

# Bobcat Gas Storage

OQ Field Inspection Documentation



## General On-Site Inspection Information Section 1

Project Name:	
Job Site Location:	
Assessment Date:	

### On-Site Supervision

Name:	
Job Title:	
Company:	

### Company Employee Responsible for Project Oversight

Name:	
Job Title:	

## Verification of Qualifications Section 2

Was the OQ Action Plan submitted and the qualification documentation readily available? <i>(Inspector should ask for the qualification documentation)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If **no** explain:

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### ***How was documentation provided?***

Computer CD/Disk/Harddrive <input type="checkbox"/>	Email <input type="checkbox"/>	Hardcopy <input type="checkbox"/>
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Is the documentation presented current and up to date? <i>(Inspector should check the qualifications to see if they have been assigned to this particular job.)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If **no**, explain and record action taken:

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Are the employees working at the job site the same employees assigned to the job in documentation? <i>Inspector should request a job site meeting to verify identity (picture id's) of all job site employees and their qualifications</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If **no**, explain and record action taken:

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<b>Qualified Individuals' Information</b> <b>Section 3</b>		
<b>Responsibility of Qualified Individual(s):</b>		
Are qualified individuals <i>"Directing and Observing"</i> (span-of-control) a non-qualified individual while performing a Covered Task? (If <b>YES</b> , inspector must complete <b>Section 5</b> )	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are qualified individual(s) performing the Covered Tasks? (If <b>YES</b> , inspector must complete the "Qualified Employees Section" below)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Qualified Employee Information:</b> <i>Inspector should list all of the qualified employees present on the job site</i>		
Name	Company	ISN ID# (if applicable)
<b>Covered Task Information</b> <b>Section 4</b>		
<b>Job Site Covered Task Overview</b>		
Are the covered task assigned to the job site the same covered tasks being performed on the job site?(Inspector should observe job tasks being performed and compare to job site task list)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If <b>no</b> , explain and record action taken:		
<b>Job Site Covered Task List</b>		<i>(List the tasks individually below or attach the job site task requirements)</i>
Covered Task Name	Covered Task Number	

<b>Directing and Observing Non Qualified Individuals</b> <i>(To Be Completed if Being Used at the Site)</i> <b>Section 5</b>		
Does the contractor supervisor and/or inspector understand the company requirements for utilizing an employee to <i>“Direct and Observe”</i> non-qualified personnel ( <i>span of control</i> )?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If <b>no</b> explain:		
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Is the qualified individual <i>“Directing”</i> the work being performed? <i>(Inspector should observe qualified individual watching the non-qualified individuals perform the work)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If <b>no</b> explain and record action taken:		
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Is the qualified individual in close enough proximity to <i>“Observe”</i> work being performed and be able to take immediate corrective action when necessary?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If <b>no</b> explain and record action taken:		
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Have environmental or location specific issues that may hamper <i>“Directing and Observing”</i> non-qualified individuals been taken into consideration (i.e. weather, equipment, terrain)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If <b>no</b> explain and record action taken:		
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<b>List any other notable conditions or observations during the assessment:</b>		
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<i>Inspector should interview all employees that have unqualified employees working under their direction . Does the individual <i>“Directing and Observing”</i> understand the Abnormal Operating Conditions at the job site. ( Inspector should ask what the AOCs are for this particular job)</i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If <b>no</b> explain and record action taken:		
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Observe qualified employees as they <i>“direct and observe”</i> . Are the qualified individuals capable of <i>“Reacting and Responding”</i> to Abnormal Operating Conditions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If <b>no</b> explain and record action taken:		
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<h2 style="margin: 0;">On Site Audit Results</h2> <h3 style="margin: 0;">Section 6</h3>		
Inspector should observe covered task performance. Is the Covered Task work being performed to company standards?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If <b>no</b> explain and record action taken:		
Are there any other notable findings (Positives and Negatives)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Provide explanation and description of findings (Record any actions taken):		
Other Comments:		

**Important:** All work deemed as a Covered Task must be performed by a qualified person or be directed and observed by a qualified person. If a violation to the OQ program is found, Covered Task work being performed must stop immediately until appropriate action can be taken and the situation remedied. The company employee responsible for the oversight of the project must be contacted to ensure that appropriate action has been taken *before* covered task works resumes.

<u>Contractor Employee Project Supervisor</u>		
Printed Name:		
Company:		
Signature:	Date	
<u>Company On-Site Representative (if applicable)</u>		
Printed Name:		
Company:		
Signature:	Date	
<u>Individual Performing OQ Field Inspection</u>		
Printed Name:		
Company:		

Signature:	Date	
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