



Pipeline Safety Division Investigation Report

Investigation regarding: **Electricom, Inc.**

UPPAC Database Record ID: 1341

Investigator: Howard Friend

Telephone: 317-232-2717

Report Date: 01/23/2012

Damage Date: 10/06/2010

Damage Address: Hawkstone Dr

City: Fortville

County: Hamilton

The Parties

Excavator: **Electricom, Inc.**

Contact: Doug Kirby

Address: 1660 West Hospital Road, P.o. Box 319, Paoli, In 47454

Telephone: (812) 723-2626

Facility Owner: Vectren

Contact: Darlene Kulhanek

Address: 1 N Main Street, Evansville, IN 47702

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Investigation regarding: Electricom, Inc.

UPPAC Database Record ID: 1341

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 2

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$4028

Excavator Activities/Cause of damage information:

Excavator request locates: Yes Indiana 811 ticket Number: 1009153192

Type of Equipment: Boring

Type of work performed: Telecommunications

Synopsis: Damage to a 2" natural gas main occurred during a horizontal boring operation to install conduit for a fiber optic cable.

Findings: Reported by Indiana 811; excavator signed for initial notice on 09/26/2011 but has not submitted a response. Damage to gas main occurred 21 days after date of locate ticket.

Conclusion: Ticket had expired therefore there was no valid notice of excavation.

Violation: IC 8-1-26-16(g): Failure to provide notice of excavation.

Electricom, Inc. currently has 15 reports of damages in the record, between 07/16/2009 and 10/12/2010.

Ticket ID: Version: 00 Notice ID: IUPPS2010091503304
Taken Time: 09/15/2010 22:10
NoticeType: Normal Notice

Case ID 1341

NORMAL NOTICE JOB EXTENSION

Ticket : 1009153192 Date: 09/15/2010 Time: 22:10 Oper: RMCLELLAN Chan:036

State: IN Cnty: HAMILTON Twp: FALL CREEK
Cityname: FORTVILLE Inside: N Near: Y
Subdivision:

Address :

Street : HAWKSTONE DR
Cross 1 : STONEGATE DR Within 1/4 mile: Y
Location: LOCATE FROM 13846 HAWKSTONE DR LOCATE TO THE EAST ON THE SOUTH SIDE OF
HAWKSTONE DR TO THE INTERSECTION OF HAWKSTONE DR AND STONEGATE DR APPROX 900
FEET

***Boring Where = WITHIN THE COUNTY R/W AND UTILITY EASEMENT

Grids : 3956C8554A 3956B8554A 3956C8555D 3956B8555D

Work type : PLACING CONDUIT FOR FIBER OPTIC CABLE
Done for : HANCOCK TELECOM
Start date: 09/20/2010 Time: 07:00 Hours notice: 104/048 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N
Duration : 3 WEEKS Depth: 9 FEET

Company : ELECTRICOM INC Type: CONT
Co addr : PO BOX 319 / 1660 WEST HOSPITAL ROAD
City : PAOLI State: IN Zip: 47454
Caller : DOUG KIRBY Phone: (812)723-2626
Contact : DOUG KIRBY - CELL Phone:
BestTime:
Mobile : (812)653-7622
Fax : (812)723-5654

Remarks : All tickets are taken and processed on Eastern Daylight Time
PER LARRY: THIS IS A JOB EXTENSION - NEED ALL UTILITIES TO REMARK AS NEEDED -
PREVIOUS TICKET NUMBER 1008312132 - THANK YOU!
Will you be white-lining the dig site area? NO

Submitted date: 09/15/2010 Time: 22:10
Members: ID0103 ID0660 ID1500 ID3131 ID3162 ID3642 ID4119 ID4417 SM

Service Area: ID0103 (VECTREN - NOBLESVILLE #1)
Contact: Darlene Jarboe
Ph: Emerg Ph: Alt Ph:

Service Area: ID0660 (COMCAST NORTHEAST (NOBLESVILLE))
Contact: DALE LAMBERT
Ph: (765)646-9113 x9109 Emerg Ph: Alt Ph:

Service Area: ID1500 (VWIOUTSIDE (FORMERLY VEOLIA WATER HARBOUR))
Contact: Charline Avey
Ph: (317)263-6337 Emerg Ph: Alt Ph:

Service Area: ID3131 (NINE STAR CONNECT / FORMERLY HANCOCK TELECOM)
Contact:
Ph: Emerg Ph: Alt Ph:

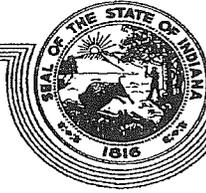
Service Area: ID3162 (FISHERS, TOWN OF)
Contact: TAMI OTTO
Ph: (317)595-3412 Emerg Ph: Alt Ph:

Service Area: ID3642 (HAMILTON SOUTHEASTERN SEWER)
Contact: DENNIS SINGER
Ph: (317)577-1150 x205 Emerg Ph: Alt Ph:

Service Area: ID4119 (HAMILTON SOUTHEASTERN SCHOOL CORP.)
Contact: BRAD SILBERT
Ph: (317)594-4100 x2156 Emerg Ph: Alt Ph:

Service Area: ID4417 (NINE STAR CONNECT / FORMERLY CENTRAL INDIANA POWER)
Contact: ID4417 Web Account

STATE OF INDIANA



INDIANA UTILITY REGULATORY COMMISSION
101 W. WASHINGTON STREET, SUITE 1500E
INDIANAPOLIS, INDIANA 46204-3407

<http://www.in.gov/iurc>
Office: (317) 232-2701
Facsimile: (317) 232-6758

September 20, 2011

Ms. Darlene Kulhanek
Vectren
1 N Main Street
Evansville, IN 47702

Subject: Investigation Request for Information

Date of Event: 10/6/2010

Event Location: Hawkstone Dr., Fortville

Facility Owner: Vectren

Excavator: Electricom, Inc.

Other Party: N/A

Pipeline Division Case No. 1341

Dear Ms. Kulhanek:

Pursuant to Indiana Code 8-1-26, the *Indiana Damage to Underground Facilities Act*, the Pipeline Safety Division of the Indiana Utility Regulatory Commission ("Pipeline Division") is required to investigate reported incidents of alleged statutory violations involving underground pipeline safety. The purpose of this statute is to promote excavation and pipeline safety and to reduce the imminent danger to life, health, property, or loss of service associated with unsafe digging practices. Please note that the investigation does not entail determining criminal liability or a civil determination of fault or damages; however, it does determine whether any statutory violations were committed regarding public safety.

The Pipeline Division received information regarding potential statutory violations regarding the date and location referenced above. You were identified as a person or entity that might have information that would assist the Pipeline Division in its investigation. Therefore, we have contacted you in order to receive the full account of information in order to make a fair determination related to the circumstances of this incident.

We have asked all involved parties, entities and witnesses to provide *written* information within *30 days* in order to meet legal deadlines to conclude our investigation. **Please consider this letter as a formal request to receive any and all information and evidence (including a narrative, documentation,**

RECEIVED

SEP 23 2011

INDIANA UTILITY
REGULATORY COMMISSION

maps, photographs or any other written information) you can access regarding anything you may know about the incident referenced above.

Please promptly provide your information to: Pipeline Safety Division – Case No. 1341, Indiana Utility Regulatory Commission, 101 West Washington Street, # 1500E, Indianapolis, IN 46204. Also, please include the Investigation Number referenced above on your materials. In the alternative, if you would prefer to scan the materials and send them electronically, please send the documents to: PipelineDamageCase@urc.in.gov.

Although you are not a formal party in this investigation, please treat this request for information seriously, because the potential civil penalties for violations include: a potential civil fine up to \$10,000.00; mandatory education and training for employees regarding pipeline safety; a required development plan to avoid future violations; or a warning letter for certain homeowner/tenants who are first time offenders. Consequently, your input will assist the Pipeline Division with its determination and may have a substantial impact on the case.

After the investigation is completed, the Pipeline Division will prepare an Investigation Report with findings and forward it to the Underground Plant Protection Advisory Committee (“Advisory Committee”). This is a statutory committee, comprised of excavators, facility operators, investor and municipal utilities, the 811 Association and facility locate marking companies, whose role is to evaluate the Pipeline Division’s findings and make a recommendation for a civil penalty. In the event there is disagreement regarding the Advisory Committee’s recommendation to the Commission, parties are entitled to request a hearing before the full Commission. If there is a violation, the Indiana Utility Regulatory Commission (“Commission”) will impose the penalty. Any fines imposed are statutorily required to be spent funding the Commission’s training and educational programming to promote excavation and pipeline safety.

Thank you for your *prompt* assistance in providing written information to the Pipeline Division regarding the previously referenced incident. Any information received after the deadlines will not be considered in the investigation, will be unavailable to the Advisory Committee and will result in a lack of full information being made available; hence, your participation is vital to serving the interests of justice and enhancing the public’s safety. In an effort to assist you, please find an enclosure entitled “Information Request.” Should you have procedural or legal questions regarding the Underground Plant Protection Advisory Committee or the Indiana Utility Regulatory Commission, please contact David L. Welch, Assistant General Counsel, at (317) 234-4715. Should you have questions regarding the pipeline damage identified above, or our investigation, please contact me at (317) 232-2718. Thank you for your assistance.

Sincerely,



William Boyd
Director, Pipeline Safety Division

Enclosure: Information Request

Information Request

Pipeline Safety Division
Indiana Utility Regulatory Commission

The Pipeline Safety Division of the Indiana Utility Regulatory Commission requests any and all information you can provide regarding the following criteria:

The Parties:

Excavator Information:

Business Name: **Electricom Inc**

Responsible Party Personal Name: **Unknown**

Title (if any): **Unknown**

Address: **PO Box 319**

City, State Zip: **Paoli, IN 47454**

Preferred Telephone: **317-773-1282**

Cell Phone Number:

Email Address:

Facility Information:

Business Name: **Vectren Energy**

Responsible Party Personal Name: **Darlene Kulhanek**

Title (if any): **Manager Facilities Damages**

City, State, Zip **Evansville, IN 47711**

Address: **1 Main Street**

Preferred Telephone: **812-491-4227**

Cell Phone Number: **812-568-5235**

Email Address: **Dkulhanek@vectren.com**

Locator Senrice Information:

Business Name: **USIC Inc.**

Responsible Patty Personal Name: **Morgan Thompson**

Title (if any): **Claims Coordinator**

Address: **9045 N. River Rd., Suite 300**

City, State Zip: **Indianapolis, IN 46240**

Preferred Telephone: **317-575-7800x109**

Cell Phone Number:

Email Address: **morganthompson@usicinc.com**

Other (Witness, Police, Fire, Othea) Information: **Fire**
Personal Contact: Business/Organization Name: N/A

Title (if any)

Address:

City, State, Zip Preferred Telephone:

Cell Phone Number:

Email Address:

Utility Line Impact:

Product Type (circle one):

Natural Gas

Liquid Pipeline

Unknown/Other

Facility Type (circle one):

Distribution

Gathering

Service/Drop

Transmission

Unknown/Other

Size (Diameter/etc.): 2"

Pressure (PSIG/Inches): 60 PSIG

Interruption in Service: Yes / No

Number of Customers Affected: 2

Evacuation: Yes / No If yes, How Many Evacuated? 0

Repair Cost (if known): \$ 4028.06

Cause of Damage Information:

Type of Equipment (circle one):

Auger

Backhoe/Trackhoe

Boring /Drilling

Directional Drilling

Explosives

Farm Equipment

Grader/Scraper

Hand Tools

Milling Equipment

Probing Device

Trencher

Vacuum Equipment

Unknown/Other

Type of Work Performed (circle one):

- Agriculture Cable
- TV Curb/Sidewalk
- Bldg. Construction
- Bldg. Demolition
- Drainage
- Driveway Electric
- Engineering/Surveying
- Fencing
- Grading
- Irrigation
- Landscaping
- Liquid Pipeline
- Milling
- Natural Gas
- Pole
- Public Transit Authority
- Railroad Maintenance
- Road Work
- Sewer (Sanitary/Stom1)
- Site Development
- Steam
- Storm Drain/Culvert
- Street Light
- Telecommunications
- Traffic Signal
- Traffic Sign
- Water
- Waterway Improvement
- Unknown/Other

Release of Product: Yes / No

Ignition and/or Fire: Yes / No

Excavator Notify 811: Yes / No ?

Locate Information:

Excavator Request Locate: Yes / No

Indiana 811 Locate Ticket Number: 1009153192

Locate Marks Visible: Yes / No

Locate Marks Correct: Yes / No

Excavator "White Lined": Yes / No

Maps Used to Mark Facilities: Yes / No ?

Was Locate Provided within Two (2) Working Days: Yes / No

Operator Employees On-site during Excavation: Yes / No

Incident Impact Information:

Number of Outpatient Treated: _____ 0

Number of Inpatient Treated: _____ 0

Number of Fatalities: _____ 0

Fire Department Response: Yes / No

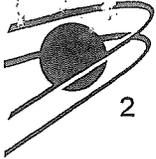
Police Department Response: Yes / No

Ambulance Response: Yes / No

Additional Information/Comments: _____

2" plastic main damaged by bore. Not hand exposed.

Multiple horizontal lines for additional information or comments.



2 VECTREN ENERGY DELIVERY OF INDIANA - NORTH

NOW DUE

\$4,028.06

ELECTRICOM INC
PO BOX 319,
PAOLI, IN 47454

PAID

Type: GAS

Invoice: FDS0013354

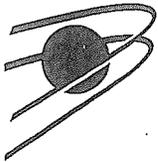
BillToID: 29357

Billing Date: 11/24/2010

Date of Loss: 10/6/2010

5830 103.0509

Please return this portion with your remittance.



Mail Payment To: VECTREN ENERGY DELIVERY OF INDIANA - NORTH
Vectren Utilities Holding Group, Inc.
1239 Reliable Parkway
Chicago, IL 60686-0012
Inquiries: 1-877-902-2934, Mon.-Fri., 8-5
Risk Management/Claims Department

NOW DUE

\$4,028.06

ELECTRICOM INC
PO BOX 319,
PAOLI, IN 47454

Type: GAS

Invoice: FDS0013354

BillToID: 29357

Billing Date: 11/24/2010

Date of Loss: 10/6/2010

Invoice For Costs to Repair and Reconstruct Damaged Property

Address: 10557 STONEGATE DR, FORTVILLE

2" PLASTIC MAIN DAMAGED BY BORE. NOT HAND EXPOSED.

Material:	\$147.94
Company Labor:	\$1,792.68
Contract Labor:	\$0.00
Transportation/Equipment:	\$269.81
Misc:	\$0.00
Gas Loss:	\$1,817.63
Adjustments:	\$0.00
Payments:	\$0.00
Total:	\$4,028.06

5830 103.0509

Remember, call two (2) working days before digging. Contact I.U.P.P.S. at 1-800-382-5544.

FACILITIES DAMAGE REPORT GAS

Vectren Corporation
Form 3112 (Rev. 10/04)

Task No.: 103.0509

Capital / O&M (circle one)

FDS 0013354

- Indiana Gas
- Sigeco
- Vectren Energy Delivery of Ohio

TIME: 3:30 AM/PM

DATE OF DAMAGE: 10/6/10

Cost Center No.: 5830

DAMAGE SITE ADDRESS: 10557 Stonegate Dr

LOT #: CITY: Fortville

FACILITIES DAMAGED

- MAIN
- SERVICE
- REGULATOR STATION
- FARM TAP
- RESIDENTIAL METER
- METER INDUSTRIAL/COMMERICAL
- OTHER

- SIZE(S)
- 0.50 INCH
 - 0.75 INCH
 - 1.00 INCH
 - 2.00 INCH
 - 4.00 INCH
 - 6.00 INCH
 - OTHER
- 2.185

TYPE OF MATERIAL

- PLASTIC
- STEEL
- CAST IRON
- OTHER

DAMAGE TYPE

- SEVERED
- NOT CUT
- PUNCTURE
- SIZE 1 1/2 X 2 1/2

PRESSURE

- 25 PSIG
- 40 PSIG
- 50 PSIG
- 60 PSIG
- 6 WC
- OTHER

PROTECTION IN PLACE

- RAIL
- POST
- NONE
- N/A

LEAK REPORT

638245

- ONE-WAY FEED
- TWO-WAY FEED

DURATION OF ESCAPING GAS

MINUTES 140
EFV ACTIVATED YES NO

DAMAGED BY

- CONTRACTOR
- MUNICIPALITY/UTILITY
- VEHICULAR ACCIDENT
- COMPANY CREW
- UNKNOWN
- PROPERTY OWNER/TENANT
- OTHER

TYPE OF CONSTRUCTION

- SEWER/DRAIN
- WATER
- ELECTRIC
- TELEPHONE
- CEMENT/PAVING
- TV CABLE
- FENCING
- FOOTERS
- OTHER: fiber optic cable

WORKING FOR

- CITY
- STATE
- PROPERTY OWNER
- OTHER: Hancock Co Phone Co

TYPE OF EQUIPMENT

- BACKHOE
- TRACKHOE
- PLOW
- TRENCHER
- BULLDOZER
- POSTHOLE DIGGERS
- BORE
- AUGER
- STAKE/SHOVEL
- OTHER

DAMAGING PARTY

- DID NOT REQUEST LOCATES
- DID NOT HAND DIG
- USED EXPIRED LOCATES
- OTHER

NUMBER OF CUSTOMERS

AFFECTED: 2

TOTAL HOURS SERVICE

WAS OFF:

INVOICE: YES NO

DAMAGING PARTY

NAME: Electr. Com

ADDRESS: 1660 W Hospital Rd or PO Box 2319

CITY/STATE/ZIP: Paoli, IN 47454

PREPARED BY: Jay Venable DATE: 10-6-10

2" Pla Main -
Bored 3" dia main
Contractor did not have main spotted

INCLUDE ANY OBSERVATIONS ON BACK OF FORM

VISUAL OBSERVATION AT DAMAGE SITE

- LOCATE NOT APPLICABLE (Above Ground Damage Only)
- FACILITIES PROPERLY MARKED
- MARKING METHODS: CONVENTIONAL OFFSET
- FLAGS PAINT STAKES WHISKERS
- LOCATE MARKINGS FADED: YES NO
- WRONG ADDRESS REQUESTED
- FACILITIES IMPROPERLY LOCATED
- QUALIFIED LOCATOR COULD NOT HAVE ACCURATELY LOCATED
- INACCURATE MAPS/CARDS
- BROKEN OR NO TRACER WIRE (PLASTIC)
- INSULATION PREVENTING ACCURATE LOCATE
- LOCATOR ERROR
- QUALIFIED LOCATOR COULD HAVE ACCURATELY LOCATED
- INCOMPLETE LOCATE
- MARKINGS OFF BY (FEET/INCHES)
- INAPPROPRIATE SITE MARKINGS
- NO LOCATE PERFORMED
- FAILURE TO FOLLOW POLICY
- WRONG ADDRESS LOCATED

OBSERVATION BY:

NAME OF LOCATOR:

- COPY OF MARKOUT REQUEST PROVIDED WITHIN 2 WORKING DAYS

NOTIFICATION AND OTHER DETAILS OF LOCATE

LOCATE TICKET #: DATE: TIME: AM/PM

- REGULAR REQUEST
- EMERGENCY REQUEST

- LOCATE COMPANY NOTIFIED

CONTACT NAME: TIME CALLED: AM/PM

TIME LOCATOR ARRIVED AT SITE: AM/PM

COMPANY NOTIFIED OF LOCATE NEAR CRITICAL FACILITIES:

- YES
- NO

CONTRACTOR REPAIRS

- CONTRACTOR WORKING FOR VECTREN MADE REPAIRS AT OWN EXPENSE
- CONTRACTOR REPAIRED DAMAGE

NAME OF CONTRACTOR:

OF REGULAR HOURS

OF OVERTIME HOURS

CREW TYPE

MATERIALS OR ROAD WORK

- METER WAS REPLACED (STORES CODE)
- REGULATOR WAS REPLACED (STORES CODE)
- TEMPORARY ASPHALT REPAIR (SQ. FT.)
- PERMANENT ASPHALT REPAIR (SQ. FT.)

PARTY TO INVOICE

NAME: Electr. Com

ADDRESS: 1660 W Hospital Rd

CITY/STATE/ZIP: Paoli, IN 47454

REVIEWED BY FIELD SUPERVISOR: DATE: 10-8-10

Locates were about 18" off mark

Monday, October 18, 2010

Service Order Status

Enter Service Order Number:

4576412



Banner Instance: CS03PROD CS01PROD CS02PROD

Order Number: N4576412

Order Type: LEAK

Order Status: Completed

Customer: 600560366 - KIRCHMER TIMOTHY J

Prem: 5278511 - 10557 STONEGATE DR

Technician: 2043 - Venable, Jay

Order Dates and Times

Need Date: 10/6/2010 4:54:00 PM
Time Created: 10/6/2010 3:35:21 PM
Time Dispatched: 10/6/2010 3:35:21 PM
Time In Route: 10/6/2010 3:35:55 PM
Time On-Site: 10/6/2010 4:00:46 PM
Tech Complete: 10/6/2010 5:01:06 PM
Time Closed: 10/6/2010 5:01:06 PM

Events Performed/Completion Code

LKOT - CMP

Meter Information

Current ReadStatus

Old Meter: 2097 Active

New Meter:

Completion Notes

cut 2 in pla main tim ross crew onsite for repair leak number 638245 gregg wyatt bob matrejek and shawn leever here i am going to run leaks on screen

Request Notes

10/06/10 AARON W/ HAMILTON CO DISP REPORTS HIT LINE GAS BLOWING FIREDEPT ENROUTE CONT# 317-773-1282 XST HOCKSTONE CANAL PLACE SUB DIV

MDSI Event Dates and Times

Event	Date/Time	User
AsnAssignmentManualAck_evt	10/6/2010 3:35:52 PM	Venable, Jay
AsnAssignmentEnRoute_evt	10/6/2010 3:35:55 PM	Venable, Jay
AsnAssignmentOnSite_evt	10/6/2010 4:00:46 PM	Venable, Jay
OrdOrderComplete_evt	10/6/2010 5:01:06 PM	Venable, Jay

NOTE: The Reporting database replicates in near real-time; it has been approximately 0 minute(s) since the last transaction replicated.

13354
ELECTR/COM

Fact Based Investigation Report

NOTIFICATION ID: 01120101006020 DISTRICT: Central IN
DAMAGE DATE: 10/6/2010 3:39:00 PM NOTIFICATION DATE: 10/6/2010 3:48:11 PM
NOTIFIED BY: DOUG KIRBY One Call Center
DAMAGE ADDRESS: HAWKSTONE DR FORTVILLE
CITY: FALL CREEK ST: IN ZIP:

DAMAGED CUSTOMER: VECTREN

INVESTIGATION DATE: 10/06/2010
FROM: 15:50:00 TO: 18:40:00

EXCAVATOR INVOLVED: Electrom
TYPE OF EXCAVATION: FIBER

ORIG. LOCATE REQ.: 1009153192 START DATE/TIME:
TYPE OF TICKET: LOCATE REQ. INFO N/A:

DIG UP/DAMAGE REQ.: D1457952 START DATE/TIME: 10/6/2010 3:50:00 PM

PICTURES TAKEN BY: RON SMITH DATE/TIME: 10/6/2010 5:00:00 PM
PHOTOGRAPHY TYPE: Digital FRAME #: N/A

INVESTIGATOR EMP#: 124130 INVESTIGATOR NAME: RON SMITH
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01120101006020
SELECT A CUSTOMER: VECTREN
CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF FACILITY ID: Gas Main
LOCATOR NAME & EMP #: Mathis Rick - 130598
LOCATOR NOT KNOWN:

CHECK ALL THAT APPLY TO INVESTIGATION:
Facility Marked Accurately

Other:

CHECK ALL THAT APPLY TO METHOD OF INVESTIGATION (at least one must be checked):

Visual, Facility Exposed At Time Of Investigation,
Investigator Verified Existing Marks By Hooking Up

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

MARKS GOOD MEASURED AT 22 INCHS I HAD RON SMITH ON SITE AND ALSO BOB MATERJEK WITH VECTREN
WAS ON SITE AND VERIFIED THE 22 INCH'S

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

BOB MATERJEK WITH VECTREN

NAMES OF EXCAVATOR'S REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

N/A

LIST ANY OTHER INDIVIDUALS ON SITE:

N/A

WERE ANY MARKINGS VISIBLE ON THE DAMAGE SITE UPON ARRIVAL? Yes

WERE ANY OTHER INDICATORS OF FACILITY PRESENT IN THE AREA? Yes

WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS? Yes

EXTENT OF FACILITY DAMAGE CUT GAS SERVICE

REPLACEMENT FOOTAGE N/A

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO? No

WHAT CONTRACTOR EQUIPMENT WAS USED? NONE

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? Yes

IF YES, PLEASE LIST RECORD #(S) VECTREN

MISCELLANEOUS CASH RECEIPT

(PLEASE ATTACH A COPY OF ALL CHECKS TO THIS FORM AND
USE PAPER CLIPS/DO NOT STAPLE CHECKS TO FORM)

PROCESS ROUTING FOR ALL VECTREN COMPANIES INCLUDING UTILITIES
AND NON REGULATED SUBSIDIARIES: SEND COMPLETED FORM,
ORIGINAL CHECK AND COPY OF CHECK TO REBECCA MINEAR IN
FINANCIAL ACCOUNTING, BRAUN BUILDING, EVANSVILLE. RETAIN COPY
OF CHECK AND FORM FOR YOUR RECORDS. PLEASE INCLUDE PROPER
ACCOUNTING SO RECEIPT MAY BE CREDITED ACCURATELY. PLEASE
INCLUDE YOUR PHONE NUMBER SO THE RECEIPT MAY BE EASILY
RESEARCHED BY THE FINANCIAL ACCOUNTING GROUP.

Activity Date: **12/10/2010**
12:00:00 AM

Your Name, not your initials (employee): **Pam Barber**

Your Phone Number (employee): **812-491-4734**

Party Check Received From (Check Payor):

Address of Check Writer (Check Payor):

BATCH1-ELECTRICOM LLC

Check Number **11265**

Amount of Check **\$4,028.06**

Utility/Company Name **VECTREN ENERGY DELIVERY OF INDIANA - NORTH**

Task Number **103.0509**

Job Number **FDS0013354**

Date Printed: 12/14/2010

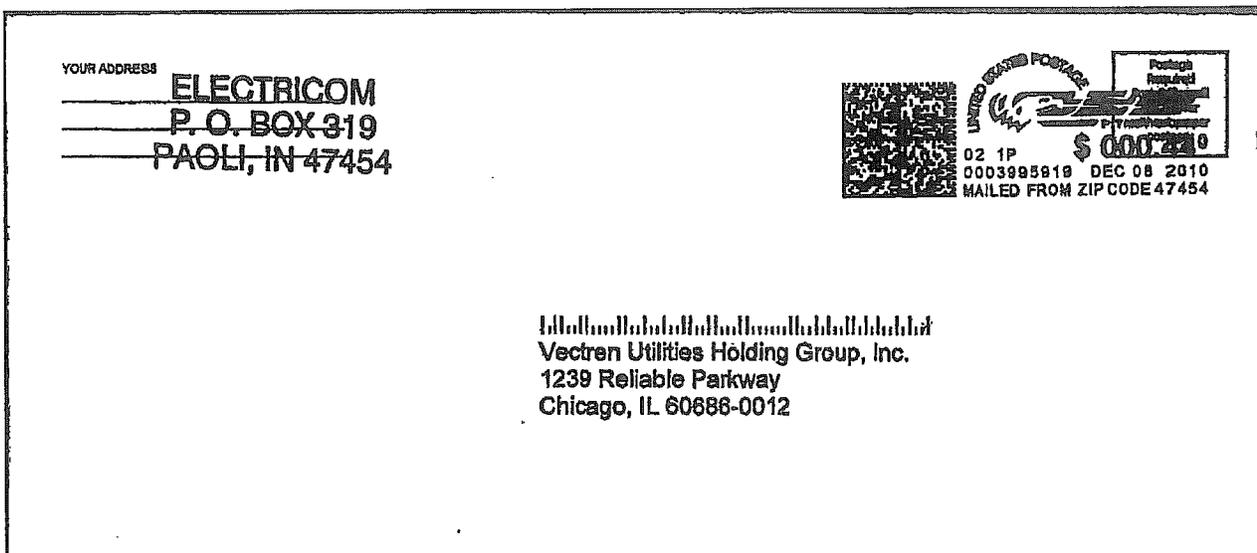
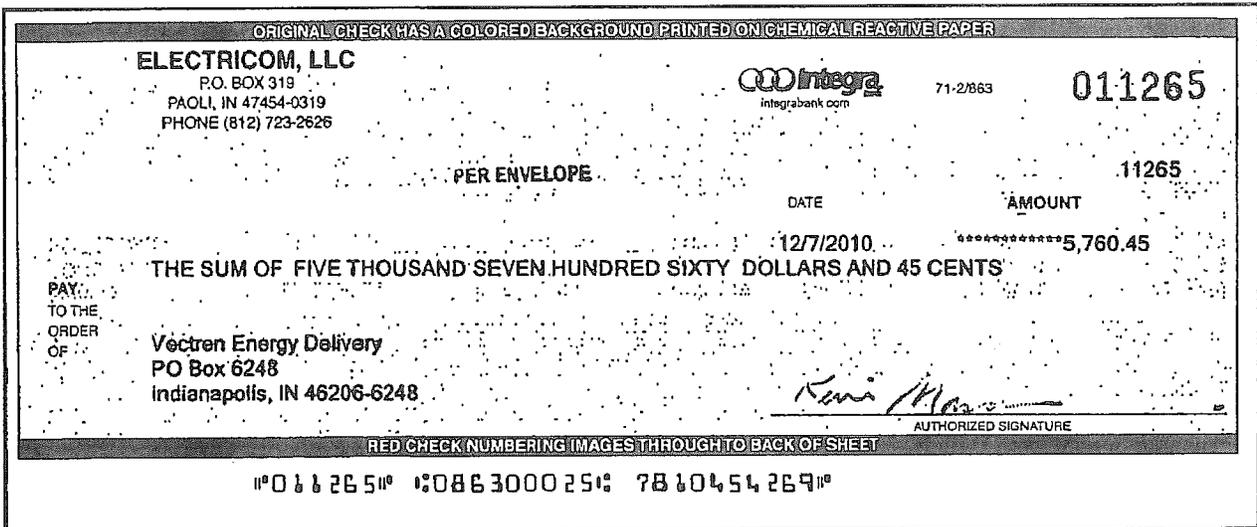
Transaction Information G-4433065 CHI-861239 2010/12/10

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Transaction Level Details

Env Num	7	Envelope	G-4433065
Transaction	G-4433065	Lockbox	CHI-861239
Date	2010/12/10	Time	17:00
Batch	1	Batch Item	10
Check	10	Amount	\$5,760.45
ABA/RT	086300025	Account Num	7810454269
Check Num	011265		

Envelope and Check Image

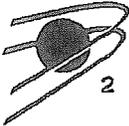


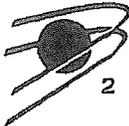
Transaction Level Keyed Data

Remitter Name : ELECTRICOM LLC Check Date : 2010/12/07

Invoice Level Keyed Data

Invoice Number	Reference Number
FDS0013209	29213
FDS0013354	29357

	NOV 29 2010	NOW DUE FINAL \$1,732.39
2 VECTREN ENERGY DELIVERY OF INDIANA - NORTH		
ELECTRICOM INC PO BOX 319, PAOLI, IN 47454		Type: GAS Invoice: FDS0013209 BillToID: 29213 Billing Date: 11/23/2010 Date of Loss: 9/14/2010 5833 103.0509
<i>1010119-074</i>		
Please return this portion with your remittance.		

	NOV 29 2010	NOW DUE \$4,028.06
2 VECTREN ENERGY DELIVERY OF INDIANA - NORTH		
ELECTRICOM INC PO BOX 319, PAOLI, IN 47454		Type: GAS Invoice: FDS0013354 BillToID: 29357 Billing Date: 11/24/2010 Date of Loss: 10/6/2010 5830 103.0509
<i>1010186-067</i>		
Please return this portion with your remittance.		

ELECTRICOM, LLC PAOLI, INDIANA

011265

Vectren Energy Delivery
 PO Box 6248
 Indianapolis, IN 46206-6248

Check: 11265
 Date: 12/7/2010
 Vendor: VECT

<u>Invoice</u>	<u>P.O. Num.</u>	<u>Invoice Amt</u>	<u>Prior Balance</u>	<u>Retention</u>	<u>Discount</u>	<u>Amt. Paid</u>
FDS0013209		1,732.39	1,732.39	0.00	0.00	1,732.39
FDS0013354		4,028.06	4,028.06	0.00	0.00	4,028.06
		<u>5,760.45</u>	<u>5,760.45</u>	<u>0.00</u>	<u>0.00</u>	<u>5,760.45</u>

NO
EXCAVATOR
RESPONSE
PROVIDED