					Lvaldatio	ii Saiiiiia	i y Silect		
Na	me				Riley Willet		rdg		
Eva	aluat	tor			j gebhart	Date	11/4/21		
					Employee Number	10352831			
7			ation	r (FE)	form. For tasks requiring simulat	ion/performance, all s	sks using approved method(s) noted on the Field steps were completed per the FE form. These ance with UGI Utilities Inc., OQ Plan.		
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nitial Qual.	Requalificatio n	Written Test	Simulation	Destructive	Task No. and T	itla	Comments		
_=	χ	×	Si	D	27 Investigating leak/odo		Comments		
	v	x			102 Leak Survey - Propane l				
	x				1031 Annual Emergency Response I				
	х	х			1033 ICS Revie				
	x				1027 ICS Awareness for Natura	l Gas Emergencies			
	x		х		910 Fire Extinguisher Tra	aining (2 yr)			
	-1				d				
га	скпо	wied	ige, t	vaseo	a on tests and observation, that the	listed tasks.	idual has demonstrated the ability to complete the		
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Initial Qual.	Requalification	Written Test	Simulation	Destructive	Task No. and Title	Comments						
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l ac	knov	wled	ge, b	ased	d on tests and observation, that the above named indiv	ridual has demonstrated the ability to complete the						
					listed tasks.							
	ı	Print	Nan	ne:	Print Name: Signature: Date:							



Energy to do more LEARNING CENTER

DATE 11/8/22								
COURSE FR + Duty Sup								
SAFETY MOMENT								
INSTRUCTOR/S Geb har								

PLEASE PRINT CLEARLY

PRINT NAME	SIGNATURE	EMPLOYEE #	COMPANY	CLICKER#
1. Zob Wholme		S 6341781	uel	
2. Fred tables		10 47 1039	UOI	
3. John Tompkins		10340182	VOI	
1. DAVID STAHOUICH		10 33 9966	NGI	
i. MIKE DUM		10341149	UGI	
i. Brian Morris		10379724	UGT	
· Amarca Dracter		10352998	UGI	
· Ryan Hanna		10348360	UGI	
. Aren Myers		10357309	UGI	
O. Even Cock		10343836	UGI	
1. Krymond NiCAIST		10339758	UGE	
2. Ber tradock		10340690	461	
3. TROY Haxee		10340251	405	
1. Kyle Joseph		10346137	UGI	
i. Dwayne Rodriguel		10341708	UGI	
i. In Literson		339831	Vat	
· Just Broy		10346104	Val	
. JON MCKENCIE		103919	U67	
· Andry Mugus		10339768	VGI	
· Som Placedo		10341113	UGI	

ill there

"I take time to perform my work safely, every day. My family, my team, my customers are depending on me. I stand vigilant and when called upon...i'llbethere."



Energy to do more LEARNING CENTER

DATE 11/8/22	
COURSE ER - Duty Suf	
SAFETY MOMENT Deer	
INSTRUCTOR/S Gebhar	

PLEASE PRINT CLEARLY

SIGNATURE	EMPLOYEE #	COMPANY	CLICKER#
			CLICKER
	The state of the s		
	10390220	1001	
		-	
	SIGNATURE	SIGNATURE EMPLOYEE # 0345726 10339789 1035022 1034022 103902 1039	10345726 UGI 10541(91 UCI 10339789 UGI 1035072, UGI

I'll there

"I take time to perform my work safely, every day. My family, my team, my customers are depending on me. I stand vigilant and when called upon...i'llbethere."



Energy to do more LEARNING CENTER

DATE 11/9/2	2
COURSE_FR	+ Duty Sup
SAFETY MOMENT	Wet leaves
INSTRUCTOR/S	Gebhan

PLEASE PRINT CLEARLY

PRINT NAME	SIGNATURE	EMPLOYEE #	COMPANY	CHCKED#
1. Joc Levan				CLICKER#
2. Steve wise		338857	UST	
3. Janes Soies		10340878	067	
4. Bras Eve tree		10341407	UCF	
		10340231	067	
11 11400		10339991	405	
7. Logan Morris		10343987	UGI	
		10341206	U61	
1		10341742	UGI	
		10341.801	UGE	
10. be Mossis		340216	NG-I	
11. River Walt		10352831	UGI	
12. Lach Beckey		10341493	UG	
13. Andrew Francemens		10341412	126I	
14.			Vol	
15.				
16.				
L7.				
18.				
19.				
20.				

i'll there

"I take time to perform my work safely, every day. My family, my team, my customers are depending on me. I stand vigilant and when called upon...i'llbethere."

2022 Emergency Response Review

Answers sheet

Name: Ditey Will+

Date: 11-9-22

Employee # 10352 831

Proctor: Gebrat

TEST

1. A B C D
2. T F
3. A B C D
4. T F
5. A B C D
7. A B C D
8. A B C D
9. A B C D
10. T F
11 T F
12 T F
13. A B C D
14. A B C D
15. A B C D
15. A B C D
16. T F
17. A B C D
18. A B C D
18. A B C D
18. A B C D
19. A B C D
19. A B C D

Evaluato	r	-			•				
Evaluato	r								
				j gebhart	Date	11/9/22			
Employee Number 10352831									
		tion	(FE)	form. For tasks requiring simulatio	n/performance, all s	isks using approved method(s) noted on the Field steps were completed per the FE form. These ance with UGI Utilities Inc., OQ Plan.			
		1		Γ					
Initial Qual. Requalification	Written Test	Simulation	Destructive	Task No. and Titl	le	Comments			
x :	х			27 Investigating leak/odor c	complaints				
× :	х			1031 Annual Emergency Response Re	view UGI Employees				
x :	х			102 Leak Survey - Propane ba	rhole survey				
×				1000 Duty Supervisor Annu	ıal Review				
			ased		e above named indiv listed tasks. nature:	idual has demonstrated the ability to complete the Date:			

Employee Number	10352831		
•	•		

Initial Qual.	Requalification	Written Test	ation	Destructive					
Initial	Requa	Writte	Simulation	Destri	Task No. and Title	Comments			
l ad	I acknowledge, based on tests and observation, that the above named individual has demonstrated the ability to complete the listed tasks.								
	Print Name: Signature: Date:								