

### DOT OPERATOR QUALIFICATION

#### **QUALIFICATION EVALUATION**

	Initial
_	Subsequent

EMPLOYEE FULL NAME (PRINT)			Last	four of SS#	
Job Title		Area	Work Location		
Subtask Name	Monitor Distribution Record	ding Devices		Subtask #:	15-02.00
SUBTASK OBJI following these qual	ECTIVE: Using one or more of the ification criteria.	e below "Evaluation Me	ethods", demonstrated the kno	wledge, skill and abil	ity to perform this task
					Qualified
1. Safety Requ					
	identify and resolve abnormal ope		(-).		
	l <mark>erstand and apply the following</mark> Indard – Gas Standard & Specifica		(S):		
3. Map Readin	The state of the s	10011 002			
	and interpret operating diagram or	facility drawing symbo	ls		15-20
	k identify system being monitored ι				
4. Operation P	HCHC 2 AND WARRING THE WARRING				
	and distribution system pipeline co				
	ize the normal operating range of s	ystem being monitored	d		
	low alarm condition high alarm condition				
	nigh alarm condition shoot system in order to correct ala	arm condition			
Observation On-TI	ETHODS (Check all that app ne-Job Performance   -The-Job Training	<b>ly)</b> Observation by Sim Written Base Test		Oral Test □ OTHER - Field I	Performance Audit □
Comments / Ac	tions:				
EVALUATO	R'S NAME AND CORP ID	EV	ALUATOR'S SIGNATURE		DATE

6/23/05 version

A.

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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)

Material Redacted





# Initial/Subsequent Evaluator Instructions

Subtask	Monitor Distribution Recording Devices	Subtask#:	15-02.00
Name:		1	

## 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

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Criteria #	Requirement
1.	Review Annual Operator Qualification Job Aid and Abnormal Operating Conditions (AOC)
	with individual(s).
2.	Provide individual with Monitor Distribution Recording Devices Test.

#### Performance

3. – 4.	Individual must perform checks as required on the Qualification Evaluation for each of these following method(s):  • Map Reading • Operation Procedures
	Note: Skill must be demonstrated through simulation or actual field performance. Individual must verbalize each action step (bulleted items in Steps 3-4).

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