



Office of Training
and certification

New Jersey Division of Fire Safety

BASIC PRACTICAL SKILLS EXAMINATION REPORT

Skill sheet #

HMA-6

Certification Title

**Hazardous Materials, Awareness Level
INITIATING REQUIRED NOTIFICATIONS**

Applicant Information

Candidate name

DFS ID #

Course #

Evaluation

Standard:

**NFPA 470 - 2022 Edition:
5.4.1**

Task

Given approved communication equipment, initiate the notification process required at a hazardous materials/WMD incident.

Conditions and Outcome

Given a working portable radio, a hazardous materials/WMD incident, and the required information, the candidate will demonstrate the operation to complete the questions below. **The candidate will complete this task with a minimum of 4 items answered correctly.**

Hazardous Materials Incident: An overturned Wawa tank truck placarded 1203 at the intersection of Main Street and US Route #1. The tank is dented and currently leaking slowly with the leak flowing toward a storm drain.

Number	Task Steps	First Test		Retest #1		Retest #2	
		Pass	Fail	Pass	Fail	Pass	Fail
1.	Correctly demonstrates use of portable radio.						
2.	Contacts dispatch and transmits notification of the accident.						
3.	Transmits the correct information about the chemical.						
4.	Transmits the correct information about the tank truck.						
5.	Transmits the correct information about the possible environmental hazards.						
Final Test Result for Entire Task							
Evaluator signature & comments, Test #1		Evaluator signature & comments, Retest #1		Evaluator signature & comments, Retest #2			
Evaluator signature		Evaluator signature		Evaluator signature		Evaluator signature	
Date		Date		Date		Date	
Candidate signature & acknowledgement, Test #1		Candidate signature & acknowledgement, Retest #1		Candidate signature & acknowledgement, Retest #2			
By my signature below, I acknowledge I have read and understood the evaluation results and evaluator comments		By my signature below, I acknowledge I have read and understood the evaluation results and evaluator comments		By my signature below, I acknowledge I have read and understood the evaluation results and evaluator comments			
Candidate signature		Candidate signature		Candidate signature		Candidate signature	
Date		Date		Date		Date	

Form DFS-SS-1, 10/12

Approved by NJ SME Committee 11/28/23.

Updated 03/05/2024