

Office of Training and Certification	<h2 style="text-align: center;">New Jersey Division of Fire Safety</h2> <h3 style="text-align: center;">BASIC PRACTICAL SKILLS EXAMINATION REPORT</h3>						
	Skill sheet # HMT-58	Certification title <h3 style="text-align: center;">Hazardous Material Technician</h3>					
Applicant Information							
Candidate name				DFS ID #		Course #	
Evaluation							
Standard: NFPA 470, 2022 edition 11.4.3.4		Task					
		Conduct liquid transfer operations involving a leaking non-pressure container.					
		Conditions and Outcome This skill involves the use of actual or simulated hazardous materials samples, hazardous materials can cause serious injury or fatality. While wearing the appropriate PPE and taking the appropriate safety precautions, demonstrate the following general skill steps; Competency is demonstrated by performing all steps correctly. Special Note: Specific procedures will vary depending on the equipment used. Always follow the manufacturer's instructions for complete directions.					
Number	Task Steps	First Test		Retest #1		Retest #2	
		Pass	Fail	Pass	Fail	Pass	Fail
1	Ensure proper product control techniques is chosen.						
2	Ensure that all responders involved in the control function are wearing appropriate PPE for preforming liquid transfer operation and that appropriate hand tools have been selected.						
3	Select a location to efficiently and safely perform the liquid transfer operation.						
4	Protect exposures and personnel.						
5	Follow safety procedures.						
6	Minimize / avoid hazards.						
7	Complete hazards monitoring requirements.						
8	Ensure recovery container is compatible with liquid product.						
9	Recognize the need to suppress vapors.						
10	Bond and ground containers following steps taught in previous skill steps.						
11	Use approved liquid transfer method to transfer product to recovery container.						
12	Decontaminate tools.						
13	Advance to decontamination line for decontamination.						
14	Inspect and maintain tools and equipment as per local SOPs and manufacturers recommendations.						
15	Complete required reports and supporting documentation.						
Final Test Result for Entire Task							
Evaluator signature & comments, Test #1		Evaluator signature & comments, Retest #1		Evaluator signature & comments, Retest #2			

Evaluator signature	Date	Evaluator signature	Date	Evaluator signature	Date
Candidate signature & acknowledgement, Test #1		Candidate signature & acknowledgement, Retest #1		Candidate signature & acknowledgement, Retest #1	
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	Date	Candidate signature	Date	Candidate signature	Date

Form DFS-HMT-SS-58

Approved by NJSME Committee 02/27/19

Revised by NJSME Committee 01/06/2023

Revised 4/9/2023 (RVH)