



"The Medical Gas Professionals"

ASSE 6020 Medical Gas Systems Inspectors Training Course

The ASSE 6020 Medical Gas Systems Inspectors Course consists of 24-hours of training covering all facets of ASSE Standard 6020, NFPA 99-2015, and NFPA 55.

The Course will be taught by a certified ASSE 6050 Medical Gas Instructor.

The Training is designed to teach the attendee the requirements to properly inspect Medical Gas Systems IAW ASSE 6020, NFPA 99-2015 & NFPA 55.

The course is broken down into three (3) eight (8) hour days:

Day 1- NFPA 99-2015, Chapter 5.1 Category 1 Piped Gas & Vacuum Systems & ASSE 6020

Day 2- NFPA 99-2015, Chapter 5.1 Category 1 Piped Gas & Vacuum Systems & ASSE 6020

Day 3- NFPA 99-2015, Chapters 5.2 Category 2 & 5.3 Category 3 Piped Gas & Vacuum Systems

*Written Examination

*This examination is covered under NITC's scope of accreditation by the American National Standards Institute (ANSI). The Exam consists of a proctored, closed book multiple-choice one hundred (100) question written examination.

Individuals who successfully complete this course will be certified through NITC as an ASSE/6020 medical gas system inspector.

The price for the course is \$1000.00/person for classes of 8 or more; \$1200.00/person for classes of less than 8 (minimum class size is 6). *Applicant's must pay in advance to be considered enrolled in the class.

Classes can be conducted in conjunction with a weekend, e.g. Friday – Monday.



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Application for ASSE 6020 Medical Gas Systems Inspector

First & Last Name: _____ S.S. #: (last six) XXX- - _____

Address: _____ Residence Phone: () - _____

City, State: _____ Zip: _____

Email: _____ Work Phone: () - _____ Cellular Phone: () - _____

Candidates for ASSE 6020 Certification shall be employed by a Governmental Unit as a Plumbing and/or Mechanical Inspector, or as an administrator of such persons; or be a person regularly involved in the Design, Inspection, Verification of Medical Gas Systems or be a ASSE 6010 Installer. Candidates shall have a minimum of two (2) years of Documented Practical Experience or any combination of the above.

My Signature below represents that I meet the prerequisites stated above.

Signature of Applicant: _____ Date: _____