

Distribution Integrity Management Program (DIMP)

Inspection Form

For Operators of Gas Distribution Systems

For Requirements of 192.1005 – 192.1011

Version 9/23/2011

This inspection form is for the evaluation of a gas distribution integrity management program for all operators of gas distribution except operators of master meter or small liquefied petroleum gas (LPG) systems. The form contains questions related to specific regulatory requirements and questions which are strictly for informational purposes. The questions which are related to specific regulatory requirements are preceded by the rule section number which prescribes the applicable code citation for the question. The cell preceding informational questions states “information only”.

S/Y stands for “Satisfactory” or “Yes”, U/N stands for “Unsatisfactory” or “No”, N/A stands for “Not Applicable”, and N/C stands for “Not Checked”. If an item is marked U/N, N/A, or N/C, an explanation must be included in the comments section.

Some inspection questions contain examples to further clarify the intent of the question. For example, question 5 asks, “Do the written procedures require the consideration of information gained from past design, operations, and maintenance (e.g. O&M activities, field surveys, One-Call system information, excavation damage, etc.)?” The list following “e.g.” is not meant to be all inclusive or that all the items are required. Some of the items may not be applicable to an individual operator’s system.

Some States require the operator to notify and send the State regulatory authority any changes to operator’s plans and procedures. Operators in these states should also notify and send revisions of the DIMP plan to the State regulatory authority.

Operator Contact and System Information — Operator Information:

Name of Operator (legal entity):	
PHMSA Operator ID(s) Included in this Inspection:	
Type of Operator:	<input type="checkbox"/> Investor Owned <input type="checkbox"/> Municipal <input type="checkbox"/> Private <input type="checkbox"/> LPG <input type="checkbox"/> Other (e.g. cooperative)
States(s) included in this inspection:	
Headquarters Address:	
Company Contact:	
Phone Number:	
Email:	
Date(s) of Inspection:	Click here to enter a date. TO Click here to enter a date.
Date of Report:	Click here to enter a date.

Persons Interviewed:

Persons Interviewed <i>(List the DIMP Administrator as the first contact)</i>	Title	Phone Number	Email

State or Federal Representatives:

Inspector Name & Agency	Phone Number	Email

Inspector Comments (optional):

--

192.1005 What must a gas distribution operator do to implement this subpart?

Question No.	Rule §192	Description	S/Y	U/N	N/A	N/C
1	.1005	Was the plan written and implemented per the requirement of 192.1005 by 08/02/2011? <u>OR</u> For a gas system put into service or acquired after 08/02/2011, was a plan written and implemented prior to beginning of operation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
2	Information Only	Were commercially available product(s)/templates used in the development of the operator's written integrity management plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Fully <input type="checkbox"/>	Partially <input type="checkbox"/>	Not at all <input type="checkbox"/>		
		Commercial product(s)/templates name if used:				
Inspector's Comments						
3	Information Only	Does the operator's plan assign responsibility, including titles and positions, of those accountable for developing and implementing required actions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
4	.1007(a)(1)	Do the written procedures identify or reference the appropriate sources used to determine the following characteristics necessary to assess the threats and risks to the integrity of the pipeline:				
		<ul style="list-style-type: none"> • Design (e.g. type of construction, inserted pipe, rehabilitated pipe method, materials, sizes, dates of installation, mains and services, etc.)? 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<ul style="list-style-type: none"> • Operating Conditions (e.g. pressure, gas quality, etc.)? 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<ul style="list-style-type: none"> • Operating Environmental Factors (e.g. corrosive soil conditions, frost heave, land subsidence, landslides, washouts, snow damage, external heat sources, business districts, wall-to-wall paving, population density, difficult to evacuate facilities, valve placement, etc.)? 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						

192.1007(a) Knowledge of the System

Question No.	Rule §192	Description	S/Y	U/N	N/A	N/C
5	.1007(a)(2)	Do the written procedures require the consideration of information gained from past design, operations, and maintenance (e.g. O&M activities, field surveys, One-Call system information, excavation damage, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
6	Information Only	Do the written procedures indicate if the information was obtained from electronic records, paper records, or subject matter expert knowledge (select all which apply)?				
			Electronic <input type="checkbox"/>	Paper <input type="checkbox"/>	SME <input type="checkbox"/>	
Inspector's Comments						
7	.1007(a)(3)	Does the plan contain written procedures to identify additional information that is needed to fill gaps due to missing, inaccurate, or incomplete records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
8	.1007(a)(3)	Does the plan list the additional information needed to fill gaps due to missing, inaccurate, or incomplete records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
9	.1007(a)(3)	Do the written procedures specify the means to collect the additional information needed to fill gaps due to missing, inaccurate, or incomplete records (e.g., O&M activities, field surveys, One-Call System, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
10	.1007(a)(5)	Do the written procedures require the capture and retention of data on any new pipeline installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
11	.1007(a)(5)	Does the data required for capture and retention include, at a minimum, the location where the new pipeline is installed and the material from which it is constructed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
12	.1007(a)	Does the documentation provided by the operator demonstrate implementation of the element "Knowledge of the System"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
13	.1007(a)	Has the operator demonstrated an understanding of its system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						

192.1007(b) Identify Threats

Question No.	Rule §192	Description	S/Y	U/N	N/A	N/C
14	.1007(b)	In identifying threats, do the written procedures include consideration of the following categories of threats to each gas distribution pipeline? <ul style="list-style-type: none"> • Corrosion • Natural Forces • Excavation Damage • Other Outside Force Damage • Material or Welds • Equipment Failure • Incorrect Operation • Other Concerns 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Inspector's Comments						
15	.1007(b)	Did the operator consider the information that was reasonably available to identify existing and potential threats?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
16	Information Only	Does the plan subdivide the primary threats into subcategories to identify existing and potential threats?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
17	.1007(b)	In identifying threats did the information considered include any of the following? <ul style="list-style-type: none"> • Incident and leak history <input type="checkbox"/> yes <input type="checkbox"/> no • Corrosion control records <input type="checkbox"/> yes <input type="checkbox"/> no • Continuing surveillance records <input type="checkbox"/> yes <input type="checkbox"/> no • Patrolling records <input type="checkbox"/> yes <input type="checkbox"/> no • Maintenance history <input type="checkbox"/> yes <input type="checkbox"/> no • Excavation damage experience <input type="checkbox"/> yes <input type="checkbox"/> no • Other – Describe _____ <input type="checkbox"/> yes <input type="checkbox"/> no 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
18	Information Only	Does the plan categorize primary threats as either "system-wide" or "localized"?				
		All System-wide <input type="checkbox"/>	All Localized <input type="checkbox"/>	Some of Both <input type="checkbox"/>	Not Identified <input type="checkbox"/>	
Inspector's Comments						
19	.1007(b)	Do the written procedures consider, in addition to the operator's own information, data from external sources that is reasonably available to assist in identifying potential threats?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
20	.1007(b)	Does the documentation provided by the operator demonstrate implementation of the element "Identify Threats"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						

192.1007(c) Evaluate and Rank Risk

Question No.	Rule §192	Description	S/Y	U/N	N/A	N/C				
21	Information Only	Was the risk evaluation developed fully or in part using a commercially available tool?								
		Fully <input type="checkbox"/>	Partially <input type="checkbox"/>	Not at all <input type="checkbox"/>						
		Commercial tool name if used:								
Inspector's Comments										
22	.1007 (c)	Do the written procedures contain the method used to determine the relative importance of each threat and estimate and rank the risks posed? Briefly describe the method.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Inspector's Comments										
		For questions 23 – 25, do the written procedures to evaluate and rank risk consider:	Corrosion	Natural Forces	Excavation Damage	Other outside Force Damage	Material or Welds	Equipment Failure	Incorrect Operation	Other Concerns
23	.1007 (c)	Each applicable current and potential threat?								
24		The likelihood of failure associated with each threat?								
25		The potential consequence of such a failure?								
Mark each box above with one of the following: S for "Satisfactory", U for "Unsatisfactory", N/A for "Not Applicable" and N/C for "Not Checked".										
Inspector's Comments										
26	.1007 (c)	If subdivision of system occurs, does the plan subdivide the system into regions with similar characteristics and for which similar actions are likely to be effective in reducing risk? Briefly describe the approach.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Inspector's Comments										
27	Information Only	Is the method used to evaluate and rank risks reasonable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Inspector's Comments										
28	.1007(c)	Are the results of the risk ranking supported by the risk evaluation model/method?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Inspector's Comments										
29	.1007(c)	Did the operator validate the results generated by the risk evaluation model/method? Briefly describe.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Inspector's Comments										
30	.1007(c)	Does the documentation provided by the operator demonstrate implementation of the element "Evaluate and Rank Risk"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Inspector's Comments										

192.1007 (d) Identify and implement measures to address risks						
Question No.	Rule §192	Description	S/Y	U/N	N/A	N/C
31	.1007 (d)	Does the plan include procedures to identify when measures, beyond minimum code requirements specified outside of Part 192 Subpart P, are required to reduce risk?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
32	.1007 (d)	When measures, beyond minimum code requirements specified outside of Part 192 Subpart P, are required to reduce risk, does the plan identify the measures selected, how they will be implemented, and the risks they are addressing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
33	.1007 (d)	Complete the table at the end of this form: <i>Threat Addressed, Measure to Reduce Risk, and Performance Measure</i>				
Inspector's Comments						
34	.1007 (d)	Does the plan include an effective leak management program (unless all leaks are repaired when found) 1. Locate the leaks in the distribution system; <input type="checkbox"/> 2. Evaluate the actual or potential hazards associated with these leaks; <input type="checkbox"/> 3. Act appropriately to mitigate these hazards; <input type="checkbox"/> 4. Keep records; and <input type="checkbox"/> 5. Self-assess to determine if additional actions are necessary to keep people and property safe. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
35	.1007(d)	Does the documentation provided by the operator demonstrate implementation of the measures, required by Part 192 Subpart P, to reduce risk?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						

192.1007(e) Measure performance, monitor results, and evaluate effectiveness

Question No.	Rule §192	Description				S/Y	U/N	N/A	N/C
	.1007(e)	i) Number of hazardous leaks either eliminated or repaired, categorized by cause?	ii) Number of excavation damages?	iii) Number of excavation tickets received by gas department ?	iv) Total number of leaks either eliminated or repaired categorized by cause?	v) Number of hazardous leaks either eliminated or repaired, categorized by material?	vi) Any additional measures the operator determines are needed to evaluate the effectiveness of the IM program in controlling each identified threat?		
36	Does the plan contain written procedures for how the operator established a baseline for each performance measure?	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.		
37	Does the plan establish a baseline for each performance measure?	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.		
38	Does the operator have written procedures to collect the data for each performance measure?	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.		
39	Do the written procedures require the operator to monitor each performance measure?	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.	Choose an item.		
Mark each box above with one of the following: S for "Satisfactory", U for "Unsatisfactory", N/A for "Not Applicable" and N/C for "Not Checked".									
Inspector's Comments									
40	.1007 (e)	When measures are required to reduce risk, do the written procedures provide how their effectiveness will be measured?				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments									
41	Information Only	Can the performance measures identified by the operator in the plan be counted, monitored, and supported?				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments									
42	.1007(e)	Does the documentation provided by the operator demonstrate implementation of the element "Measure Performance, Monitor Results, and Evaluate Effectiveness"?				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments									

192.1007(f) Periodic Evaluation and Improvement

Question No.	Rule §192	Description	S/Y	U/N	N/A	N/C
43	.1007 (f)	Do the written procedures for periodic review include: <ul style="list-style-type: none"> a. Frequency of review based on the complexity of the system and changes in factors affecting the risk of failure, not to exceed 5 years? b. Verification of general information (e.g. contact information, form names, action schedules, etc.)? c. Incorporate new system information? d. Re-evaluation of threats and risk? e. Review the frequency of the measures to reduce risk? f. Review the effectiveness of the measures to reduce risk? g. Modify the measures to reduce risk and refine/improve as needed (i.e. add new, modify existing, or eliminate if no longer needed)? h. Review performance measures, their effectiveness, and if they are not appropriate, refine/improve them? 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
44	Information Only	Does the plan contain a process for informing the appropriate operating personnel of an update to the plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
45	Information Only	Does the plan contain a process for informing the appropriate regulatory agency of a significant update to the plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
46	.1007(f)	Does the documentation provided by the operator demonstrate implementation of the element "Periodic Evaluation and Improvement"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector Comments						

192.1007(g) Report results

Question No.	Rule §192	Description	S/Y	U/N	N/A	N/C
47	.1007(g)	Does the plan contain or reference procedures for reporting, on an annual basis, the four measures listed in 192.1007(e)(1)(i) through (e)(1)(iv) to PHMSA as part of the annual report required by § 191.11 and the State regulatory authority?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
48	Information Only	When required by the State, does the plan identify the specific report form, date, and location where it is to be submitted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
49	.1007(g)	Has the operator submitted the required reports?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						

192.1009 What must an operator report when mechanical fittings fail?

Question No.	Rule §192	Description	S/Y	U/N	N/A	N/C
50	.1009	Does the operator have written procedures to collect the information necessary to comply with the reporting requirements of 192.1009?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						

192.1011 What records must an operator keep?

Question No.	Rule §192	Description	S/Y	U/N	N/A	N/C
51	.1011	Does the operator have written procedures specifying which records demonstrating compliance with Subpart P will be maintained for at least 10 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
52	.1011	Does the operator have written procedures specifying that copies of superseded integrity management plans will be maintained for at least 10 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						
53	.1011	Has the operator maintained the required records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspector's Comments						

Table 1: Threat Addressed, Measure to Reduce Risk, and Performance Measure

For the top five highest ranked risks from the operator’s risk ranking list the following:

- Primary threat category (corrosion, natural forces, excavation damage, other outside force damage, material or weld, equipment failure, incorrect operation, and other concerns);
- Threat subcategory (GPTC threat subcategories are acceptable. Try to be specific. Example, failing bonnet bolts of gate valve, manufacturer name, model #);
- Measure to reduce the risk (list the one measure the operator feels is most important to reducing the risk);
- Associated performance measure.

	Primary Threat Category	Threat Subcategory, as appropriate	Measure to Reduce Risk	Performance Measure
1				
2				
3				
4				
5				

Other Inspector Comments	
--------------------------	--