



## Pipeline Safety Division Investigation Report

### Investigation regarding: Qc Communications, Inc.

UPPAC Database Record ID: 3306

Investigator: Mike Orr

Report Date: 1/5/2013

Damage Date: 7/3/2012 10:50:32 AM

Damage Address: Foxtail Dr

City: Franklin

County: Johnson

### The Parties

Excavator: **Qc Communications, Inc.**

Contact: Rodney Cress

Address: 7925 West 100 South, Wabash, In 46992

Telephone:

Facility Owner: Vectren

Contact: Darlene Kulhanek

Address: 1 N Main Street, Evansville, IN 47702

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

**Investigation regarding: Qc Communications, Inc.**

UPPAC Database Record ID: 3306

**Damage Impact**

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$550

**Excavator Activities/Cause of damage information:**

Excavator request locates: Yes Indiana 811 ticket Number: 1206181534

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Telecommunications

**Synopsis:** Damage to a natural gas service occurred during a trenching procedure for telecommunications.

**Findings:** Reported by Indiana 811; excavator's response to initial notice was received on 9/17/2012. The excavator had a valid locate request prior to beginning the trenching procedure; however the gas operator failed to locate the gas service; and, after IURC notice 9/18/2012 with response time expired, the determination remains an OPERATOR VIOLATION.

**Conclusion:** There was a failure to locate the gas facility.

**Violation: IC 8-1-26-18(f): Operator failed to locate or provided incorrect locate markings.**

# STATE OF INDIANA



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

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

July 13, 2012

Rodney Cress  
Qc Communications  
7925 West 100 South  
Wabash, In 46992

RECEIVED

SEP 17 2012

INDIANA UTILITY  
REGULATORY COMMISSION

Subject: Notice of Preliminary Determination of Violation, Pipeline Safety Division Case No. 3306  
Date of Event: 7/3/2012  
Event Location: Foxtail Dr, Franklin, Johnson County  
Excavator: Qc Communications  
Facility Owner: Vectren

To Whom It May Concern:

On behalf of the Indiana Utility Regulatory Commission ("IURC"), I am writing to inform you that information has been filed with our Pipeline Safety Division regarding an alleged violation of Indiana Code chapter 8-1-26, the Indiana Damage to Underground Facilities Act ("the Act"). You are receiving this letter because you have been identified as the Respondent Excavator.

The purpose of this Act is to promote excavation and pipeline safety and to reduce imminent danger to life, health, property, or loss of service associated with unsafe digging practices. Based upon the information received, the Pipeline Safety Division is commencing an investigation into the event concerning you or your business. 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.

Although the law was enacted in 1991, enforcement measures did not go into effect until July 2009. The IURC was tasked with completing a formal rulemaking on how to determine whether a violation occurred, as well as how the subsequent penalties should be determined. Due to the amount of time required for the rule to take effect and for the Underground Plant Protection Advisory Committee ("Advisory Committee") to be appointed and convened, you are now receiving this notification. Your case will be handled according to the recently approved administrative rule, 170 IAC 5-5, which can be found here: [http://www.in.gov/legislative/iac/iac\\_title?iact=170](http://www.in.gov/legislative/iac/iac_title?iact=170).

The Pipeline Safety Division has preliminarily identified that one or more of the following statutory violation(s) may have occurred:

- IC 8-1-26-16(g): Failure to provide notice of excavation.
- IC 8-1-26-16(h): Failure to perform required white lining.
- IC 8-1-26-20(b): Failure to maintain two (2) feet clearance with mechanized equipment.

You have an opportunity to file documentation explaining what occurred. *In order for this information to be considered, you must provide a written response to each allegation and written evidence (e.g., maps, photographs, narrative statements, or other evidence) within thirty (30) days of the date of this letter.* The

investigation will be completed after this time period, even if you do not respond or fail to provide additional evidence for the Pipeline Safety Division to consider. Findings will then be forwarded to the Advisory Committee for a recommendation to the IURC on the appropriate penalty.

If you are a business entity, please provide your full personal name and business title, as well as your legal authority to represent the business in this matter. If you lack such authority or are mistakenly named as the Respondent, you must notify the Pipeline Safety Division as soon as possible, providing the name of the proper representative, if known.

Pursuant to the Act, civil penalties may include:

1. A warning letter for homeowners and tenants who are first time offenders regarding a violation in which no one was personally injured;
2. A civil penalty up to a maximum of ten thousand dollars (\$10,000.00);
3. Required participation of employees in a mandatory education and training program sponsored by the IURC; and/or
4. Required development of a plan to avoid future violations, which must be approved by the IURC.

Depending upon the individual circumstances of each case, any combination of the civil penalties may be reduced to a Consent Agreement between the IURC and the Respondent.

**If you believe there are other parties or witnesses with relevant information for the Pipeline Safety Division to consider in its investigation, we request that you *immediately* provide their name, address, telephone number and email address *in writing* to the Pipeline Safety Division.** Because the investigation should be completed within sixty (60) days, any delay in providing additional persons to be contacted may result in the investigation being concluded without this additional source of information.

You are encouraged to fill out the required information form electronically by going to <http://www.in.gov/iurc/2335.htm> and clicking on Information Request. However, you may call Bobi Culver at (317) 233-6140 to request a hard copy to return by mail. In addition to the information form, you can forward additional information such as maps and drawings by mailing them to the address below or by scanning and emailing them. Please include your assigned Pipeline Safety Division Case Number on all communications and add your Case Number and denote "INITIAL DOCUMENTS - EXCAVATOR" at the top of your materials or in the subject heading of your email.

Mail: Pipeline Safety Division - Case No. 3306  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 E  
Indianapolis, IN 46204

Email: PipelineDamageCase@iurc.in.gov

Included with this letter is a *Summary of Procedures and Respondent's Rights* to assist in answering your questions. Should you have procedural or legal questions regarding the Advisory Committee or the IURC, please contact DeAnna L. Poon, Advisor to the Advisory Committee and Assistant General Counsel at the IURC, at (317) 232-6735. For 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

Enclosures: Summary of Procedures and Respondent's Rights



**INFORMATION REQUEST**

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 3306

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

*Upon completion of answers select email button for submission.*

**The Parties**

**Excavator Information:**

Business Name: QC Communications Inc.

Responsible Party Personal Name: \_\_\_\_\_

Title (if any): \_\_\_\_\_

Address (number and street): 7925 W. 100 S.

City, State and ZIP Code: Wabash In 46926

Preferred Telephone Number (area code): 1-800-421-0582

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: gccomm3@yahoo.com (main office)

**Facility Information:**

Business Name: Vectron

Responsible Party Personal Name: \_\_\_\_\_

Title (if any): \_\_\_\_\_

Address (number and street): 100 Industrial Dr.

City, State and ZIP Code: Franklin elm.

Preferred Telephone Number (area code): 1-800-227-1376

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

**Locator Service Information:**

Business Name: USIC

Responsible Party Personal Name: \_\_\_\_\_

Title (if any): \_\_\_\_\_

Address (number and street): \_\_\_\_\_

City, State and ZIP Code: \_\_\_\_\_

Preferred Telephone Number (area code): \_\_\_\_\_

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

**Cause of Damage Information**

Type of Equipment (select one): excavator

Type of Work Performed (select one): digging shoot in hole

**Other Information (Witness, Police, Fire, Other):**

Personal Contact: \_\_\_\_\_

Business/Organization Name: \_\_\_\_\_

Title (if any): \_\_\_\_\_

Address (number and street): \_\_\_\_\_

City, State and ZIP Code: \_\_\_\_\_

Preferred Telephone Number (area code): \_\_\_\_\_

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

**Utility Line Impact**

**Location of Damage:**

Address (number and street): 788 Foxtail Drive

City, State and ZIP Code: Franklin Ind.

Nearest Intersection: Youngs Circle Dr.

**Product Type (select one):**

**Facility Type (select one):**

**Size (Diameter/etc.):** \_\_\_\_\_

**Pressure (PSIG/Inches):** \_\_\_\_\_

**Interruption in Service:**  Yes  No **Number of Customers Affected:** House 988 Foxtail

**Evacuation:**  Yes  No **If yes, How Many Evacuated?** \_\_\_\_\_

**Repair Cost (if known):** \$ \_\_\_\_\_

**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:** 120618(1534)<sup>??</sup>

- Locate Marks Visible:  Yes  No
- Locate Marks Correct:  Yes  No *Unmarked*
- 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

*Vectron missed 30mm  $\bar{g}$  hit*

**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**

*Pictures of Area of hit, Not sure what is being marked with paint after hit. He isn't a QC worker. Has a USIC Locator. 2 pictures paper clipped together, One guy took these pictures told USIC guy to want to yellow mark after he took his pictures.*

NARRATIVE STATEMENT

Your Pipeline Safety Division Case Number: 3306

Your Full Name: Rodney Cress

Full Name of Business / Entity (if applicable): QC Communications Inc.

Your Business Title (if applicable): \_\_\_\_\_

Address (number and street): 7925 W 100 S.

City: Wabash State: IN ZIP Code: 46992

Your E-mail Address: qccomm3@yahoo.com

Today's Date (month, day, year): 9-11-12

Your Signature: Anda Krathar Title (if any) Secretary

Please return your Narrative Statement to:

Pipeline Safety Division – Case Number 3306  
Indiana Utility Regulatory Commission  
101 West Washington Street, 1500E  
Indianapolis, IN 46204

Or scan the statement and Email to:

[PipelineDamageCase@urc.in.gov](mailto:PipelineDamageCase@urc.in.gov)

# UNDERGROUND UTILITY ACCIDENT REPORT

Company Name Address (Main Office)	Job Name Address
Crew Members Names Supervisor: Workers	Name of Other Witnesses (include phone #, address or employer's name, if possible)

Company Name: Q.C. Communications  
 Address (Main Office): Wabash In.  
 Job Name: Linergy / MetroNet  
 Address: Franklin, IN.  
 Crew Members Names: Rodney Cross  
 Supervisor: Rodney Cross  
 Workers: Rodney Cross  
 Name of Other Witnesses: Dean Sanders - QC Communications  
 (include phone #, address or employer's name, if possible): 1260-3309260

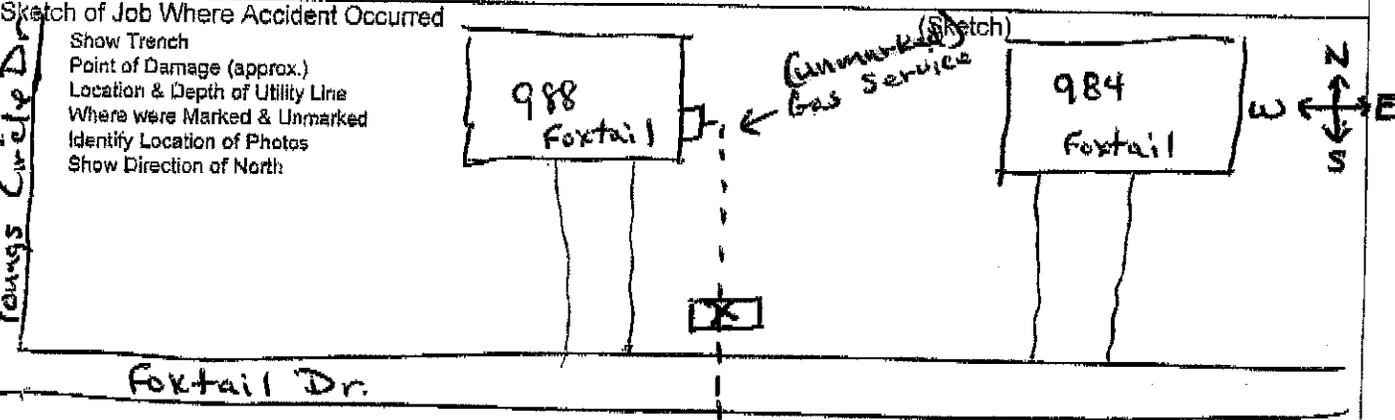
Description of Job: \_\_\_\_\_  
 Were Utility Lines marked? Yes  No  Name/Phone # of Locator Service: \_\_\_\_\_  
 Locator Log # (Confirmation #) 120681534 Date Marked: 6-18-12 By Whom: usie

Date of Accident: July 3, 2012 Time of Accident: 11:00 a.m.

Accident Description (Describe How the Accident Occurred):  
 \_\_\_\_\_  
 \_\_\_\_\_

Describe Damaged Property:  
hit a gas service / no property damage

List Owner of Damaged Property  
 Name: N/A Address: 988 Foxtail Drive Phone # N/A  
Franklin, IN.

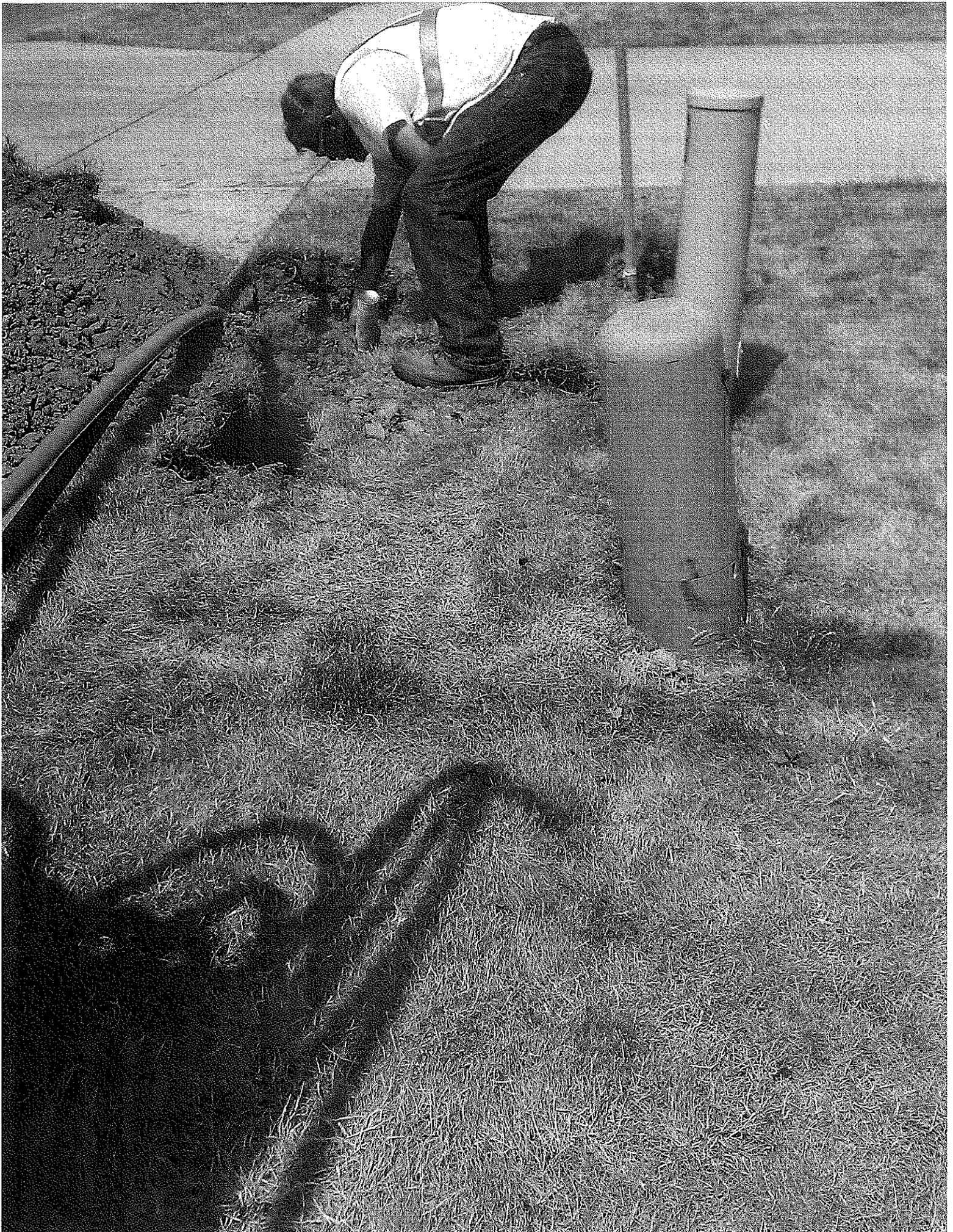


List Names of Emergency Response Personnel (Police, Fire, EMTs, etc.)  
 Names: Franklin Fire / Vectren / usie Badge # N/A

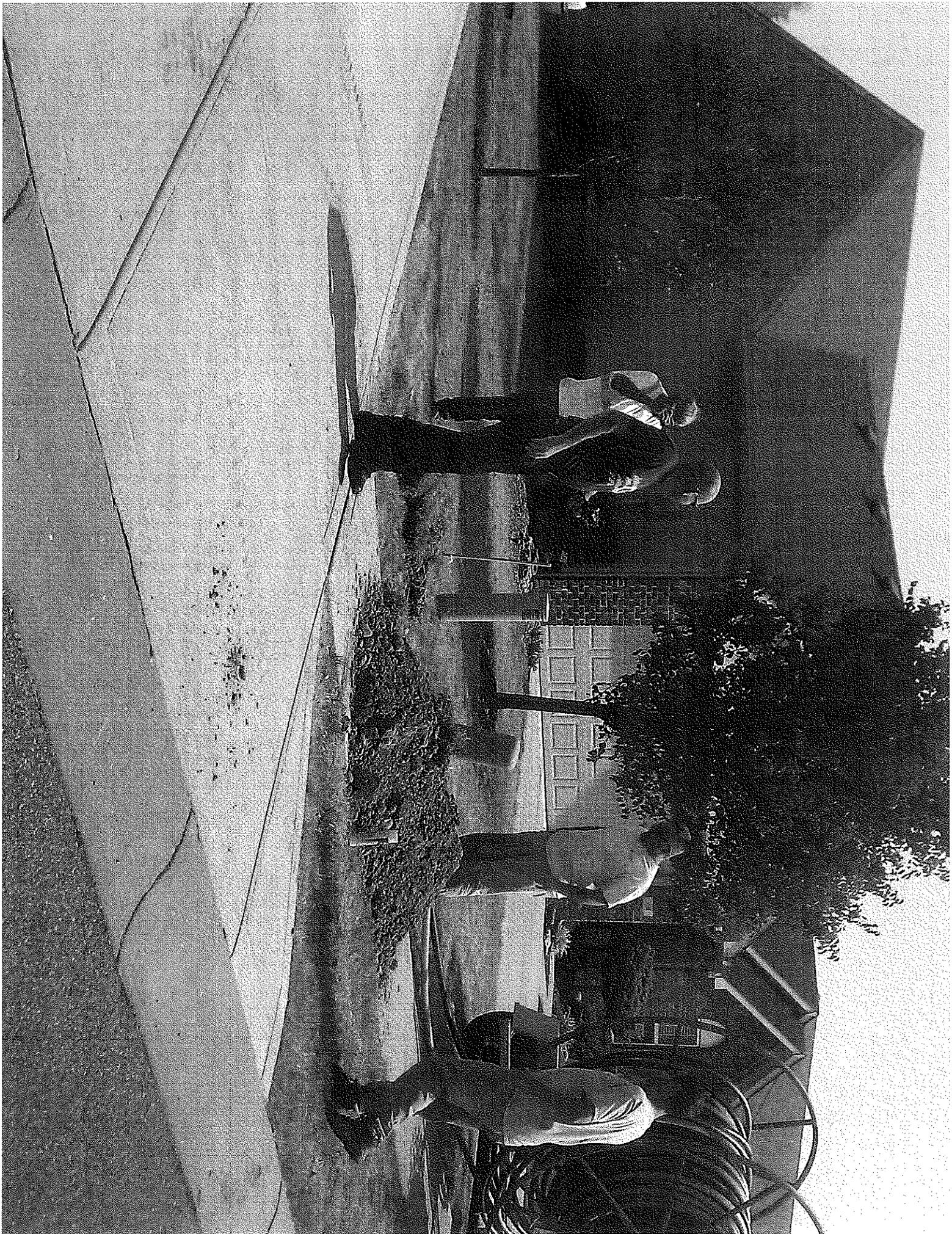
Name of Person Completing This Report: (Print Name) <u>Rodney Cross</u> (Signature) <u>Rodney Cross</u>	Name of Photographer (If Video or Photo(s) were taken) (Print Name) <u>Rodney Cross</u>	When was Report Completed (Date) <u>July 3, 2012</u> (Time) <u>2:00 p.m.</u>
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Original: Bituminous Claims Office cc: Customer Records









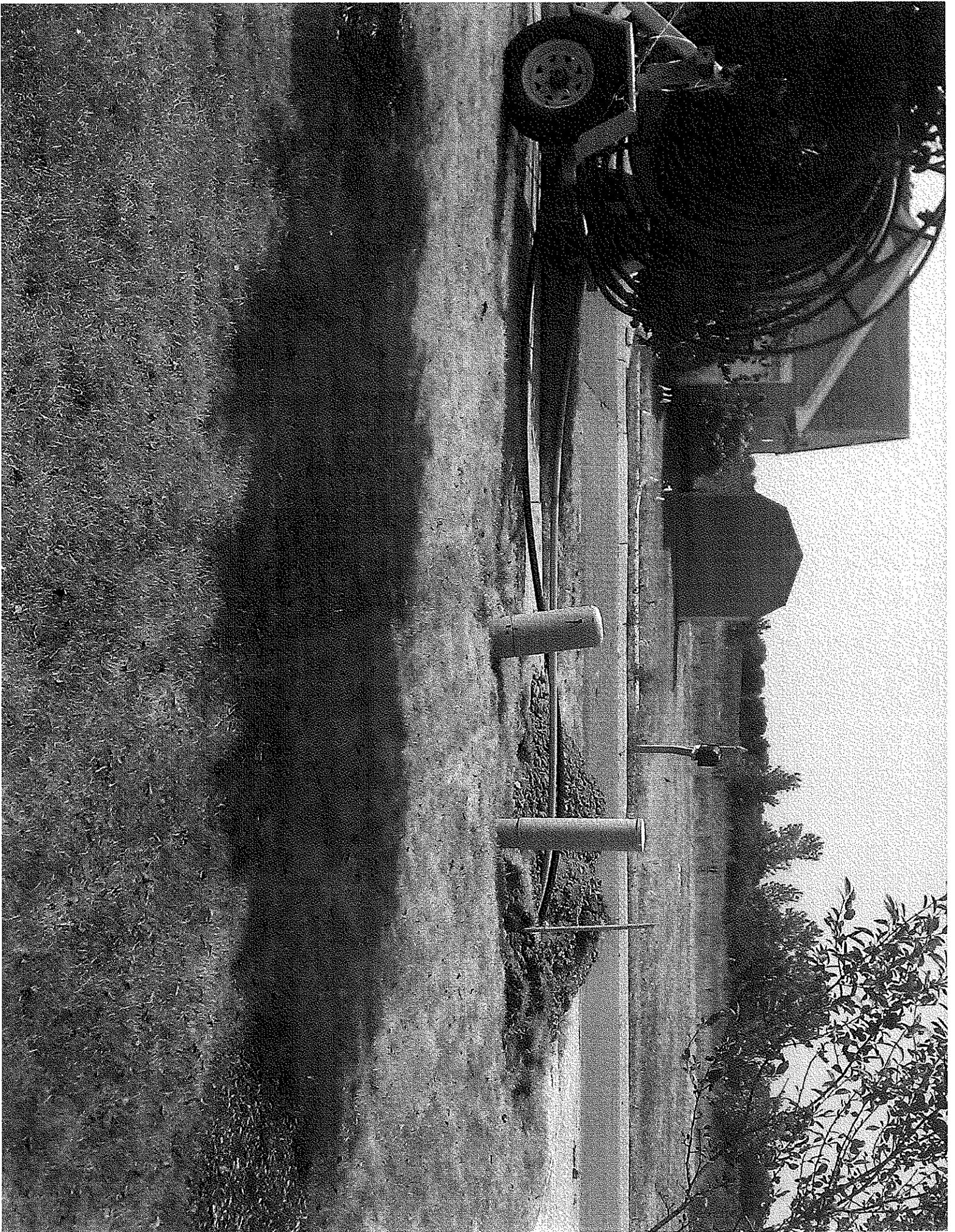
988













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

July 13, 2012

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

Subject: Investigation Request for Information

Date of Event: 7/3/2012

Event Location: Foxtail Dr, Franklin

Facility Owner: Vectren

Excavator: Qc Communications

Other Party: N/A

Pipeline Division Case No. 3306

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



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)  
INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: 07-18-2012

### Who is submitting this information?

Name of person providing this information: Darlene Kulhanek

Business address (*number and street*): 1 Main Street

City, State, and ZIP code: Evansville, IN 47711

Telephone number (*area code*): 812-491-4227

Fax number (*area code*): 812-491-4504

E-mail address: dkulhanek@vectren.com

### Excavator Information, if known

Full name: QC Communications

Business address (*number and street*): 7925 W County Rd 100 S

City, State, and ZIP code: Wabash, IN 46992

Telephone number (*area code*): 800-421-0582

Fax number (*area code*): 260-563-0963

E-mail address: Unknown

### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Telecommunications

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**Date and Location of Damage**

Date of damage (month, day, year): 7-3-2012

County: Johnson

City: Franklin

Street address (number and street, city, state, and ZIP code):  
988 Foxtail Drive, Franklin, IN

Nearest intersection: Unknown

Right of way where damage occurred: Public - City Street

Was there a release of product? Yes

If yes, was there an ignition of product? No

Were evacuations necessary as a result of release? No

If yes, how many evacuated? 0

Was there a customer service interruption? Yes

If yes, how many affected? 1

Time to restore service (in hours): 1

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 550

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**Affected Facility Information**

What type of pipeline was damaged? Natural Gas

What was the affected facility? Service/Drop

What was the depth of the facility, in inches? \_\_\_\_\_

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**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1206181534

Was the locate request completed within two working days? Yes

If locates were performed, were they done so by a contractor or pipeline employee? Contract Locator

If a contractor locator, enter the company name, if known: USIC

Were facility marks visible in the area of excavation? No

Were facilities marked correctly? No

Type of markings used: Other

If other, please specify: None

Was site marked by "White Lining"? No

Were special instructions part of the locate request? Unknown/Other

Were maps used to complete the locate request? Unknown/Other

Were pipeline company representatives on site during excavation? No

Did the excavator notify the operator in the event of this damage? Yes

Did the excavator notify Indiana 811 in the event of this damage? Yes

Did the excavator notify 911 in the event of a release of product? Unknown/Other

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### **Description of Cause**

Select from the list the most accurate cause for the damage: --Facility marking or location not sufficient

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### **Additional Comments**

1" plastic service damaged by hoe. Not Marked.

Vectren Claim Number: \_\_\_\_\_

FDS 0016536

Task No: 103.0570 Capital / O & M (circle one)

Police Report / MO #: \_\_\_\_\_

Date of Damage 7 / 3 / 12

Cost Center # 5835

Time Occurred 11:00 am pm

Time Found 11:25 am pm

Latitude 39.46140 Longitude: -86.071370

# FACILITIES DAMAGE REPORT

## GAS

Vectren Claims Camera:

VE02172  
*CAMERA*

**DAMAGE SITE:**  
Address 988 Foxtail Dr Lot # 530  
County Johnson City Franklin State IN Township Franklin

**FACILITY TYPE:**  
 Distribution  Propane  
 Service  Storage  
 Transmission: (include supplemental report)

FACILITIES DAMAGED:	ORIFICE SIZE(S):	(1)	(2)	(3)
<input type="checkbox"/> Farm Tap	0.50 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Heater	5/8 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Main	0.75 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Meter (Residential)	1.00 inch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Meter (Industrial / Commercial)	1.25 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Odorizer	2.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Regulator Station	3.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Relief Valve	4.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Riser	5.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Service Line	6.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Valve	10.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	12.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	16.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	20.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	Other			

**VISUAL OBSERVATION AT DAMAGE SITE:** 7/11  
 Visual Observation:  Above Ground  Below Ground  
 Locate Applicable:  Yes  No  N/S  
 Facilities Properly Marked:  Yes  No  N/S  
 Marking Methods:  Conventional  Flags  None  Whiskers  
 Offset  Paint  Stakes  Whiskers  
 Locate Marking Faded:  Yes  No  N/S  
 Wrong Address Requested:  Yes  No  N/S

**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:**  
 Failure to Follow Policy  
 Inappropriate Site Markings  
 Incomplete Locate  
 No Locates Performed  
 Qualified Locator Could Have Accurately Located  
 Wrong Address Located  
 Marking Off By: \_\_\_\_\_ (Feet / Inches)

Were Facility Marks Visible:  Yes  No  Destroyed  
 Was Area White Lined:  Yes  No  Destroyed  
 Positive Response:  Yes  No  Destroyed  
 Tolerance Zone Violated:  Yes  No  
 Part of Project:  Yes  No  
 Company Representative On-Site:  Yes  No

**TYPE OF MATERIAL:**  Cast Iron  Plastic (HDPE)  Plastic (MDPE)  Steel  Other \_\_\_\_\_

**DAMAGE TYPE:**  Severed  Not Cut  Severed Puncture  
 Size 1/8" x 1/8"

**PRESSURE:**  25 PSIG  40 PSIG  50 PSIG  60 PSIG  6 WC (2163)  7 WC (252)  Other \_\_\_\_\_

**PROTECTION IN PLACE:**  Building  Fence  None  Post  Rail  Vault  N/A  Other \_\_\_\_\_

**DURATION OF ESCAPING GAS:**  
 Minutes: 1 min

**LEAK REPORT NUMBER:** 02879

EFV Activated  Yes  No  N/S

**FEED TYPE:**  One-Way Feed  Two-Way Feed

Number of Customers Affected: 1  
 Total Hours Service Was Off: 1

**SERVICE ORDER NUMBER:** N5298084

Observation by (ID#): 5476

Name of Locator: \_\_\_\_\_  
**LOCATING ORGANIZATION:**  
 Contract Locator  Unknown / Other  Utility Owner

**DAMAGED BY:**  Company Crew  Contractor  County  Developer  Farmer  Municipality  Property Owner/ Tenant  Railroad  State  Unknown  Utility  Vehicle Accident  Other \_\_\_\_\_

**TYPE OF CONSTRUCTION:**  Agriculture  Building Construction  Building Demolition  Cable TV  Curbs / Sidewalk  Drainage  Driveway  Electric  Engineering / Surveying  Fencing  Grading  Irrigation  Landscaping  Liquid Pipeline  Milling  Pole  Natural Gas  Public Transit Authority  Railroad Maintenance  Other \_\_\_\_\_

**NOTIFICATIONS AND OTHER DETAILS OF LOCATE:**  
 Locate Ticket: 1206181534 10:15 a.m.  
 Date: 6-18-12 Time: 10:15 am pm

**TYPE OF REQUEST:**  
 Regular Request  Emergency Request  
 Locate Company Notified  
 Contact Name: \_\_\_\_\_  
 Time Called: \_\_\_\_\_ am / pm  
 Time Locator Arrived at the Site: \_\_\_\_\_ am / pm

Company Notified of Locate Near Critical Facilities  Yes  No  N/S

Copy of Mark Out Request Provided Within 2 Working Days  Yes  No  N/S

**ONE-CALL CENTER:**  
 IUPPS  OUPS  Unknown

**WORKING FOR:**  City  County  Developer  State  Property Owner  Utility

Vectren Claim Number: \_\_\_\_\_

**TYPE OF EQUIPMENT:**

- Auger
- Backhoe / Track hoe
- Boring
- Drilling
- Explosives
- Farm Equipment
- Grader / Scraper
- Hand Tools
- Milling Equipment
- Plow
- Probing Device
- Trencher
- Vacuum Equipment
- Vehicle
- Other \_\_\_\_\_

**ROOT DAMAGING CAUSE:**

- Abandoned Facility
- Deteriorated Facility
- Facility Could Not be Found/ Located
- Facility Was Not Located / Marked
- Failure to Maintain Clearance
- Failure to Maintain Marks
- Failure to Support Exposed Facility
- Failure to Use Hand Tools Where Required
- Improper Backfilling
- Incorrect Records / Maps
- Marking or Location Not Sufficient
- No Notification Made to One-Call
- One-Call Notification Error
- Previous Damage
- Wrong Information Provided
- Other \_\_\_\_\_

**CONTRACTOR REPAIRS:**

- Contractor Working for Vectren Made Repairs at Own Expense
  - Yes  No  N/S
- Contractor Repaired Damage
  - Yes  No  N/S

Name of Contractor: \_\_\_\_\_  
 # of Regular Hours; \_\_\_\_\_  
 # of Overtime Hours; \_\_\_\_\_  
 # of Regular 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.)

**RIGHT OF WAY:**

- Dedicated Utility Easement
- Federal Utility Easement
- Pipeline
- Power / Transmission Line
- Private - Business
- Private - Easement
- Private - Land Owner
- Public - County Road
- Public - Interstate Highway
- Public - Other
- Public - State Highway
- Public - City Street
- Unknown

- Did Excavator Notify You  Yes  No
- Excavation Required  Yes  No
- Media at Site  Yes  No
- Was There Ignition of Gas?  Yes  No
- INVOICE:  Yes  No  N/S

**DAMAGING PARTY:**  
 Name: QC Communications  
 Address: Walbash IN.  
 City/ State/ Zip: Walbash IN.  
 Phone: (1-800) 421-0582  
 Prepared / Investigated By: [Signature] Date: 7-3-12

**PARTY TO INVOICE:**  
 Name: QC COMMUNICATIONS  
 Address: WABASH IN.  
 City/ State/ Zip: WABASH IN.  
 Phone: (1-800) 421-0582  
 Reviewed by Field Supervisor: [Signature] Date: 7/11/12

## NORMAL NOTICE

Ticket : 1206181534 Date: 06/18/2012 Time: 10:32 Oper: SPEOPLES Chan:036

State: IN Cnty: JOHNSON Twp: FRANKLIN  
Cityname: FRANKLIN Inside: Y Near: N  
Subdivision: FRANKLIN LAKES

## Address :

Street : FOXTAIL DR

Cross 1 : YOUNGS CIRCLE DR Within 1/4 mile: Y

Location: FROM THE ABOVE INTERSECTION - LOCATE GOING EAST FOR APPROX 400 FEET  
ON NORTH SIDE OF FOXTAIL DRIVE ENDING AT 974 FOXTAIL DRIVE

\*\*\*Boring Where = EASEMENTS/ROADS/SIDEWALKS/DRIVEWAYS

:

Grids : 3927A8603A 3928D8603A 3928C8603A 3928B8603A 3927A8604D

Grids : 3928D8604D 3928C8604D 3928D8604C 3928C8604C 3927A8603B

Grids : 3928D8603B 3928C8603B 3928B8603B

Work type : INSTALLING NEW FIBER OPTICS

Done for : CINERGY METRONET

Start date: 06/20/2012 Time: 10:45 Hours notice: 48/048 Priority: NORM

Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N

Duration : 2 WEEKS Depth: 8 FEET

Company : QC COMMUNICATIONS Type: CONT

Co addr : 7925 WEST 100 SOUTH

City : WABASH State: IN Zip: 46992

Caller : CHRIS KEMP Phone: (800)421-0582

Contact : CHRIS KEMP - CELL Phone:

BestTime:

Mobile : (812)345-3669

Fax : (260)563-0963

Remarks : All tickets are taken and processed on Eastern Daylight Time

Will you be white-lining the dig site area? NO

:

Submitted date: 06/18/2012 Time: 10:32

Members: ID0002 ID0270 ID2034 ID3640 ID4378 ID7131 ID7288 ID5857 ID6921 SM

Member Name	Facility Types
CENTURYLINK	TELEPHONE
COMCAST CENTRAL (GREENWOOD)	CABLE TV
DUKE ENERGY / FORMERLY CINERGY	ELECTRIC
FRANKLIN DPW, CITY OF	
IN AMERICAN WATER JOHNSON COUNTY WATER	
JOHNSON COUNTY R.E.M.C.	ELECTRIC
VECTREN - FRANKLIN	GAS

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DAMAGE SEE REMARKS

Ticket : 1207031396 Date: 07/03/2012 Time: 10:46 Oper: LSTEVENSON Chan:018

State: IN Cnty: JOHNSON Twp: FRANKLIN  
 Cityname: FRANKLIN Inside: Y Near: N  
 Subdivision: FRANKLIN LAKES

Address :  
 Street : FOXTAIL DR  
 Cross 1 : YOUNGS CIRCLE DR Within 1/4 mile: Y  
 Location: FROM THE ABOVE INTERSECTION - LOCATE GOING EAST FOR APPROX 400 FEET  
 ON NORTH SIDE OF FOXTAIL DRIVE ENDING AT 974 FOXTAIL DRIVE  
 \*\*\*Boring Where = EASEMENTS/ROADS/SIDEWALKS/DRIVEWAYS  
 :  
 Grids : 3927A8603A 3928D8603A 3928C8603A 3928B8603A 3927A8604D  
 Grids : 3928D8604D 3928C8604D 3928D8604C 3928C8604C 3927A8603B  
 Grids : 3928D8603B 3928C8603B 3928B8603B

Work type : INSTALLING NEW FIBER OPTICS  
 Done for : CINERGY METRONET  
 Start date: 07/03/2012 Time: 10:47 Hours notice: 0/000 Priority: EMER  
 Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: Y  
 Duration : 2 WEEKS Depth: 8 FEET

Company : QC COMMUNICATIONS Type: CONT  
 Co addr : 7925 WEST 100 SOUTH  
 City : WABASH State: IN Zip: 46992  
 Caller : RODNEY CRESS Phone: (800)421-0582  
 Contact : CHRIS KEMP - CELL Phone:  
 BestTime:  
 Mobile : (812)345-3669  
 Fax : (260)563-0963

Remarks : All tickets are taken and processed on Eastern Daylight Time  
 PER RODNEY CRESS--VECTREN GAS LINE WAS HIT--GAS NO LONGER BLOWING--LINE WAS HIT  
 AT THE SOUTHEAST CORNER OF 988 FOXTAIL DR--LINE IS 3INCHE YELLOW PLASTIC SERVICE  
 LINE--CREW IS ON SITE---ADVISED TO CALL VECTREN AND 911---PREVIOUS TICKET NUMBER  
 IS 1206181534---THANK YOU  
 Will you be white-lining the dig site area? NO  
 :

Submitted date: 07/03/2012 Time: 10:46  
 Members: ID0002 ID0270 ID2034 ID3640 ID4378 ID7131 ID7288 ID5857 ID6921 SM

Member Name	Facility Types
CENTURYLINK	TELEPHONE
COMCAST CENTRAL (GREENWOOD)	CABLE TV
DUKE ENERGY / FORMERLY CINERGY	ELECTRIC
FRANKLIN DPW, CITY OF	
IN AMERICAN WATER JOHNSON COUNTY WATER	
JOHNSON COUNTY R.E.M.C.	ELECTRIC
VECTREN - FRANKLIN	GAS

[View Map](#)

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# Service Order Status

Friday, July 13, 2012

**Enter Service Order Number:**

5298084



Clear Form

Refresh Data

**Banner Instance:**  CS03PROD  CS01PROD  CS02PROD

**Order Number:** N5298084

**Order Type:** LEAK

**Order Status:** Completed

**Customer:** 600007763 - SCHROEDER AMANDA J

**Prem:** 5854615 - 988 FOXTAIL DR

**Technician:** 5476 - Johnson, David

**Order Dates and Times**

**Need Date:** 7/3/2012 11:18:00 AM  
**Time Created:** 7/3/2012 10:59:07 AM  
**Time Dispatched:** 7/3/2012 10:59:07 AM  
**Time In Route:** 7/3/2012 11:03:53 AM  
**Time On-Site:** 7/3/2012 11:23:25 AM  
**Tech Complete:** 7/3/2012 12:05:47 PM  
**Time Closed:** 7/3/2012 12:05:47 PM

**Events Performed/Completion Code**

LKOT - CMP

**Meter Information**

**Current ReadStatus**

**Old Meter:** 3059 Active

**New Meter:**

**Completion Notes**

QC Communications hit unmarked 1" plastic service, EFV was activated, crew on site to fix

**Request Notes**

PER RODNEY CRESS/WITH QC COMMUNICATIONS/PH 800 421 0582/OR 765 469 2336/HIT SVC LINE/WAS BLOWING BUT STOPPED?/NO PETS/NOT SURE IF ENTERING BUILDINGS/XST: YOUNGS CIRCLE/LOC#1206181534/HIT BY EXCAVATOR/GAVE PEC.

**MDSI Event Dates and Times**

Event	Date/Time	User
AsnAssignmentManualAck_evt	7/3/2012 10:59:37 AM	Johnson, David
AsnAssignmentEnRoute_evt	7/3/2012 11:03:53 AM	Johnson, David
AsnAssignmentOnSite_evt	7/3/2012 11:23:25 AM	Johnson, David
OrdOrderComplete_evt	7/3/2012 12:05:47 PM	Johnson, David

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