**Operator and General Audit Information**

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| --- | --- | --- | --- | --- | --- |
| **Company:** | | **Name:** | | | |
| **Mailing and Official Address (If different):** | | | |
| **Doing Business as or Affiliation:** | | | |
| **PHMSA Operator Identification (OPID) No.** | | |  | | |
| **Unit ID Number/ Unit Name inspected** | | |  | | |
| **Address:** |  | | | **Lead Auditor or Inspector** | **Name:** |
| **Agency:** |
| **Date of Audit or Inspection:** |  |

***Company Representatives Participating***

|  |  |  |
| --- | --- | --- |
| **Key Persons** | **Name/Title/Mailing Address** | **Phone/Email Address** |
| **Primary Operator or Representative Interviewed or Providing Information** |  |  |
| **Others** |  |  |
| **Interviewed,** |
| **Providing** |
| **Information or** |
| **Present at Audit** |
| **or Inspection:** |
|  |  |
|  |  |  |
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**CNG Std - undefined**

**Training and Qualification - OQ Protocol 9**

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| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **1. Program Inspection Deficiencies** Have potential issues identified by the OQ plan inspection process been corrected at the operational level? (TQ.PROT9.CORRECTION.O) | | | | | | | | | 192.801(a) (192.809(a)) | | | | | | | | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | | NI | PI | NA | NC |  | |  | |  |  |  |  |  | | | |  | | | | | | | | | Notes | | | | | | | | |

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| |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **2. Covered Task Performance** Verify the qualified individuals performed the observed covered tasks in accordance with the operator's procedures or operator approved contractor procedures. (TQ.PROT9.TASKPERFORMANCE.O) | | | | | | | | | | | | 192.801(a) (192.809(a)) | | | | | | | | | | | |  |  |  | |  | |  |  |  | |  | |  |  |  | |  | |  |  |  | |  | | NI | PI | NA | NC | |  | | | |  | |  |  |  |  | |  | | | | | |  | | | | | | | | | | | | Notes | | | | | | | | | | | |

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| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **3. Qualification Status** Verify the individuals performing the observed covered tasks are currently qualified to perform the covered tasks. (TQ.PROT9.QUALIFICATIONSTATUS.O) | | | | | | | | | | 192.801(a) (192.809(a)) | | | | | | | | | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | | NI | PI | NA | NC |  | | |  | |  |  |  |  |  | | | | |  | | | | | | | | | | Notes | | | | | | | | | |

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| |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **4. Abnormal Operating Condition Recognition and Reaction** Verify the individuals performing covered tasks are cognizant of the AOCs that are applicable to the tasks observed. (TQ.PROT9.AOCRECOG.O) | | | | | | | | | | | | 192.801(a) (192.809(a)) | | | | | | | | | | | |  |  |  | |  | |  |  |  | |  | |  |  |  | |  | |  |  |  | |  | | NI | PI | NA | NC | |  | | | |  | |  |  |  |  | |  | | | | | |  | | | | | | | | | | | | Notes | | | | | | | | | | | |

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| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **5. Verification of Qualification** Observe in the field (job site, local office, etc.) that the foreman/supervisor/manager has verified the qualification of the individual performing the task, that the qualification records are current, and ensure the personal identification of all individuals performing covered tasks are checked, prior to task performance. (TQ.PROT9.VERIFYQUAL.O) | | | | | | | | | 192.801(a) (192.809(a)) | | | | | | | | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | | NI | PI | NA | NC |  | |  | |  |  |  |  |  | | | |  | | | | | | | | | Notes | | | | | | | | |

Except as required to be disclosed by law, any inspection documentation, including completed protocol forms, summary reports, executive summary reports, and enforcement documentation are for internal use only by federal or state pipeline safety regulators. Some inspection documentation may contain information which the operator considers to be confidential. In addition, supplemental inspection guidance and related documents in the file library are also for internal use only by federal or state pipeline safety regulators (with the exception of documents published in the federal register, such as advisory bulletins). Do not distribute or otherwise disclose such material outside of the state or federal pipeline regulatory organizations. Requests for such information from other government organizations (including, but not limited to, NTSB, GAO, IG, or Congressional Staff) should be referred to PHMSA Headquarters Management.