

129091

NAME Vernon C. Poole RT# _____ RT. SEQ. _____ ACCT # 1-20348 DATE 6/12/26 INT by

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 969 Firetower Rd. APT/LOT NO. _____

CITY Prigona STATE GA ZIP CODE 31749

NEW CUSTOMER INFORMATION

S.S. NO. _____ DELV _____
HOME PH _____ RENT _____
WORK PH _____ CREDIT _____
LITE PILOT _____ PC _____
EMPLOYER _____
DR. _____ USE _____ LEASE _____

email: VC Poole Co @ yahoo.com

cell # (601)-466-6107

PAY BILL ONLINE @congerlpgas.com

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____

remove old water heater & replace with
honor

DIRECTIONS:

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
1	<u>RE180EP</u>	<u>RE180EP</u>	<u>WD.UA-040079</u>		<u>1199.95</u>
	<u>misc supplies</u>				<u>10.80</u>

WORK PERFORMED: <u>Swap out w/h</u>	REGULATION INFORMATION		APPLIANCES/EQUIP. SOLD	CODE	
<u>out on deer shop</u>	MAKE: <u>1290</u>	MODEL: <u>19</u>	PARTS/MAT. USED		
	DATE CODE: <u>0402021</u>	VENT: <u>down</u>	TANK RENT		

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 ☐		HIGH:	1st Stage	2nd Stage	LOW	
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A PAMPHLET NUMBER 54 ☐		START LOCK-UP:	<u>2.0</u> PSI		START LOCK-UP:	<u>12.4</u> W.C.
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.		TANK OFF: PRESSURE	<u>1.5</u> PSI		TANK OFF: PRESSURE	<u>9.0</u> W.C.
		AFTER 10 MINUTES:	<u>1.5</u> PSI		AFTER 10 MINUTES:	<u>9.0</u> W.C.
		PRESSURE AS LEFT:	<u>1.7</u> PSI		PRESSURE AS LEFT:	<u>11.0</u> W.C.
X		PIPING PRESSURE TEST			INV. TOTAL	<u>1308.08</u>
CUSTOMER SIGNATURE		START	<u>1.5</u> PSIG	FINISH	<u>1.5</u> PSIG	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.

Justin Seaborn SERVICE REP. SIGNATURE June 15th 2026 DATE _____ CUSTOMER SIGNATURE