



congerlpgas.com

INVOICE / WORK ORDER NO.

122915

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 James B Smith III RT# _____ RT. SEQ. _____ ACCT # 04-24921 DATE 01/09/26 INT mef

MAILING ADDRESS _____ CO. _____ CITY _____
ADDRESS 9112 Adel Hwy APT/LOT NO. _____
CITY Morven STATE GA ZIP CODE 31638

NEW CUSTOMER INFORMATION
S.S. NO. _____ DELV _____
HOME PH _____ RENT _____
WORK PH _____ CREDIT _____
LITE PILOT _____ PC _____
EMPLOYER 3 small LS
DR. _____ USE _____ LEASE _____
email: jbsmith11141@gmail.com

SERVICE REQUESTED: CASH CHARGE DATE PROMISED _____
T/S 120-gal ~~heat~~ for gas range and
RE180 w/H (to buy from Conger)
DIRECTIONS: Transferred gas from 60 gallon. Order was put in Tuesday
LISA

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
					MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
<u>T/S</u>	<u>120</u>	<u>4-236343</u>							

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>50'</u>	<u>1/2" copper</u>				<u>205 65</u>
<u>5</u>	<u>1/2" fl nuts</u>				<u>2 65</u>
<u>1</u>	<u>1/2" fl elbow</u>				<u>2 50</u>
<u>1</u>	<u>1/2" fl x 3/4" mip elb</u>				<u>3 95</u>
<u>1</u>	<u>1/2" cutoff</u>				<u>13 75</u>
<u>1</u>	<u>3/4" sed. vent trap</u>				<u>31 50</u>
<u>1</u>	<u>Rego B46R</u>				<u>65 95</u>
<u>1</u>	<u>3/4" tee</u>				<u>2 10</u>
<u>1</u>	<u>Rinnai TWH</u>	<u>RE180c</u>	<u>TH.4A-114227</u>		<u>1099 95</u>

WORK PERFORMED: Tank set, ran lines, REGULATION INFORMATION
hugg TWH, and tied to MAKE: _____ MODEL: _____
existing system. safety check DATE CODE: _____ VENT: _____

SVC MAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE		LEAK AND PRESSURE TEST		APPLIANCES/EQUIP. SOLD	CODE	SALES AMOUNT
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>	HIGH: 1st Stage	2nd Stage	LOW	WCH		<u>1099 95</u>
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A PAMPHLET NUMBER 54 <input type="checkbox"/>	START LOCK-UP: PSI	PSI	START LOCK-UP: W.C.	PARTS/MAT. USED	MP	<u>330 16</u>
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	TANK OFF: PRESSURE PSI	PSI	TANK OFF: PRESSURE W.C.	TANK RENT	MS	<u>41 41</u>
X _____ CUSTOMER SIGNATURE	AFTER 10 MINUTES: PRESSURE AS LEFT: PSI	PSI	AFTER 10 MINUTES: PRESSURE AS LEFT: W.C.	SALES TAX	CF	<u>18 95</u>
	START	PSIG	FINISH	LABOR <u>2hr</u>		<u>360 00</u>
				T/S		<u>10 00</u>
				Rinnai Rebate		<u>(200.00)</u>
				GAC Rebate		<u>(200.00)</u>
				INV. TOTAL		<u>1480.50</u>
				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.
CL TWH SERVICE REP. SIGNATURE 2/3/26 DATE _____ CUSTOMER SIGNATURE