

Non-routine operational procedure form

1. OUTLINE, APPROVALS, AUTHORITY, CIRCULATION

A) Network ID:	B) Organisation:	C) Project / 3 rd Party Ref.	D) NRO Number:	
E) Location:		Post Code:		
F) Outline of objectives: Pressure range:				
G) Map References		Start date:	End date:	
Start: E:	N:	Time:	Time:	
End: E:	N:			
H) Extension approved by: Print names & dates Revised End date & Time:				
I) Details of effect on gas supplies: Has Network Analysis been consulted? YES/NO. If YES, please append details. If NO, please provide reason.				
J) Are there any long term plant/mains outages planned? YES/NO/ N/A. If YES, please append details.		Start date:	End date:	
		Time:	Time:	
K) Is Adjacent Network Controller clearance required?	YES/NO	O) Work Instruction Reference Number		
L) Is G.T. approval required?	YES/NO	P) Approved GL/5, G/17 or G/19 Number(s)		
M) Is DNCC approval required?	YES/NO	Q) Is Odorant Present?	YES/NO	
N) Is GNCC approval required?	YES/NO	R) Status of NRO	DRAFT / FINAL Version No.	
S) Is Meter Operations Controller approval required?	YES/NO	T) Is a Permit to Work required?	YES/NO Permit No.	
U) APPROVALS	NAME	POSITION	SIGNATURE	DATE
Prepared by:				
GNCC				
DNCC				
Comments on Procedure:		Action by Originator:		
NOTE: If the procedure is not approved, it should be modified and resubmitted. If the comments are noted but not actioned, the originator of this procedure must provide an explanation prior to re-submission for authorisation.				
COMPETENT PERSON with OVERALL responsibility	<u>NAME</u>	<u>POSITION</u>	<u>SIGNATURE</u>	<u>DATE</u>
Authorising Engineer(s) Authorised by:				
Mentor Counter Signed				
Network Controller Clearance to proceed				

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V) CIRCULATION LIST (including all those approving the document)

Name	Title	Date	No. of copies

W) PERSONS IN AUTHORITY

	Name	Position	Area of responsibility
COMPETENT PERSON with OVERALL responsibility			
Other COMPETENT PERSONNEL and their Sub Areas of responsibility			

X) EFFECT ON OTHER GAS TRANSPORTERS SYSTEMS

Gas transporters name	Contact name and telephone number	Details of operational arrangements

Y) EFFECT ON MAJOR SUPPLY POINTS

Supply point name	Contact name and telephone number	Date Contacted	Details of operational arrangements

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NON-ROUTINE OPERATIONAL PROCEDURE (GDN/PM/SCO/4)

1.1 SUMMARY OF NON-ROUTINE OPERATIONAL PROCEDURE

Reason for Procedure:

Short description of method:

Duration of operation and number of phases

Phase 1	
Phase 2	
Phase 3	

1.2 ESSENTIAL GAS SUPPLY ASPECTS

Supply sources required for operation with minimum pressures:

Governor input/output sources affected/turned off during operations:

System alarms/pressure recorders affected:

Diameter / Length / Material of bypass:

1.3 SECTION OF PIPELINE ISOLATED DURING OPERATIONS

Provide details

2. PERSONNEL & COMMUNICATIONS

	Name	Location	Phone No.	Call sign	Duties
2.1					
2.2					
2.3					

3. WORK PRELIMINARY TO OPERATION (attach any relevant calculations, network analysis details, etc. to section 10 of this procedure)

	Item	Action by	Verified by
3.1			
3.2			
3.3			

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NON-ROUTINE OPERATIONAL PROCEDURE (GDN/PM/SCO/4)

3a HAZARDS AND RISK

The Competent Person shall confirm that this Written Procedure has been fully communicated and understood by all personnel involved and there are no additional hazards to those already identified by company risk assessment information, e.g. in the Hazards and Precautions booklet, and that precautions are in place.

Where there are additional hazards, which are not identified by the company, e.g. within the Hazards and Precautions booklet, these shall be listed below with the control measures that have been taken and that the Authorising Engineer has been informed, e.g. Other hazards - Separation of fittings (non-end loading). Control measures shall provide adequate temporary or permanent anchorage arrangements; the procedure shall detail how this will be achieved (identify relevant part of Section 6) by showing calculations and dimensions of the thrust restraint to be used.

Other hazards	Control measures	Verified by

4. TOOLS, EQUIPMENT, MATERIAL, ETC., REQUIRED (supplementary sheets can be added)

	Item/description	Action by	Verified by
4.1			
4.2			
4.3			

5. GAS SUPPLY POSITION, VALVE STATUS, ETC., AT START OF OPERATION

	Location	Valve No's	Open / Closed / Not fitted	Vented	Verified by
5.1					
5.2					
5.3					

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NON-ROUTINE OPERATIONAL PROCEDURE (GDN/PM/SCO/4)

6. OPERATIONS TO BE CARRIED OUT (reference may be made to relevant standards where they apply, and copies of these shall be available on site in electronic or hard copy)

Confirmation checks prior to starting NRO

	Item/description	Action by	Verified by
6.1	Confirmation that all work preliminary to operation are complete		
6.2	Confirm that all the hazards identified in Section 3a have the appropriate control measures in place.		
6.3	Confirm that this Written Procedure has been fully communicated and understood by all personnel involved.		

PHASE 1

	Item/description	Action by	Verified by
6.4			
6.5			
6.6			

PHASE 2

	Item/description	Action by	Verified by
6.7			
6.8			
6.9			

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NON-ROUTINE OPERATIONAL PROCEDURE (GDN/PM/SCO/4)

7. CONTINGENCY PLAN IN THE EVENT OF AN EMERGENCY (SEE APPENDIX C FOR GUIDANCE) (MANDATORY)

	Contact name	Date	Time
Emergency declared			
Authorising Engineer informed			
Responsible Engineer informed			
GNCC, DNCC informed			
Network Controller informed			

7.1 ON SITE CONTINGENCY PLAN 1

Reasons for implementing this plan:
Consequence:

ON SITE CONTINGENCY PLAN 1 - ACTIONS

	Action	Action by	Verified by
7.1.1			
7.1.2			
7.1.3			

Authorising Engineer Responsible:	Contact No's
Network Controller:	Contact No's

7.1 ON SITE CONTINGENCY PLAN 1

	Action	Action by	Verified by
7.1			
7.2			
7.3			

ON SITE CONTINGENCY PLAN 2 - ACTIONS

	Action	Action by	Verified by
7.2.1			
7.2.2			
7.2.3			

Authorising Engineer Responsible:	Contact No's
Network Controller:	Contact No's

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NON-ROUTINE OPERATIONAL PROCEDURE (GDN/PM/SCO/4)

7.3 OFF SITE CONTINGENCY PLAN 1

Reasons for implementing this plan:
Consequence:

OFF SITE CONTINGENCY PLAN 1 - ACTIONS

	Action	Action by	Verified by
7.3.1			
7.3.2			
7.3.3			

Authorising Engineer Responsible:	Contact No's
Network Controller:	Contact No's

7.4 OFF SITE CONTINGENCY PLAN 2

	Action	Action by	Verified by
7.3.1			
7.3.2			
7.3.3			

Authorising Engineer Responsible:	Contact No's
Network Controller:	Contact No's

EMERGENCY DECLARED OVER

Date:		Time:	
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NON-ROUTINE OPERATIONAL PROCEDURE (GDN/PM/SCO/4)

8. COMPLETION CHECK ON GAS SUPPLY POSITION, VALVE STATUS, PRESSURE RECORDERS

	Location	Valve No's	Open / Closed / Not fitted	Vented	Verified by
8.1					
8.2					
8.3					

9. COMPLETION ADVICE (FORMAT IN TABULAR FORM)

NOTE: Advice should be given to all authorising and approval signatories in addition to other appropriate companies/personnel aware of the procedure.

	Item	Action by	Verified by
9.1			
9.2			
9.3			

10. ENCLOSURES, SKETCHES & DRAWINGS OF WORK (FORMAT IN TABULAR FORM)

List and include all appropriate OS maps, schematic/spider drawings, Network Analysis profiles, purge/vent calculations, anchorage calculations etc.

	Item	Action by	Verified by
10.1			
10.2			
10.3			

SKETCHES AND DIAGRAMS OF WORK (identify pressure points, vent points, purge points, pipe diameters and materials, etc.

Note: Symbols used on drawings/sketches/diagrams shall comply were defined from specification document (Company reference)/SP/CDO/1 or other relevant company or industry standard.

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