



Southern Africa Compressed Gases Association

Post net Suite #34, Private Bag X2, Edenglen, 1613, Gauteng, South Africa
 Tel no. +27 (0)82 497 7441 / +27 (0) 72 129 1379
 Email : sacgass@iafrica.com

Date:

RE- REGISTRATION AS AN AUTHORISED GAS PRACTITIONER

I hereby apply for registration as an 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 **R2,235.00** (including VAT) which covers a period of 3 years. You will only be registered as a Gas Practitioner once payment has been received.

Initials		PLACE ID PHOTO HERE
First name		
Surname		
ID no.:		
Self employed	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer		
Tel		
Cell		
Email		

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

CURRENT APPROVAL

- Current SAQCC Gas Practitioner Registration No: _____
- Expiry Date: _____
- Categories approved under current registration.

<i>Type of installer:</i>	<i>Industrial</i>
Inert Gases	
Oxidant Gases	
Flammable gases excluding LPG & Natural Gas	
Acetylene	
Medical Gases	
Food Gases	
Beverage Gases	
*Special Gases	

GAS PRACTITIONER : APPLICATION SUMMARY FOR RE-REGISTRATION

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.

Primary Classification	Gas Systems	Scope of Work	Application for Registration		Documentation supporting Competence		
			(Tick the appropriate box/s)		Mentor supervision	Manager approved	Proof of Competence
			(C) Commercial	(I) Industrial			
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					

			Application for Registration		Documentation supporting Competence		
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Primary Classification	Gas Systems	Scope of Work	(C) Commercial	(I) Industrial			
Oxidant Gases	6. Oxygen	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
Note:							
	7. Nitrous Oxide	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
	8. Other: (State type of gas)	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
Flammable Gases	9. Hydrogen	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
Note:							
	10. Methane	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
	11. Natural Gas (LNG/CNG)	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
	12. Acetylene	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
	13. Other: (State type of gas)	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			

			Application for Registration		Documentation supporting Competence		
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Medical Gases	14. Medical Oxygen	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
Note:							
	15. Medical Air	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
	16. Nitrous Oxide	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
	17. Entenox	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
	18. Other: (State type of gas)	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
Food Gases	19. Nitrogen	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
Note:							
1) Food Gas systems have to conform to HACCP requirements	20. Carbon Dioxide	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			
	21. Mixtures of O2/CO2/N2	1. Design	<input type="checkbox"/>	<input type="checkbox"/>			
		2. Installation	<input type="checkbox"/>	<input type="checkbox"/>			
		3. Maintenance & Repair	<input type="checkbox"/>	<input type="checkbox"/>			

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	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					
		3. Maintenance & Repair					
Note:							
1) Beverage Gas systems have to conform to HACCP requirements	26.Carbon Dioxide	1. Design					
		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					

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

SUPPORTING DOCUMENTATION FOR RE-REGISTRATION

- Documentary Proof of Design/Installation/ Maintenance & Repair work, as applicable for each Gas System completed in the last 3 years. i.e. Design approvals, CoC's (including SACGA's), Inspection, Maintenance, Repair Records etc.
- Approval/Re-Registration will be based upon the objective documentary evidence submitted with this application.
- Should the objective documentary evidence be deemed insufficient by the Gas Practitioner Review Committee an independent assessment will be carried out to verify competence. This will be at the Gas Practitioners cost.

I, the undersigned, hereby confirm that

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

Name: _____

Signature: _____

Email to: sacgass@iafrica.com

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

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SAQCC Reg No:
