



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

Pipeline Safety Division Investigation Report

Investigation regarding: **Berry-it, Inc.**

UPPAC Database Record ID: 3528

Report Date: 4/19/2013

Investigator: Mike Orr

Damage Date: 8/2/2012 11:55:37 AM

Damage Address: 6055 N 800 E, Knox, Starke

The Parties

Excavator: **Berry-it, Inc.**

Address: 225 West 450 North, Kokomo, In 46901

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Trencher

Type of Work Performed: Telecommunications

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: False

Number of Customers Affected: 0

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes

Indiana 811 Ticket Number: 1207252779

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

Synopsis: A natural gas service stub was damaged during excavation to install a telecommunications line.

Findings: Reported by Indiana 811; excavator failed to respond to initial notice. The excavator had a valid locate request however; the operator failed to provide accurate locate markings due to inaccurate maps and records.

Conclusion: There was a failure to locate a service stub due to inaccurate maps and records.

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



101 West Ohio Street, Suite 1707
Indianapolis, IN 46204

October 17, 2012

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 3528
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3528

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: 8/2/2012

Event Location: 6055 N 800 E, Knox

Facility Owner: Northern Indiana Public Service Company

Excavator: Berry-it, Inc.

Other Party: N/A

Pipeline Division Case No. 3528

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,

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. 3528	
Date of Event	8/2/2012
Event Location	6055 N 800 E, Knox
Facility Owner	Northern Indiana Public Service Company
Excavator	Berry-it, Inc.
Date of IURC Information Request	9/18/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Berry-It Inc
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	225 W 450 N
CITY/ STATE/ZIP	Kokomo, IN 46901
PREFERRED TELEPHONE	765-450-8804
CELL PHONE TELEPHONE	
EMAIL ADDRESS	DISPATCH@BERRYIT.NET
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	Same
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	800 E & N of 25 N
CITY/STATE/ZIP	Knox, IN 46534
NEAREST INTERSECTION	E 25 N
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)	40
INTERRUPTION IN SERVICE (YES/NO)	N
NUMBER OF CUSTOMERS AFFECTED	0
EVACUATION (YES/NO)	N
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	
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	

Trencher	X
Vacuum Equipment	
Unknown/Other	
TYPE OF WORK PERFORMED (Select 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/Storm)	
Site Development	
Steam	
Storm Drain/Culvert	
Street Light	
Telecommunications	X
Traffic Signal	
Traffic Sign	
Water	
Waterway Improvement	
Unknown/Other	
RELEASE OF PRODUCT (YES/NO)	Y
IGNITION AND/OR FIRE (YES/NO)	N
EXCAVATOR NOTIFY 811 (YES/NO)	Y – 1208021680
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1207313591
LOCATE MARKS VISIBLE (YES/NO)	N
LOCATE MARKS CORRECT (YES/NO)	N
EXCAVATOR "WHITE LINED" (YES/NO)	N
MAPS USED TO MARK FACILITIES (YES/NO)	
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	N
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	
<p>Facility could not be found/located In- service gas stub hit</p>	

Fact Based Investigation Report

01820120802004
Northern IN
8/2/2012 11:55:38 AM
8/2/2012 12:00:33 PM
DAN JONES
6055 N 800 E
KNOX
ST: IN ZIP:

NOTIFICATION ID:
DISTRICT:
DAMAGE DATE:
NOTIFICATION DATE:
NOTIFIED BY:
DAMAGE ADDRESS:
CITY:

NIPSCO

DAMAGED CUSTOMER:

08/02/2012
12:45:00
13:00:00

INVESTIGATION DATE:
FROM:
TO:

BERRY IT INC
FIBER INSTALL

EXCAVATOR INVOLVED:
TYPE OF EXCAVATION:

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

1208021680

DIG UP/DAMAGE REQ.:
START DATE/TIME:

DICK HANSELMAN
8/2/2012 12:50:00 PM
Digital
NA

PICTURES TAKEN BY:
DATE/TIME:
PHOTOGRAPHY TYPE:
FRAME #:

121917

INVESTIGATOR EMP#:
INVESTIGATOR NAME:

DICK HANSELMAN
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?
No

Fact Based Investigation Customer Information

01820120802004

NIPSCO

(optional)

NOTIFICATION ID:

SELECT A CUSTOMER:

CUSTOMER #:

LOWPROF

service - 5/8"

Kendall Andrew - 134727

FACILITY DESCRIPTION:

FACILITY ID:

LOCATOR NAME & EMP #:

LOCATOR NOT KNOWN:

CHECK ALL THAT APPLY TO INVESTIGATION:

Other

Other: STUBBED SERVICE

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:

CONTRACTOR TRENCHING ALONG MARKED MAIN CUT A PL.SERVICE WHICH WAS STUBBED OFF UNDERGROUND.
NO METER/RISER ON PROPERT.

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?

Yes

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

CUT PL. STUBBED SERVICE

REPLACEMENT FOOTAGE

CAPPED AT MAIN

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?

No

WHAT CONTRACTOR EQUIPMENT WAS USED?

NA

IS THE FACILITY SHOWN ON THE UTILITY RECORDS?

No

IF YES, PLEASE LIST RECORD #(S)

NIPSCO 00588 IUPPSa 08/02/2012 11:55:38 1208021680-00a EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1208021680 Date: 08/02/2012 Time: 11:51 Oper: SLUCAS Chan:060

State: IN Cnty: STARKE Twp: WASHINGTON
Cityname: KNOX Inside: N Near: Y
Subdivision:

#3493
|
ε
#3528

Address : 6055
Street : N 800 E
Cross 1 : E 75 N Within 1/4 mile: Y
Location: PAINT AND FLAG ENTIRE AREA FROM 6055 N 800 E GOING SOUTH TO NORTH WEST
CORNER OF 800 E AND SR 25 N
***Boring Where = DIRECTIONAL

:
Grids : 4118C8632B 4118B8632B
Boundary: n 41.311962 s 41.305828 w -86.544342 e -86.542725

Work type : FIBER
Done for : FRONTIER
Start date: 08/02/2012 Time: 11:51 Hours notice: 0/0 Priority: EMER
Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: Y
Duration : 2 WEEKS Depth: 10 FEET

Company : BERRY-IT INCORPORATED Type: CONT
Co addr : 225 WEST 450 NORTH
City : KOKOMO State: IN Zip: 46901
Caller : DAN JONES Phone: (765)450-8804
Contact : DAN JONES - CELL Phone:
BestTime:
Mobile : (765)450-8804
Fax : (765)450-6042
Email : DISPATCH@BERRYIT.NET

Remarks : All tickets are taken and processed on Eastern Daylight Time
A NIPSCO GAS LINE WAS HIT IN THE FRONT OF THE PROPERTY - LINE IS BLOWING AND GAS
IS SMELLED - CALLER HAS NOT 911 BUT WAS ADVISED TO DO SO - CREW ON SITE - CALLER
HAS NOT CALLED THE UTILITY TO REPORT THE DAMAGE BUT WAS ALSO ADVISED TO DO SO -
PREVIOUS TICKETS NUMBERS ARE 1207252779 AND A REMARK TICKET NUMBER OF 1207313591
- THANK YOU

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

Submitted date: 08/02/2012 Time: 11:51
Members: ID2034 ID2511 NIPSCO ID5857

NIPSCO 00926 IUPPSa 07/31/2012 16:38:13 1207313591-00A NORM NEW GRID

NORMAL NOTICE REMARK

Ticket : 1207313591 Date: 07/31/2012 Time: 16:37 Oper: KAMIE.ALLEN Chan:000
Old Tkt: 1207252779 Date: 07/25/2012 Time: 15:33 Oper: KAMIE.ALLEN Rev: 00A

State: IN Cnty: STARKE Twp: WASHINGTON
Cityname: KNOX Inside: N Near: Y
Subdivision:

3493
3528

Address : 6055
Street : N 800 E
Cross 1 : E 75 N Within 1/4 mile: Y
Location: PAINT AND FLAG ENTIRE AREA FROM 6055 N 800 E GOING SOUTH TO NORTH WEST
CORNER OF 800 E AND SR 25 N
***Boring Where = DIRECTIONAL

:
Grids : 4118C8632B 4118B8632B
Boundary: n 41.311962 s 41.305828 w -86.544342 e -86.542725

Work type : FIBER
Done for : FRONTIER
Start date: 08/02/2012 Time: 16:45 Hours notice: 48/48 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N
Duration : 2 WEEKS Depth: 10 FEET

Company : BERRY-IT INCORPORATED Type: CONT
Co addr : 225 WEST 450 NORTH
City : KOKOMO State: IN Zip: 46901
Caller : KAMIE ALLEN Phone: (765)450-8804
Contact : DAN JONES Phone:
BestTime:
Mobile : (317)508-2807
Fax : (765)450-6042
Email : DISPATCH@BERRYIT.NET

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

Submitted date: 07/31/2012 Time: 16:37
Members: ID2034 ID2511 NIPSCO ID5857

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

** COMPLETE FORM FOR ALL DAMAGES TO NIPSCO FACILITIES **

REPORTING OPERATING AREA Plymouth MAXIMO WO #
OPERATING AREA CONTACT JOB ORDER # 566216
TRACKING NUMBER 01820120802005 LOCATE REF #
Locate Performed By:

DATE AND TIME OF ACCIDENT 8/2 2012 11:04 AM DATE OF REPORT 8/2/12
PLACE OF DAMAGE (INCLUDE CITY) CR 800 E. + CR 25 N.

DAMAGE WAS TO:
ELECTRIC - POLE / TRANSFORMER: # SIZE YEAR INSTALLED BROKEN YES () NO ()
OTHER (DESCRIBE)

GAS: SERVICE () MAIN () SIZE 5/8" MATERIAL: PLASTIC () STEEL () METER () REG STATION () STUB ()
OTHER (DESCRIBE)

DEPTH OF FACILITY (inches) 18" PRESSURE (PSI) 40 Lbs.
RELEASE OF GAS: YES () NO () IGNITION OF GAS: YES () NO () EVACUATION REQUIRED: YES () # NO ()
INTERRUPTION OF SERVICE: YES () NO () NUMBER OF CUSTOMERS LOST: 0
DURATION OF INTERRUPTION: TIME REPORTED N/A TIME SHUT OFF N/A TIME RESTORED N/A
DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 5/8"

LOCATE MARKS ON SITE: YES () DISTANCE BETWEEN FACILITY AND LOCATE MARKS NO ()
HOW LOCATED: PAINT () FLAGS () BOTH () WHITE LINED ()

PARTY THAT CAUSED DAMAGES (NAME) Betty's Construction

ADDRESS OF PARTY (INCLUDE CITY) (317) 508 2807 Dan Jones

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE Dan Jones

WITNESS NAME AND ADDRESS

WITNESS REMARKS

AGENCIES NOTIFIED / ONSITE: POLICE () AGENCY REPORT #
FIRE () AGENCY REPORT #
OTHER () Any injuries? () YES # () NO

PHOTOS TAKEN: YES () NO () TAKEN BY: (ATTACH PHOTOS TO REPORT)
MEDIA ON SITE YES () NO ()

- WORK IN PROGRESS WHEN FACILITY DAMAGED - CHECK APPROPRIATE CHOICE BELOW
() AGRICULTURE/FARMING () CABLE TV () CURB/SIDEWALK () TELECOMMUNICATIONS
() BLDG CONSTRUCTION () DEMOLITION () DRAINAGE () WATER
() DRIVEWAY () ELECTRIC () SURVEYING () MOWING
() FENCING () GRADING () IRRIGATION () DRAINING
() LANDSCAPING () PIPELINE () MILLING () OTHER Fiber cable
() POLE/SIGN POST () ROAD WORK () SEWER

- TYPE OF EQUIPMENT USED - CHECK APPROPRIATE CHOICE BELOW
() AUGER () HAND TOOLS () BACKHOE/TRACKHOE
() MILLING EQUIPMENT () PROBING DEVICE () BORING / DRILLING
() EXPLOSIVES () TRENCHER () FARM EQUIPMENT
() VACCUUM EQUIPMENT () GRADER () OTHER

- REASON DAMAGE OCCURRED - CHECK APPROPRIATE CHOICE BELOW
() AUTOMOTIVE ACCIDENT () EXCAVATING BEFORE LOCATES DUE () CARELESS MACHINE OPERATOR
() NO NOTIFICATION () MARKS DISTURBED () STUB
OTHER unused service
untraceable

COMMENTS: Service went to burned down house
service was untraceable AND NEVER
RETRIEVED

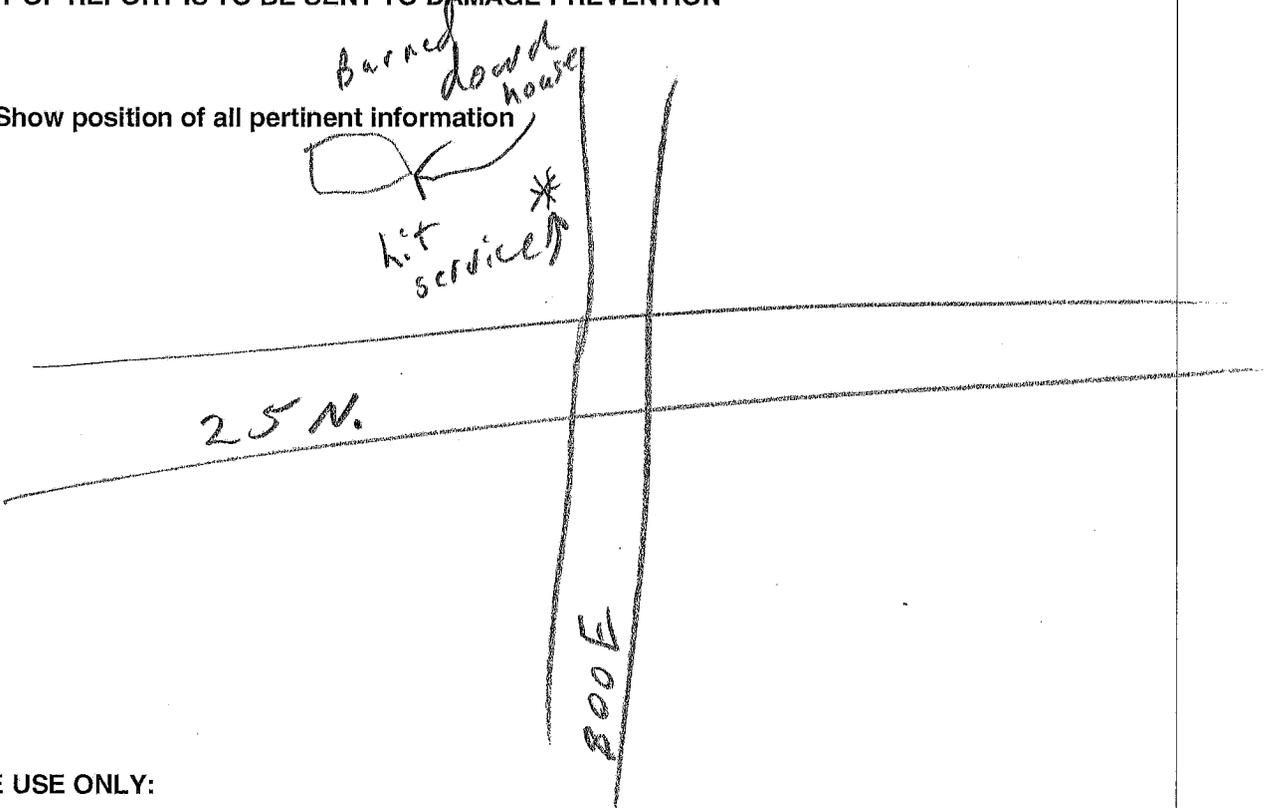
PERSON PREPARING REPORT David Lempecki

FIELD SUPERVISOR Bob Somers

FIELD MANAGER _____

- ORIGINAL REPORT AND SUPPORTING INFORMATION IS TO BE SENT TO FACILITY DAMAGE RECOVERY
- COPY OF REPORT IS TO BE SENT TO DAMAGE PREVENTION

SKETCH: - Show position of all pertinent information



FOR OFFICE USE ONLY:

- | | | |
|---|-----|----|
| • DID EXCAVATION OCCUR BEFORE LOCATES WERE DUE | YES | NO |
| • NO IN 811 LOCATE CALLED IN | YES | NO |
| • DAMAGE CAUSED FROM EXCAVATION WITHIN 24" ZONE | YES | NO |
| • EXPIRED LOCATE | YES | NO |
| • WAS WHITE LINING INDICATED ON LOCATE REQUEST | YES | NO |

COMPLETED BY: _____ DATE: _____



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Aug 23, 2012

Who is submitting this information?

Name of person providing this information: Steve Noffsinger

Business address (*number and street*): 3511 E 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: Berry-It Inc

Business address (*number and street*): 225 W 450 N

City, State, and ZIP code: Kokomo, IN, 46901

Telephone number (*area code*): (765)450-8804

Fax number (*area code*): (765)450-6042

E-mail address: DISPATCH@BERRYIT.NET

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Trencher

Type of work performed: Telecommunications

Date and Location of DamageDate of damage (*month, day, year*): Aug 2, 2012County: StarkeCity: KnoxStreet address (*number and street, city, state, and ZIP code*):
800 E & N of 25 N, Knox, IN 46534Nearest intersection: E 75 NRight of way where damage occurred: Private - Land OwnerWas there a release of product? YesIf yes, was there an ignition of product? NoWere evacuations necessary as a result of release? NoIf yes, how many evacuated? 0Was there a customer service interruption? NoIf yes, how many affected? 0Time to restore service (*in hours*): _____Enter number of injuries, if applicable and known: 0Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ _____

Affected Facility InformationWhat type of pipeline was damaged? Natural GasWhat was the affected facility? Service/DropWhat was the depth of the facility, in inches? 18

Notification, Locating, MarkingDid excavator request locates prior to commencing work? YesEnter Indiana 811 ticket number, if known: 1207313591

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? 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? Unknown/Other

Type of markings used: Other

If other, please specify: No locates --Untoneable

Was site marked by "White Lining"? No

Were special instructions part of the locate request? No

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

Description of Cause

Select from the list the most accurate cause for the damage: Abandoned facility

Additional Comments

Untoneable unmarked stub hit

Nipsco emergency repair ticket 1208021984

Damage ticket 1208021680



150 West Market Street, Suite 600
Indianapolis, IN 46204

February 15, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 3528
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Notification of Possible Violations; Pipeline Division Case No. 3528
Date of Event: 8/2/12
Event Location: 6055 N 800 E, KNOX
Excavator: BERRY-IT, INC.
Other Party: N/A

To Whom It May Concern:

This letter responds to the Indiana Utility Regulatory Commission, Division of Pipeline Safety, Notification of Possible Violations for Case No. 3528 (as detailed above) identifying potential violations of Indiana law dated January 16, 2013. NIPSCO has not identified any additional information related to this incident not already provided in its October 17, 2012 response. The stub line damaged had not been correctly located.

If there are any additional questions, please contact the undersigned.

Very truly yours,

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

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