



Pipeline Safety Division Investigation Report

Investigation regarding: **Apple Grove Landscaping**

UPPAC Database Record ID: 3507

Investigator: Howard Friend

Report Date: 10/18/2012

Damage Date: 5/30/2012

Damage Address: 9565 Julia Dr Lot 28

City: St John

County: Lake

The Parties

Excavator: **Apple Grove Landscaping**

Contact: Joel Hollewan

Address: 467 Joyce Ct, South Holland, IL 60473

Telephone: 708 906 6158

Facility Owner: NIPSCO

Contact: Kit Earle

Address: 101 West Ohio Street, Indianapolis, IN 46204

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Investigation regarding: Apple Grove Landscaping

UPPAC Database Record ID: 3507

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$73

Excavator Activities/Cause of damage information:

Excavator request locates: No Indiana 811 ticket Number:

Type of Equipment: Trencher

Type of work performed: Landscaping

Synopsis: A natural gas service was damaged during excavation for landscaping.

Findings: Reported by NIPSCO; excavator responded to initial notice on 10/8/2012. The excavator failed to provide notice of excavation.

Conclusion: There was a failure to provide notice of excavation.

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



INFORMATION REQUEST

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

RECEIVED

OCT 9 2012

INDIANA UTILITY
REGULATORY COMMISSION

Case Number: 3507

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: Apple Grove Systems, Inc.

Responsible Party Personal Name: Jim & Joel Helleman

Title (if any): Co-Owners

Address (number and street): 467 Joyce Court

City, State and ZIP Code: South Holland, IL 60473

Preferred Telephone Number (area code): (708) 906-6158

Cellular Telephone Number (area code): _____

Email Address: ags.jimh@yahoo.com

Facility Information:

Business Name: Northern Indiana Public Service Co.

Responsible Party Personal Name: N/A

Title (if any): N/A

Address (number and street): N/A

City, State and ZIP Code: N/A

Preferred Telephone Number (area code): _____

Cellular Telephone Number (area code): _____

Email Address: _____

Locator Service Information:

Business Name: _____

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): _____

Type of Work Performed (select one): Planting flowers & shrubs

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

Personal Contact: N/A

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): 9565 Julia Drive - Lot 28

City, State and ZIP Code: St John, IN - Lake County

Nearest Intersection: _____

Product Type (select one):

Facility Type (select one):

Size (Diameter/etc.): N/A

Pressure (PSIG/Inches): _____

Interruption in Service: Yes No **Number of Customers Affected:** _____

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: _____

- 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: _____

Number of Inpatient Treated: _____

Number of Fatalities: _____

- Fire Department Response: Yes No
- Police Department Response: Yes No
- Ambulance Response: Yes No

Additional Information / Comments

Dear Sir / Madam,

We are writing you today just to state our side in this matter. While we do have a policy that we call in locates for any major landscaping work we will be performing, we at this time were just planting a few flowers and shrubs. The gas line in question was only buried 8 inches deep, to which the repairman even stated was way to shallow. We sincerely apologize for any oversight we had in this matter. We fully intend to make a new policy stating that a locate needs to be done, regardless how small the job at this point forward. Once again we apologize, and sincerely appreciate your giving us the chance to explain our side.

NARRATIVE STATEMENT

Your Pipeline Safety Division Case Number: 3507
Your Full Name: Jim & Joel Holleman
Full Name of Business / Entity (if applicable): Apple Grove Systems, Inc
Your Business Title (if applicable): Co-Owners
Address (number and street): 467 Joyce Court
City: So. Holland State: IL ZIP Code: 60473
Your E-mail Address: ags-jimh@yahoo.com
Today's Date (month, day, year): Sept. 28, 2012
Your Signature: [Signature] Title (if any) Co-Owner

Please return your Narrative Statement to:

Pipeline Safety Division - Case Number 3507
Indiana Utility Regulatory Commission
101 West Washington Street, 1500E
Indianapolis, IN 46204

Or scan the statement and Email to:

PipelineDamageCase@urc.in.gov



101 West Ohio Street, Suite 1707
Indianapolis, IN 46204

October 17, 2012

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 3507
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3507

To Whom It May Concern:

Attached please find Northern Indiana Public Service Company's ("NIPSCO") written information, and supporting documentation, relating to the following event:

Date of Event: 5/30/2012

Event Location: 9565 Julia Dr Lot 28, St. John

Facility Owner: Northern Indiana Public Service Company

Excavator: Apple Grove Landscaping

Other Party: N/A

Pipeline Division Case No. 3507

NIPSCO has reviewed its recovery and damage prevention files for this matter and has provided answers, when known, to the list of questions set forth in the Information Request. To the extent available, NIPSCO is also providing a copy of the Damage Information Report – Pipeline Safety Division previously submitted by NIPSCO to IURC Pipeline Safety as well as additional documentation relating to this Event Location.

Upon completion of the investigation, NIPSCO requests that it be provided with a copy of the Pipeline Division's Investigation Report with findings that will be forwarded to the Underground Plant Protection Advisory Committee. If there are any additional questions, please contact the undersigned.

Very truly yours,

A handwritten signature in black ink, appearing to read "Christopher Earle".

Christopher C. (Kit) Earle
NiSource Corporate Services - Legal
Phone: 317-684-4904
Fax: 317-684-4918
Email: cearle@nisource.com

IURC INFORMATION REQUEST	
Pipeline Safety Division Case No. 3507	
Date of Event	5/30/2012
Event Location	9565 Julia Dr Lot 28, St. John
Facility Owner	Northern Indiana Public Service Company
Excavator	Apple Grove Landscaping
Date of IURC Information Request	9/18/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Apple Grove Landscaping
RESPONSIBLE PARTY PERSONAL NAME	Joel Holleman
TITLE (IF ANY)	
ADDRESS	2910 East Brunswick Rd
CITY/ STATE/ZIP	Beecher, IL 60401
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
FACILITY INFORMATION - OWNER/OPERATOR OF UTILITY LINE:	
BUSINESS NAME	NORTHERN INDIANA PUBLIC SERVICE COMPANY
RESPONSIBLE PARTY PERSONAL NAME	LUKE SELKING
TITLE	
ADDRESS	1501 HALE AVENUE
CITY/STATE/ZIP	FORT WAYNE, IN 46802
PREFERRED TELEPHONE	260/439-1290
SECONDARY TELEPHONE	
EMAIL ADDRESS	LSELKING@NISOURCE.COM
LOCATOR SERVICE INFORMATION	
BUSINESS NAME	USIC
RESPONSIBLE PARTY PERSONAL NAME	Morgan Thompson
TITLE (IF ANY)	Claims Coordinator
ADDRESS	9045 N. River Rd. Suite 300
CITY/ STATE/ZIP	Indianapolis, IN 46240
PREFERRED TELEPHONE	1-317-538-7301
CELL PHONE TELEPHONE	
EMAIL ADDRESS	morganthompson@usicinc.com
OTHER (WITNESS, POLICE, FIRE, OTHER) INFORMATION	
PERSONAL CONTACT	
BUSINESS/ORGANIZATION NAME	
TITLE (IF ANY)	

ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
UTILITY LINE IMPACT	
LOCATION OF DAMAGE	
ADDRESS	9565 Julia Drive
CITY/STATE/ZIP	St John, IN 46373
NEAREST INTERSECTION	
PRODUCT TYPE (Select One)	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
FACILITY TYPE (Select One)	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	5/8" plastic
PRESSURE (PSIG/INCHES)	45
INTERRUPTION IN SERVICE (YES/NO)	Yes
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	73.13
CAUSE OF DAMAGE INFORMATION:	
TYPE OF EQUIPMENT (Select One)	
Auger	
Backhoe/Trackhoe	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trancher	
Vacuum Equipment	
Unknown/Other	X Mechanized equipment
TYPE OF WORK PERFORMED (Select One)	
Agriculture	
Cable TV	
Curb/Sidewalk	
Bldg. Construction	
Bldg. Demolition	
Drainage	
Driveway	
Electric	
Engineering/Surveying	
Fencing	
Grading	
Irrigation	
Landscaping	X
Liquid Pipeline	
Milling	
Natural Gas	
Pole	
Public Transit Authority	
Railroad Maintenance	
Road Work	
Sewer (Sanitary/Storm)	
Site Development	
Steam	
Storm Drain/Culvert	
Street Light	
Telecommunications	
Traffic Signal	
Traffic Sign	
Water	
Waterway Improvement	
Unknown/Other	
RELEASE OF PRODUCT (YES/NO)	Yes
IGNITION AND/OR FIRE (YES/NO)	No
EXCAVATOR NOTIFY 811 (YES/NO)	No
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	No

INDIANA 811 LOCATE TICKET NUMBER	N/A
LOCATE MARKS VISIBLE (YES/NO)	N/A
LOCATE MARKS CORRECT (YES/NO)	N/A
EXCAVATOR "WHITE LINED" (YES/NO)	No
MAPS USED TO MARK FACILITIES (YES/NO)	N/A
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	No
INCIDENT IMPACT INFORMATION	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	N/A
POLICE DEPARTMENT RESPONSE (YES/NO)	N/A
AMBULANCE RESPONSE (YES/NO)	N/A
ADDITIONAL INFORMATION/COMMENTS	
<p>Compensation has been received from the excavator.</p> <p>No notification made to the one call center.</p> <p>Ticket 1205303204 called in after damage.</p>	

Fact Based Investigation Report

NOTIFICATION ID: 01820120530009 **DISTRICT:** Northern IN
DAMAGE DATE: 5/30/2012 12:50:00 PM **NOTIFICATION DATE:** 5/30/2012 1:21:07 PM
NOTIFIED BY: MARK Facility Owner
DAMAGE ADDRESS: 9565 JULIA DR LOT 28
CITY: ST JOHN **ST:** IN **ZIP:**

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 05/30/2012
FROM: 13:50:00 **TO:** 14:10:00

EXCAVATOR INVOLVED: Apple grove Landscaping
TYPE OF EXCAVATION: unknown

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

DIG UP/DAMAGE REQ.: M51582006 **START DATE/TIME:** 5/30/2012 2:25:00 PM

PICTURES TAKEN BY: eric paulson **DATE/TIME:** 5/30/2012 2:00:00 PM
PHOTOGRAPHY TYPE: Digital **FRAME #:**

INVESTIGATOR EMP#: 130722 **INVESTIGATOR NAME:** eric paulson
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01820120530009
SELECT A CUSTOMER: NIPSCO
CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF **FACILITY ID:** Gas Service
LOCATOR NAME & EMP #:
LOCATOR NOT KNOWN: Yes

CHECK ALL THAT APPLY TO INVESTIGATION:
No Locate Req. By Contractor

Other:

CHECK ALL THAT APPLY TO METHOD OF INVESTIGATION (at least one must be checked):
Visual, Facility Exposed At Time Of Investigation

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

line was not exposed at time of investigation. contractor did not call in locate because they were only digging 6-8 inches and didn't think they needed a ticket

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

na

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

na

LIST ANY OTHER INDIVIDUALS ON SITE:

na

WERE ANY MARKINGS VISIBLE ON THE DAMAGE SITE UPON ARRIVAL? No

WERE ANY OTHER INDICATORS OF FACILITY PRESENT IN THE AREA? No

WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS? No

EXTENT OF FACILITY DAMAGE unknown

REPLACEMENT FOOTAGE unknown

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO? No

WHAT CONTRACTOR EQUIPMENT WAS USED? unknown

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? No

IF YES, PLEASE LIST RECORD #(S)

NIPSCO 01008 IUPPSa 05/30/2012 14:18:38 1205303204-00A NORM NEW STRT

NORMAL NOTICE

Ticket : 1205303204 Date: 05/30/2012 Time: 14:13 Oper: SDOERFLEIN Chan:029

State: IN Cnty: LAKE Twp: ST JOHN
Cityname: ST JOHN Inside: Y Near: N
Subdivision: BRAMBLEWOOD

CASE

3507

Address : 9565
Street : JULIA DR
Cross 1 : 93RD AVE Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY
:
Grids : 4126B8730D 4126A8730D 4126B8730C 4126A8730C
Boundary: n 41.447769 s 41.443764 w -87.506020 e -87.503357

Work type : SPRINKLER SYSTEM
Done for : DAVE DEGRAFF
Start date: 06/01/2012 Time: 14:30 Hours notice: 48/48 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 4 DAYS Depth: 2 FEET

Company : APPLE GROVE LANDCAPING Type: HOME
Co addr : 467 JOYCE CT
City : SOUTH HOLLAND State: IL Zip: 60473
Caller : DAVE DEGRAFF Phone: (708)906-6158
Contact : JIM Phone:
BestTime:
Mobile : (708)906-6158

Remarks : All tickets are taken and processed on Eastern Daylight Time
Will you be white-lining the dig site area? NO
:

Submitted date: 05/30/2012 Time: 14:13
Members: COMCN IB ID4655 ID8133 NIPSCO SM



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Jul 17, 2012

Who is submitting this information?

Name of person providing this information: Carrie Ludwig

Business address (*number and street*): 3511 East 15th Ave

City, State, and ZIP code: Gary, IN 46403

Telephone number (*area code*): 219 962 0422

Fax number (*area code*): 219 962 0404

E-mail address: cludwig@nisource.com

Excavator Information, if known

Full name: Apple Grove Landscaping

Business address (*number and street*): 467 Joyce Ct

City, State, and ZIP code: South Holland, IL 60473

Telephone number (*area code*): 708 906 6158

Fax number (*area code*): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Trencher

Type of work performed: Unknown/Other

Date and Location of Damage

Date of damage (month, day, year): May 30, 2012

County: Lake

City: St John

Street address (number and street, city, state, and ZIP code):
9565 Julia Dr Lot 28, St John IN

Nearest intersection: 93rd Ave

Right of way where damage occurred: Private - Land Owner

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): 1.15

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$

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? 10

Notification, Locating, Marking

Did excavator request locates prior to commencing work? No

Enter Indiana 811 ticket number, if known:

Was the locate request completed within two working days? Unknown/Other

If locates were performed, were they done so by a contractor or pipeline employee? Unknown/Other

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

Were facility marks visible in the area of excavation? No

Were facilities marked correctly? Unknown/Other

Type of markings used: Stakes

If other, please specify: no locates _____

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? Unknown/Other

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

Description of Cause

Select from the list the most accurate cause for the damage: --No notification made to the one-call center

Additional Comments

Excavator called in locate after damage
Ticket #: 1205303204