



congerlpgas.com

113995

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Vidalia, GA 30474
(912) 537-87223117 Veterans Parkway S.
Moultrie, GA 31788
(229) 985-6942NAME Karen Albritton RT# AD RT. SEQ. _____ ACCT # 1-23733 DATE 7/14/25 INT 2

MAILING ADDRESS _____ CO. _____ CITY _____

ADDRESS 1300 Waterloo Hwy APT/LOT NO. _____CITY Chula STATE GA ZIP CODE 31733

NEW CUSTOMER INFORMATION

S.S. NO. _____ DELV _____

HOME PH _____ RENT _____

WORK PH _____ CREDIT _____

LITE PILOT _____ PC _____

EMPLOYER _____

DR. _____ USE _____ LEASE _____

email: sim4700@earthlink.netcell # 229-992-2417

PAY BILL ONLINE @congerlpgas.com

SERVICE REQUESTED: ☐ CASH ☐ CHARGE DATE PROMISED _____COT, Run line for range, Purchase install Rinnai

DIRECTIONS:

TANK PICKUP/SET	TANK SIZE	SERIAL #	TANK %	TANK DESTINATION	DOT PERMANENTLY INSTALLED CONTAINERS				
					MANUFACTURED DATE	LAST TEST DATE	SIZE	SERIAL #	% FULL
<u>COT</u>	<u>250</u>	<u>M2016804</u>	<u>0</u>	<u>ON SITE</u>					

QTY	APPLIANCES / EQUIP. SOLD-PARTS/MATERIAL USED	MODEL #	SERIAL NUMBER	UNIT PRICE	SALES AMOUNT	
<u>123FT</u>	<u>3/4 ALY PIPE</u>				<u>116</u>	<u>85</u>
<u>2</u>	<u>3/4 Aly Coupling</u>				<u>89</u>	<u>90</u>
<u>2</u>	<u>3/4 Aly TRANSITION</u>				<u>89</u>	<u>90</u>
<u>3</u>	<u>MIP</u>				<u>11</u>	<u>85</u>
<u>8FT</u>	<u>1/2 COPPER</u>				<u>39</u>	<u>100</u>
<u>1</u>	<u>FLARE TEE</u>				<u>4</u>	<u>95</u>
<u>5</u>	<u>1/2 FLARE NUTS</u>				<u>14</u>	<u>75</u>
<u>2</u>	<u>1/2 CUTOFFS</u>				<u>69</u>	<u>90</u>
<u>1</u>	<u>B46R REGULATOR</u>				<u>89</u>	<u>95</u>

WORK PERFORMED:	REGULATION INFORMATION	APPLIANCES/EQUIP. SOLD	CODE
<u>RUN LINE FOR RANGE</u>	MAKE: <u>REGO</u> MODEL: <u>TR9</u>	PARTS/MAT. USED	
<u>AND RINNAI</u>	DATE CODE: <u>06C2021</u> VENT: <u>DOWN</u>	TANK RENT	

SERVICEMAN MUST COMPLETE BELOW SECTION FOR NEW INSTALLATIONS OR SERVICE				SALES TAX	
SERVICEMAN TO COMPLETE IN PRESENCE OF CUSTOMER:				_____%	
1) STORAGE SYSTEM INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 58 ☐	LEAK AND PRESSURE TEST				
	HIGH:	1st Stage	2nd Stage	LOW	
2) ALL APPLIANCES INSTALLED IN COMPLIANCE WITH N.F.P.A. PAMPHLET NUMBER 54 ☐	START LOCK-UP:	<u>11</u> PSI	PSI	START LOCK-UP:	W.C. LABOR
	TANK OFF: PRESSURE	<u>7</u> PSI	PSI	TANK OFF: PRESSURE	W.C. <u>Trencher</u>
I HAVE RECEIVED A SCRATCH AND SNIFF BROCHURE AND THE ODOR CHARACTERISTICS HAVE BEEN DEMONSTRATED TO ME.	AFTER 10 MINUTES:	<u>7</u> PSI	PSI	AFTER 10 MINUTES:	W.C.
	PRESSURE AS LEFT:	<u>11</u> PSI	PSI	PRESSURE AS LEFT:	W.C.
x <u>Karen Albritton</u> CUSTOMER SIGNATURE	PIPING PRESSURE TEST			INV. TOTAL	
	START	PSIG	FINISH	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.

SERVICE REP. SIGNATURE

DATE

CUSTOMER SIGNATURE

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

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



Residential Gas Appliance System Check

Account Number 1-23733
Name KAREN ALBRITTON
Address 1304 WATERLOO HWY
City, State, Zip CHULA GA 31733
Telephone: Office _____ Home _____

Company/Location CONGER/TIFTON
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	GEN 6
Manufacturer			RINNAI	CAFÉ		GENERAC
Model No.			RX199i	CGY366P4T2W2		NIL
Serial No.			TA.BA-001315	HA908398P		NIL
Fuel			LP	LP		LP
BTU Rating			199K	90K		355K
Manual Shut-off (Installed/Existing)			INSTALLED	INSTALLED		EXISTING
Sediment Trap (Installed/Existing)			INSTALLED	INSTALLED		EXISTING
Control Mfr./Model No.			OK	OK		OK
Pilot(s)/Pilot Safety System			OK	OK		OK
Ignition System(s): Mfr./Model No.			OK	OK		OK
Thermostats: Mfr./Model No.			OK	OK		OK
Burner(s)/Combustion Chamber			OK	OK		OK
Venting System/Draft Diverter			OK	OK		OK
Combustion Air			OK	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	
250	M2016204	ARCO SA	2020	—	ON SITE	OK	OK	OK	OK	OK	OK	OK	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								
SECOND STAGE	1st	COPPER	1/2	0122021	REGO	OK	TR9	DOWN	PSIG	IN PSIG
	2nd	BI	3/4	0402022	REGO	OK	B46R	DOWN	IN WC	IN WC
THIRD STAGE		BI	3/4	04B2024	REGO	OK	B46R	DOWN	IN WC	IN WC

SYSTEM LEAK TEST

SINGLE STAGE/ INTEGRAL/ SECOND STAGE		START PRESSURE	END PRESSURE	TIME HELD	SYSTEM OK
		(INCHES WC)	(INCHES WC)		
SECOND STAGE	1st	7	7	10 min	OK
	2nd				
THIRD STAGE					

Comments RUN LINE FOR RANGE + RINNAI

Reference Invoice No. 113995 Date 16 July 20

I, Kyle C Adams (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

I, Karen Albritton (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.

Karen Albritton (Customer's Signature)

Kyle C Adams (Service Technician's Signature)