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Date:

REGISTRATION AS AN AUTHORISED GAS PRACTITIONER

I hereby apply for registration as Gas Practitioner on pipeline gas supply systems, gas trains and gas equipment in terms of the Occupational Health and Safety Act – No. 85 of 1993 – Sections 43 and 44 and Regulations R734 of 15th July 2009 – "Pressure Equipment Regulations (PER)"

NB: In the interest of speedy processing of your application, it is imperative that you complete all required fields

NB. Registrations are only valid with-in the borders of The Republic of South Africa

The following is to accompany this application:

- 1. Two (2) colour passport photos endorsed on reverse side with own name, ID No.
- 2. Certified copy of valid ID bar-coded green book or passport.
- 3. Copies of all supporting documents relating to statements made in this application.
- 4. Signed Code of Good Practice for a Gas Practitioner.

After the Gas Practitioner Review Committee has approved this application, an invoice will be submitted to you by SAQCC Gas for the registration fee **R2109.00** (including VAT) which covers a period of 3 years. You will only be registered as a Gas Practitioner once payment has been received.

Initials		
First name		
Surname		
ID no.:		PLACE ID
Self employed	Yes No	РНОТО
Employer		HERE
Tel		
Cell		
Email		

POSTAL ADDRESS		STREET ADDRESS	
Address		Address	
Suburb / Town		Suburb / Town	
Province		Province	
Postal code		Postal code	

GAS PRACTITIONER : APPLICATION SUMMARY

- 1. Using the form below (Pages 2-5) mark the scope of work for each gas being applied for. Stating whether Commercial or Industrial.
- 2. Identify what supporting documentation is attached to this application.
- 3. Design means designing systems to a recognised standard/s.
- 4. Installation includes construction, instrumentation, installation and commissioning activities.
- 5. Maintenance & Repair means maintenance & repair of the gas system including inspection.

			Applicat Registra		Docum	nentation su Competenc	
			(Tick the approp	oriate box/s)	Mentor supervision	Manager approved	Proof of Competence
Primary Classification	Gas Systems	Scope of Work	Commercial (C)	Industrial (I)			
Inert Gases	1. Nitrogen	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	2. Argon	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	3. Carbon Dioxide	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	4. Helium	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	5. Other: (State type of gas)	1. Design					
		2. Installation					
		3. Maintenance & Repair					

			Applicat Registr		Docum	entation su Competenc	
			(Tick the appro	priate box/s)	Mentor supervision	Manager approved	Proof of Competence
Primary Classification	Gas Systems	Scope of Work	(C) Commercial	(I) Industrial			
Oxidant Gases	6. Oxygen	1. Design					
		2. Installation					
Note:		3. Maintenance & Repair					
	7. Nitrous Oxide	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	8. Other: (State type of						
	gas)	1. Design					
		2. Installation					
		3. Maintenance & Repair					
Flammable Gases	9. Hydrogen	1. Design					
		2. Installation					
Note:		3. Maintenance & Repair					
	10.Methane	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	11.Natural Gas (LNG/CNG)	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	12.Acetylene	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	13.Other: (State type of						
	gas)	1. Design					
		2. Installation					
		3. Maintenance & Repair					

			Applicat Registr		Docum	entation su Competenc	
			(Tick the appro	priate box/s)	Mentor supervision	Manager approved	Proof of Competence
Primary Classification	Gas Systems	Scope of Work	(C) Commercial	(I) Industrial			
Medical Gases	14.Medical Oxygen	1. Design					
		2. Installation					
Note:		3. Maintenance & Repair					
	15.Medical Air	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	16.Nitrous Oxide	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	17.Entenox	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	18.Other: (State type of						
	gas)	1. Design					
		2. Installation					
		3. Maintenance & Repair					
Food Gases	19.Nitrogen	1. Design					
		2. Installation					
Note:		3. Maintenance & Repair					
1) Food Gas systems have to	20.Carbon Dioxide	1. Design					
conform to HACCP requirements		2. Installation					
		3. Maintenance & Repair					
	21.Mixtures of O2/CO2/N2	1. Design					
		2. Installation					
		3. Maintenance & Repair					

			Registration		Docum	entation su Competenc	
			(Tick the approp	oriate box/s)	Mentor supervision	Manager approved	Proof of Competence
Primary Classification	Gas Systems	Scope of Work	(C) Commercial	(I) Industrial			
	22.Sulphur Dioxide	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	23.Ethylene Oxide	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	24.Other: (State type of						
	gas)	1. Design 2. Installation					
		3. Maintenance & Repair					
Beverage Gases	25.Nitrogen	1. Design					
		2. Installation					
Note:		3. Maintenance & Repair					
1) Beverage Gas systems have to	26.Carbon Dioxide	1. Design					
conform to HACCP requirements		2. Installation					
		3. Maintenance & Repair					
	27.Sulphur Dioxide	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	28.Other: (State type of						
	gas)	1. Design					
		2. Installation					
		3. Maintenance & Repair					

					entation su Competenc		
			(Tick the approp	oriate box/s)	Mentor supervision	Manager approved	Proof of Competence
Primary Classification	Gas Systems	Scope of Work	(C) Commercial	(I) Industrial			
Special Gases	29.Toxic	1. Design					
		2. Installation					
Notes:		3. Maintenance & Repair					
1) Gas systems are design for the	30.Corrosive	1. Design					
major hazard property of the Gas		2. Installation					
2) Special requirements for High		3. Maintenance & Repair					
Purity and Ultra high purity gas	31.Pyrophoric	1. Design					
systems		2. Installation					
		3. Maintenance & Repair					
	32. High and Ultra High						
	Purity Gas	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	33.Gas Mixtures	1. Design					
		2. Installation					
		3. Maintenance & Repair					
	34. Other: (State type of						
	gas)	1. Design					
		2. Installation					
		3. Maintenance & Repair					

1. SUPPORTING DOCUMENTATION

RECOMMENDED BY MENTOR:

(Note: The mentor has to be a SAQCC Gas Practitioner for the scope being mentored.)

Name: _____

Surname: _____

SAQCC No: _____

Signature: _			
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Date: _____

RECOMMENDATION BY LINE MANAGER / SUPERVISOR:

I, Name: _____

Surname: _____

being the Line Manager/Supervisor (*cross out which is not applicable*) hereby confirm that the above registration categories are in line with the applicant's job level and as such are recommended for registration.

Signature: _____

Date: _____

2. QUALIFICATIONS

Secondary Education:	
Major Subjects	
Level Attained	
Period From:	
Period To:	

Tertiary and/or Technical Education:	
Major Subjects	
Final Qualification	
Period From:	
Period To:	

Apprenticeship/learner-ship served as	
From:	
То:	
Employer during Apprenticeship/learner- ship:	

3. EMPLOYMENT HISTORY (Chronological Order)

Present Employer:

Employer:	
From Date:	
To Date:	
Employer	
Type of business	
Tel of business	
Present Position Held	
Signed by (employer)	

Previous Employer:

Employer:	
From Date:	
To Date:	
Employer	
Type of business	
Tel of business	
Present Position Held	

Previous Employer:

Employer:	
From Date:	
To Date:	
Employer	
Type of business	
Tel of business	
Present Position Held	

4. BRIEF DESCRIPTION OF YOUR BUSINESS ACTIVITIES

Describe in brief the activities of your current business i.e.

- 1. Detail scope of work: Design, Installation, Maintenance & Repair
- 2. Industry sectors where the work is carried out. i.e. Industrial, Medical/Hospitals, Food Packaging, Beverage/Pub Installations, Laboratories, etc.

5. GAS PROJECTS

Instructions

- 1. You should provide a description of the last 5 chronological Gas Projects which support this application covering design, installation, maintenance & repair, where applicable. This should include details relating to the magnitude and scope of the project including the National/International Standards used and the level of responsibility and contribution to testing and final acceptance.
- 2. Projects to be listed and described in date order.

NB: Attach a separate sheet/s with above information and add your name and signature

I, the undersigned, hereby confirm that

1. All the information included within this application is true and valid

Name: _____

Signature:

Email to: <u>sacgass@iafrica.com</u> OR Post to: PostNet Suite #34, Private Bag X2, Edenglen 1613, Gauteng, South Africa



CODE OF GOOD PRACTICE FOR GAS PRACTITIONERS

I ID Number

The undersigned, as a registered and authorised Gas Practitioner shall:

- 1. Undertake only those assignments which fall within my authorized level of registration and scope of work for which I am competent by virtue of training, experience and certification. Where warranted, advise the engagement of such specialists who are required to facilitate the completion of the assignment.
- 2. Prior to undertaking any maintenance, repairs, alterations and/or additions to existing equipment and/or pipelines installed on customer premises, I must first establish the ownership of the equipment and/or pipelines. This is necessary to ensure that the owner of the equipment and/or pipelines carries out the necessary work or employs a third party registered gas practitioner to carry out the work on their behalf.
- 3. Indicate to my employer, supervisor or mentor any adverse consequence that may result from an alteration to the designed installation by a non-technical authority or client.
- 4. Be objective, thorough and factual in any written report, statement or testimony of the work performed and include all relevant or pertinent information in such documents.
- 5. Sign only for work I have personally carried out or work supervised for which I have personal knowledge through direct technical control or supervision.
- 6. Have proper regard for the safety, health and environment concerning the user, the public and the fellow employees.
- 7. Protect to the fullest extent possible, constant with the well-being of the gas industry and public, any information given in confidence to me by my employer, supervisor, colleague, client or this gas association.
- 8. Strive to maintain proficiency by updating my personal technical knowledge and skills as required to efficiently and effectively apply the desired application skills as required by an authorised gas practitioner within the respective gas industry.
- 9. Maintain the highest degree of personal integrity, credibility and business ethics at all times.
- 10. Report any unsafe practices, sub-standard work and non-registered practitioners to the SAQCC Gas.
- 11. Be compliant with the Anti-Trust Policy and Meeting Rules and any other informed policy, Regulation and/or Standard promulgated.
- 12. Be in compliance to the Occupation Health & Safety Act (No 85 of 1993) and all related and applicable standards, regulations and SABS Codes of Practice.

DATE.....
PRACTITIONER

FOR OFFICE USE ONLY – DO NOT COMPLETE THIS BLOCK

SAQCC Reg No: