



QUALIFICATION EVALUATION

Initial
 Subsequent

EMPLOYEE FULL NAME (PRINT)		Last four of SS#

Job Title _____ Area _____ Work Location _____

Subtask Name Bell Joints and Spigot Seals Subtask #: 01-01.00

SUBTASK OBJECTIVE: Using one or more of the below "Evaluation Methods", demonstrated the knowledge, skill and ability to perform this task following these qualification criteria.

	Qualified
1. Safety Requirements:	<input type="checkbox"/>
• Ability to identify and resolve abnormal operating condition(s)	
2. Access, understand and apply the following Company Standard(s):	<input type="checkbox"/>
• Gas Standards - B-50, B-50.1, B-51, B-51.1, B-51.2, B-52, B-52.1, B-56, B-57, B-58	
3. Protection of Cast Iron:	<input type="checkbox"/>
• Provide excavation of sufficient size to perform work	
• Support exposed pipe as needed	
• Suitable backfill and compaction procedures	
4. Bell Joint Spigot Preparation:	<input type="checkbox"/>
• Cleaning	
• Sandblasting	
• Caulking	
5. Identify Repair Procedures:	<input type="checkbox"/>
• Dresser bell pack fitting	
• Bell joint leak clamp	
• Bell joint leak seal	
• Bell joint heat shrink sleeve	
• Anaerobic sealants	
• Avon-seals	
6. Installation:	<input type="checkbox"/>
• Select and install material and fitting	
7. Test Requirement:	<input type="checkbox"/>
• Soap test	

EVALUATION METHODS (Check all that apply)

Observation On-The-Job Performance Observation by Simulation Oral Test
 Observation by On-The-Job Training Written Base Test OTHER - Field Performance Audit

Comments / Actions:

_____ EVALUATOR'S NAME AND CORP ID _____ EVALUATOR'S SIGNATURE _____ DATE

6/23/05 version

OM&C/FSD - Mail completed **original** Qualification Evaluation form(s) to [REDACTED]

CGT - Mail completed **original** Qualification Evaluation form(s) to [REDACTED]

OM&C/FSD/CGT - Send copy to LGOQPC (Local Gas Operator Qualification Plan Coordinator)



Initial/Subsequent Evaluator Instructions

Subtask Name: Bell Joints and Spigot Seals Subtask#: 01-01.00

Evaluator must provide the following reference material(s):

- Abnormal Operating Condition (AOC) Job Aid
- Gas Standard
- Cast Iron Pipe Bell Joint (Spigot) Repair Job Aid
- Repairing Cast Iron Bell Joints (Injection Method) Job Aid

Note:

Using reference material(s) listed above, individuals must answer all questions correctly. If individual answers any questions incorrectly than Evaluator will discuss the correct answer with individual and initial. If individual cannot provide the correct answer(s) or demonstrate performance after two additional attempts, the Evaluator should refer to the Operator Qualification Basic Plan Manual, Section 1.3.3.3 for further instructions.

Knowledge

Criteria #	Requirement
1.	Review Annual Operator Qualification Job Aid and Abnormal Operating Conditions (AOC) with individual(s).
2.	Provide individual with Bell Joints and Spigot Seals Test.

Performance

3. – 7.	<p>Individual must perform checks as required on the Qualification Evaluation for each of these following method(s):</p> <ul style="list-style-type: none"> • Protection of Cast Iron • Bell Joint Spigot Preparation • Identify Repair Procedures • Installation • Test Requirement <p style="text-align: center;">Note:</p> <p>Skill must be demonstrated through simulation or actual field performance. Individual must verbalize each action step (bulleted items in Steps 3-7).</p>
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