



QUALIFICATION EVALUATION

Initial
 Subsequent

| | | |
|----------------------------|--|------------------|
| EMPLOYEE FULL NAME (PRINT) | | Last four of SS# |
| | | |

Job Title _____ Area _____ Work Location _____

Subtask Name Maintain / Operate Regulators and Monitors (controller operated) Subtask #: 14-01.00

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 Standard – CGT S4432 | |
| 3. Map Reading: | <input type="checkbox"/> |
| • Locate & identify regulator using operating diagram or facility drawing | |
| • Verify operating diagram or facility drawing is accurate | |
| 4. Inspection & Operation: | <input type="checkbox"/> |
| • Inspect associated piping condition for leakage and corrosion | |
| • Operate isolation valves & lubricate if applicable | |
| • Check mechanical operation & range ability of regulator / limiting device | |
| • Calibrate & check operation of control system (controller, positioner, etc.) | |
| • Return equipment to operating set point | |
| • Verify isolation valves have been returned to normal operation and secured in the open position, if applicable | |
| 5. Operation Procedures: | <input type="checkbox"/> |
| • Knowledge of regulator / limiting device and related component troubleshooting procedures | |
| • Documentation of regulator / limiting device maintenance or operation completed | |

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 _____ Room B101 @ 3301 Crow Canyon Rd, San Ramon, CA.

CGT - Mail completed **original** Qualification Evaluation form(s) to _____ @ 375 N. Wiget Lane, Walnut Creek, CA.

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



Initial/Subsequent Evaluator Instructions

Subtask Name: Maintain / Operate Regulators and Monitors (controller operated) Subtask#: 14-01.00

Evaluator must provide the following reference material(s):

- Abnormal Operating Condition (AOC) Job Aid
- Gas Standard

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 Maintain / Operate Regulators and Monitors (controller operated) Test. |

Performance

| | |
|---------|---|
| 3. – 5. | <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 • Inspection & Operation • Operation Procedures <p>Note: Skill must be demonstrated through simulation or actual field performance. Individual must verbalize each action step (bulleted items in Steps 3-5).</p> |
|---------|---|

6/23/05 version

OM&C/FSD - Mail completed **original** Qualification Evaluation form(s) to [redacted] Room B101 @ 3301 Crow Canyon Rd, San Ramon, CA.

CGT - Mail completed **original** Qualification Evaluation form(s) to [redacted] @ 375 N. Wiget Lane, Walnut Creek, CA.

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