gmail.com
cell # 229 977 7582

Trench gas line to house >100'
Rinnai 180 # Stove

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>TS</u>	<u>123</u>	<u>U236387</u>	<u>10gals</u>	<u>At or Site</u>					
					<u>10 x 4.099 = 40.99 + 4.80 + 18.95 = 64.74</u>				

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>150</u>	<u>3/4 Poly</u>				<u>142.50</u>
<u>24</u>	<u>3/4 Transition/Coupling</u>				<u>189.80</u>
<u>10</u>	<u>1/2 Copper & Flange Nuts & MIP</u>				<u>77.50</u>
<u>1</u>	<u>Sediment Trap / Cut-off Valve</u>				<u>79.90</u>
<u>62</u>	<u>1/2 Trac, Wall Box & Flange</u>				<u>486.90</u>
<u>1</u>	<u>Flex Connector</u>				<u>49.95</u>
<u>1</u>	<u>Rinnai Water Heater</u>	<u>RE180e</u>	<u>TF.UA-084777</u>		<u>1199.95</u>
<u>1</u>	<u>Trencher Fee</u>				<u>150.00</u>

WORK PERFORMED: <u>Price includes rough in, & tank set, trenched line to house hung w/H, set tank, No leaks</u>	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE
	MAKE: <u>Rego</u> MODEL: <u>TR9</u>	PARTS/MAT. USED	<u>WH 1199.95</u>
	DATE CODE <u>04D2025</u> VENT: <u>Down</u>	TANK RENT	<u>MP 1025.75</u>
SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE			<u>MS 97.55</u>
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:			<u>CF 18.95</u>

1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>	LEAK AND PRESSURE TEST			SALES TAX _____ %	LABOR
	HIGH:	1st Stage	2nd Stage		
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 <input type="checkbox"/>	START LOCK-UP:	<u>10</u> PSI	PSI	START LOCK-UP:	<u>LB 600.00</u>
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	TANK OFF: PRESSURE	<u>6</u> PSI	PSI	TANK OFF: PRESSURE	<u>EQ 150.00</u>
	AFTER 10 MINUTES: PRESSURE AS LEFT:	<u>6</u> PSI	PSI	AFTER 10 MINUTES: PRESSURE AS LEFT:	<u>TR 10.00</u>
		<u>10</u> PSI	PSI		<u>(GPC 200.00)</u>
X _____	PIPING PRESSURE TEST			INV. TOTAL	<u>3167.12</u>
CUSTOMER SIGNATURE	START	PSIG	FINISH	PSIG	<u>AMOUNT RECEIVED 200.00</u>

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 2.3.2026 X _____ CUSTOMER SIGNATURE



Residential Gas Appliance System Check

Conger Northside

Account Number 03-24614
 Name Trace Holton
 Address 2737 Frederica Rd
 City, State, Zip Thomasville, GA 31797
 Telephone: Office _____ Home (779) 977-7582

Company/Location _____
 Call Date _____
 Date GAS Check® Requested _____
 Call-Taker's Name _____
 Instructions _____

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Rinnai	Z Line		
Model No.			RE180e	SR648		
Serial No.			TF.UA-084777	5QR485E250T4361-00		
Fuel			LP	LP		
BTU Rating			180K	94K		
Manual Shut-off (Installed/Existing)			Installed	Installed		
Sediment Trap (Installed/Existing)			Installed	-		
Control Mfr./Model No.			OK	OK		
Pilot(s)/Pilot Safety System			OK	OK		
Ignition System(s): Mfr./Model No.			OK	OK		
Thermostats: Mfr./Model No.			OK	OK		
Burner(s)/Combustion Chamber			OK	OK		
Venting System/Draft Diverter			OK	OK		
Combustion Air			OK	OK		
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.	DATE	CAP	
123	U236387	Cylinder	2025	2025	AGOR Site	OK	OK	OK	OK	OK	OK	25	OK	-

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								
1st	Copper	1/2 x 3/4	04D2025	Rego	New	TR9	Down	Dome	PSIG	10 PSIG
2nd	Poly	1/2	07B2024	Rego	New	B46R	Down	-	11.5 IN WC	13 IN WC
THIRD STAGE									IN WC	IN WC

SYSTEM LEAK TEST

SINGLE STAGE/INTEGRAL/SECOND STATE	START PRESSURE (INCHES WC)	END PRESSURE (INCHES WC)	TIME HELD	SYSTEM OK
1st	6	6	10m	OK
2nd				
THIRD STAGE				

Comments Rough in - Set tank, hung w/H
trenched gas line to house -
No leaks

Reference Invoice No. 116824 Date 2.3.2024

I, Taylor Newsome (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

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, Michael Holton (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.

(Customer's Signature)

(Service Technician's Signature)