



QUALIFICATION EVALUATION

Initial
 Subsequent

EMPLOYEE FULL NAME (PRINT)		Last four of SS#

Job Title _____ Area _____

Subtask Name Conduct Survey Subtask #: 09-01.00

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 - D-S0350 / S4110 / D-G0054 / D-G0055, Section M-53, Various Gas Information Bulletins	
3. Map Reading:	<input type="checkbox"/>
• Explain and interpret gas map symbols	
• Document maps when finding gas leaks	
4. Leak Survey Instrument/Equipment Check:	<input type="checkbox"/>
• DOT Operator Qualified for Instrument(s) Used For Leak Survey	
5. Calibration Procedures:	<input type="checkbox"/>
• DOT Operator Qualified for Instrument(s) Used For Leak Survey	
• Daily/Weekly calibrations as required by Instrument being used	
• Document paper work	
6. Operation Procedures:	<input type="checkbox"/>
• Understands Foot Survey methods and procedures (see below)	
• Survey in unpaved area	
• Survey adjacent to unpaved area	
• Survey wall to wall paved area	
• Survey in street area	
• Survey around meter and regulator set	
• Survey Transmission facilities in Area of High Consequence	
• Understands how to perform Leak "Re-Checks"	
• Accurately/Correctly completes all required Leak Survey Records	

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

3/24/08 version

Mail completed **original** Qualification Evaluation form(s) to [redacted] Room B101 @ 3301 Crow Canyon Rd, San Ramon, CA.
Send copy to LGOQPC (Local Gas Operator Qualification Plan Coordinator)



Initial/Subsequent Evaluator Instructions

Subtask Conduct Survey
Name: _____

Subtask#: 09-01.00

Evaluator must provide the following reference material(s):

- Abnormal Operating Condition (AOC) Job Aid
- Utility Operations Standard S4110
- Gas Standards and Specifications M-53 & M-53.1
- Various Gas Information Bulletins Pertaining to Gas Leaks and/or Leak Survey Matters
- Gas Leak Grades Job Aid
- Routine Foot Survey Job Aid
- Century OVA 88 Job Aid (as appropriate)
- Heath Detecto Pak III Job Aid (as appropriate)
- Heath Detecto Pak IV Job Aid (as appropriate)
- Meters and Regulators Job Aid

Note:

Using reference material(s) listed above, individuals must answer all questions correctly. 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 Conduct Survey Test.

Performance

3. – 6.	<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"> • Map Reading • Leak Survey Instrument/Equipment Check • Calibration Procedures • Operation Procedures <p style="text-align: right;">Note:</p> <p>Skill must be demonstrated through simulation or actual field performance. Individual must verbalize each action step (bulleted items in Steps 3-6).</p>
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