



congerlpgas.com

INVOICE / WORK ORDER NO.

122939

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 Classic Homes by weaver RT# \_\_\_\_\_ RT. SEQ. \_\_\_\_\_ ACCT # 19957 DATE 2/11/26 INT PM

MAILING ADDRESS \_\_\_\_\_ CO. \_\_\_\_\_ CITY \_\_\_\_\_ S.S. NO. \_\_\_\_\_ DELV \_\_\_\_\_ HOME PH \_\_\_\_\_ RENT \_\_\_\_\_ WORK PH \_\_\_\_\_ CREDIT \_\_\_\_\_ LITE PILOT \_\_\_\_\_ PC \_\_\_\_\_ EMPLOYER \_\_\_\_\_ DR. \_\_\_\_\_ USE \_\_\_\_\_ LEASE \_\_\_\_\_

ADDRESS 3874 Lu lane APT/LOT NO. \_\_\_\_\_ CITY valdosta STATE Ga ZIP CODE \_\_\_\_\_ email: \_\_\_\_\_ cell # \_\_\_\_\_ **PAY BILL ONLINE @congerlpgas.com**

SERVICE REQUESTED:  CASH  CHARGE DATE PROMISED \_\_\_\_\_ DIRECTIONS: to 10 gal

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
					MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
<u>Set</u>	<u>TRC</u>	<u>6-236396</u>							

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT
<u>15</u>	<u>3/8</u>				<u>46.50</u>
<u>2</u>	<u>3/8 flare nut</u>				<u>1.72</u>
<u>1</u>	<u>B46R</u>				<u>65.68</u>
<u>1</u>	<u>1/2-3/8 cutoff</u>				<u>13.72</u>
<u>1</u>	<u>Dr. plug</u>				<u>31.50</u>
<u>1</u>	<u>Rinnai</u>	<u>Rel60</u>	<u>Tj:44-132942</u>		<u>999.95</u>

WORK PERFORMED:	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE	
	MAKE:	PARTS/MAT. USED	<u>WH</u>	<u>999.95</u>
	MODEL:	TANK RENT	<u>MP</u>	<u>159.12</u>
	DATE CODE:		<u>MS</u>	<u>18.55</u>
	VENT:		<u>CE</u>	<u>18.95</u>

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE					
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:		LEAK AND PRESSURE TEST			SALES TAX
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 <input type="checkbox"/>	HIGH:	1st Stage	2nd Stage	LOW	<u>12.73</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:	<u>1.48</u>
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	TANK OFF:	PSI	PSI	TANK OFF:	<u>1.52</u>
	AFTER 10 MINUTES:	PSI	PSI	AFTER 10 MINUTES:	<u>150.00</u>
	PRESSURE AS LEFT:	PSI	PSI	PRESSURE AS LEFT:	<u>Rinnai Rebate (200.00)</u>
X	PIPING PRESSURE TEST			INV. TOTAL	<u>GPC Rebate (200.00)</u>
CUSTOMER SIGNATURE	START	PSIG	FINISH	PSIG	<u>1442.30</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.

[Signature]  
SERVICE REP. SIGNATURE

2/11/26  
DATE

X  
CUSTOMER SIGNATURE



# Residential Gas Appliance System Check

Company/Location Conger LP Gas / Valdosta

Call Date \_\_\_\_\_

Date GAS Check® Requested \_\_\_\_\_

Call-Taker's Name \_\_\_\_\_

Instructions \_\_\_\_\_

Account Number Classic Homes  
Name Austin Weaver  
Address 3879 Lu Lane  
City, State, Zip Valdosta GA  
Telephone: Office \_\_\_\_\_ Home \_\_\_\_\_

PERFORMANCE CHECK: ITEM	Central Heating 1	Room Heating 2	Water Heater 3	Range 4	Clothes Dryer 5	6
Manufacturer			Rinnai			
Model No.			Bello			
Serial No.			TJ:4A-132902			
Fuel			LP			
BTU Rating			160,000			
Manual Shut-off (Installed/Existing)			inst			
Sediment Trap (Installed/Existing)			inst			
Control Mfr./Model No.			-			
Pilot(s)/Pilot Safety System			OK			
Ignition System(s): Mfr./Model No.			Electric			
Thermostats: Mfr./Model No.						
Burner(s)/Combustion Chamber			open			
Venting System/Draft Diverter			open			
Combustion Air			amb:			
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
120	4-236346	industrious	2025	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	PSIG	IN WC	IN WC
1st	Copper	3/8	04N25	Rego	✓	TR4	Hor	1:2	10	PSIG	10	PSIG
2nd	Black	3/4	09A25	Rego	✓	B46B	vert	none	11	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				
2nd	8	8	10 min	OK
THIRD STAGE				

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Austin Weaver  
(Service Technician's Signature)

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.

\_\_\_\_\_  
(Customer's Signature)