



Pipeline Safety Division Investigation Report

Investigation regarding: **Culy Construction & Excavating, Inc.**

UPPAC Database Record ID: 3553

Investigator: Howard Friend

Report Date: 12/21/2012

Damage Date: 8/6/2012 2:52:32 PM

Damage Address: Deveron Dr

City: New Haven

County: Allen

The Parties

Excavator: **Culy Construction & Excavating, Inc.**

Contact: Jj Hall, Vice President Safety & Environmental Dir

Address: 5 Industrial Park Drive, P.o. Box 29, Winchester, In 47394

Telephone:

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: Culy Construction & Excavating, Inc.

UPPAC Database Record ID: 3553

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$1836

Excavator Activities/Cause of damage information:

Excavator request locates: Yes Indiana 811 ticket Number: 1208011992

Type of Equipment: Hand Tools

Type of work performed: Road Work

Synopsis: A natural gas service was damaged while using a saw to cut the street.

Findings: Reported by Indiana 811; excavator's response to initial notice was received on 9/19/2012. The excavator had a valid locate request and the operator provided accurate locate markings. The natural gas service was only 8" deep and the damage would have been hard to avoid.

Conclusion: The excavator ignored the painted area and used a concrete saw over the marked facility.

Violation: IC 8-1-26-20(b): Failure to plan excavation to avoid damage or interference with underground facilities; Failure to maintain two (2) feet clearance with mechanized equipment.

From: [JJ Hall](#)
To: [IURC PipelineDamageCase](#)
Subject: Case #3553 INITIAL DOCUMENTS - EXCAVATOR
Date: Wednesday, September 19, 2012 9:56:07 AM
Attachments: [Attached Image.msg](#)
[Gas line cut.msg](#)

To whom it may concern,

I have attached the forms we fill out before a job with the locate information on it and the sheet we use if we hit a utility. As you read in the report we saw cutting the concrete road to be able to start the excavation of new water main. In order to start the excavation we had to saw cut the road. There was no way to prevent this from happening without tearing out the gas line. I have attached pictures of the saw cuts in the road. If you have any questions please let me know.

JJ Hall

Vice President /
Safety & Environmental Director
jjh@culycontracting.com
www.culycontracting.com
Office: 765-584-8509
Mobile :765-220-2327
Fax :765-584-8060



UNDERGROUND UTILITY ACCIDENT REPORT



Company Name Address (Main Office)		Job Name Address <i>New Haven</i>
Crew Members Names Supervisor: <i>Rick Smith</i> Workers: <i>Darin Yancy</i>		Name of Other Witnesses (include phone#, address or employer's name, if possible)
Description of Job <i>Cutting saw cuts to remove concrete from road</i>		
Were Utility Lines marked? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Name/Phone# of Locator Service: _____		
Locator Log # (Confirmation #) <i>1208011992</i> Date Marked: _____ By Whom: <i>N/A</i>		
Date of Accident <i>8/6/12</i>		Time of Accident <i>2:52</i>
Accident Description (Describe How the Accident Occurred) <i>Saw cutting to be able to remove concrete and cut into gas line while saw cutting</i>		
Describe Damaged Property <i>Cut gas service</i>		
List Owner of Damaged Property Name <i>NIJSCO</i>		Address: <i>1312 Deveron Drive</i> Phone # <i>219 800-647-4033</i>
Sketch of Job Where Accident Occurred (Sketch) Show Trench Point of Damage (approx.) Location & Depth of Utility Line Where were Marked & Unmarked Identify Location of Photos Show Direction of North		
<p>The sketch shows a vertical line labeled 'road' with two parallel lines inside it labeled 'saw cuts'. A horizontal line labeled 'gas line' crosses the road from right to left.</p>		
List Names of Emergency Response Personnel (Police, Fire, EMTs, etc.) Names: <i>Fire Dept</i> Badge# _____		
Name of Person Completing This Report: (Print Name) <i>JJ Hall</i> (Signature) <i>JJ Hall</i>	Name of Photographer (If Video or Photo(s) were taken) (Print Name) _____	When was Report Completed (Date) _____ (Time) _____

INDIANA UNDERGROUND PLANT PROTECTION SERVICES
1-800-382-5544

CONTRACTOR'S PHONE NUMBER WITH AREA CODE: 765-584-8509

CALLER NAME: Rick Smith EXT. _____

CONTRACTOR NAME: CULY CONSTRUCTION & EXCAVATING, INC.
CONTRACTOR ADDRESS: 610 N. 100 EAST, P.O. BOX 29 M/U/C/I/O/R
CITY: WINCHESTER STATE: INDIANA ZIP: 47394 FAX: 765-584-81

MOBILE: 765-546-1611 EXT. _____ BEST CALL BACK TIME: 7AM TO

COUNTY: Allen TOWNSHIP: Adams

SUBDIVISION: Highland Terrace LOT#: _____

ADDRESS: Dereon Rd

CROSS STREET: Green Rd WITHIN 1/4 MILE: YES OR

SECOND CROSS STREET: Dundee Rd

CITY/TOWN: New Haven

LOCATION: Green + Dereon to Dundee + Dereon

BLASTING? YES OR NO BORING? YES OR RAILROAD YES OR

START DATE: _____ TIME: _____ DURATION: 1 month DEPTH: _____

WORK TYPE: Excavation Water Main DONE FOR: City of

NAME OF CONTRACTOR'S REP. ON SITE: Rick Smith PHONE: 765-

HEADER: _____

REMARKS: _____

COMMENTS: _____

ORIGINAL TICKET NUMBER TO BE UPDATED: 1208011992

RENEWAL DATE: Aug 17, 2012

CURRENT DATE: Aug 1, 2012

Permit Ticket #
120 - 806 - 3091
2:52 PM 8-6-12









101 West Ohio Street, Suite 1707
Indianapolis, IN 46204

October 22, 2012

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 3553
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3553

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: 8/6/2012

Event Location: Deveron Dr, New Haven

Facility Owner: Northern Indiana Public Service Company

Excavator: Culy Construction & Excavating, Inc.

Other Party: N/A

Pipeline Division Case No. 3553

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. 3553	
Date of Event	8/6/2012
Event Location	Deveron Dr, New Haven
Facility Owner	Northern Indiana Public Service Company
Excavator	Culy Construction & Excavating, Inc.
Date of IURC Information Request	9/18/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Culy Construction
RESPONSIBLE PARTY PERSONAL NAME	Rick Smith
TITLE (IF ANY)	
ADDRESS	5 Industrial Pk Dr.
CITY/ STATE/ZIP	Winchester, IN 47394
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 Locating Service
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	9045 North River Road, Suite 300
CITY/ STATE/ZIP	Indianapolis, IN 46240
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
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	1312 Deveron Dr
CITY/STATE/ZIP	New Haven, IN 46774
NEAREST INTERSECTION	Green Rd
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)	Yes
IF YES, HOW MANY EVACUATED	2
REPAIR COST (IF KNOWN) (\$)	1,836.22
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	
Vacuum Equipment	
Unknown/Other	X Saw
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	
Traffic Signal	
Traffic Sign	
Water	X
Waterway Improvement	
Unknown/Other	
RELEASE OF PRODUCT (YES/NO)	Yes
IGNITION AND/OR FIRE (YES/NO)	No
EXCAVATOR NOTIFY 811 (YES/NO)	Yes 1208063091
LOCATE INFORMATION:	

EXCAVATOR REQUEST LOCATE (YES/NO)	Yes
INDIANA 811 LOCATE TICKET NUMBER	1208063091
LOCATE MARKS VISIBLE (YES/NO)	Yes
LOCATE MARKS CORRECT (YES/NO)	Yes
EXCAVATOR "WHITE LINED" (YES/NO)	
MAPS USED TO MARK FACILITIES (YES/NO)	Yes
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)	
POLICE DEPARTMENT RESPONSE (YES/NO)	
AMBULANCE RESPONSE (YES/NO)	
ADDITIONAL INFORMATION/COMMENTS	
<p>Failure to use hand tools where required Compensation has been received from the excavator. Nipsco emergency repair ticket #: 1208063589</p>	

NIPSCO 01010 IUPPSa 08/06/2012 14:52:32 1208063091-00A EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1208063091 Date: 08/06/2012 Time: 14:51 Oper: SPOPE Chan:044

3553

State: IN Cnty: ALLEN Twp: ADAMS
Cityname: NEW HAVEN Inside: Y Near: N
Subdivision:

Address :

Street : DEVERON DR

Cross 1 : GREEN RD Within 1/4 mile: Y

Location: LOCATE FROM THE ABOVE INTERSECTION LOCATING EAST FOR APPROX 400 FEET
ON DEVERON DR LOCATING FROM THE NORTH RIGHT OF WAY TO THE SOUTH RIGHT OF WAY FOR
THE ENTIRE LOCATE DISTANCE STOPPING AT DUNDEE DR

***Boring Where = UNDER DEVERON DR

:

Grids : 4103C8500C 4103C8500B

Boundary: n 41.058121 s 41.056217 w -85.012001 e -85.008316

Work type : INSTALLING A WATER MAIN

Done for : CITY OF NEW HAVEN

Start date: 08/06/2012 Time: 14:51 Hours notice: 0/0 Priority: EMER

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

Duration : 1 MONTH Depth: 5 FEET

Company : CULY CONTRACTING Type: CONT

Co addr : 5 INDUSTRIAL PARK DR

City : WINCHESTER State: IN Zip: 47394

Caller : RICK SMITH Phone: (765)584-8509

Contact : RICK SMITH---CELL Phone:

BestTime:

Mobile : (765)546-1611

Fax : (765)584-8060

Email : RICKS@CULYCONTRACTING.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time
UNKNOWN GAS LINE HAS BEEN CUT--LINE IS BLOWING--ADVISED TO CALL 911--LINE WAS
CUT APPROX 200FT EAST OF GREEN RD ALONG THE SOUTH RIGHT OF WAY--UNKNOWN SIZE AND
COLOR--CREW ON SITE--PREV TICKET 1208011992--THANK YOU
Will you be white-lining the dig site area? YES

:

Submitted date: 08/06/2012 Time: 14:51

Members: AEPIN CC FW ID7050 ID8000 NIPSCO SM

NIPSCO 00648 IUPPSa 08/01/2012 13:05:11 1208011992-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1208011992 Date: 08/01/2012 Time: 13:01 Oper: DSEGO Chan:087

State: IN Cnty: ALLEN Twp: ADAMS
Cityname: NEW HAVEN Inside: Y Near: N
Subdivision:

3553

Address :

Street : DEVERON DR

Cross 1 : GREEN RD Within 1/4 mile: Y

Location: LOCATE FROM THE ABOVE INTERSECTION LOCATING EAST FOR APPROX 400 FEET
ON DEVERON DR LOCATING FROM THE NORTH RIGHT OF WAY TO THE SOUTH RIGHT OF WAY FOR
THE ENTIRE LOCATE DISTANCE STOPPING AT DUNDEE DR

***Boring Where = UNDER DEVERON DR

:

Grids : 4103C8500C 4103C8500B

Boundary: n 41.058121 s 41.056217 w -85.012001 e -85.008316

Work type : INSTALLING A WATER MAIN

Done for : CITY OF NEW HAVEN

Start date: 08/03/2012 Time: 13:15 Hours notice: 48/48 Priority: NORM

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

Duration : 1 MONTH Depth: 5 FEET

Company : CULY CONTRACTING Type: CONT

Co addr : 5 INDUSTRIAL PARK DR

City : WINCHESTER State: IN Zip: 47394

Caller : RICK SMITH Phone: (765)584-8509

Contact : RICK SMITH---CELL Phone:

BestTime:

Mobile : (765)546-1611

Fax : (765)584-8060

Email : RICKS@CULYCONTRACTING.COM

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

Will you be white-lining the dig site area? YES

:

Submitted date: 08/01/2012 Time: 13:01

Members: AEPIN CC FW ID7050 ID8000 NIPSCO SM

Fact Based Investigation Report

NOTIFICATION ID: 01820120806015 **DISTRICT:** Northern IN
DAMAGE DATE: 8/6/2012 2:52:32 PM **NOTIFICATION DATE:** 8/6/2012 3:00:18 PM
NOTIFIED BY: RICK SMITH
DAMAGE ADDRESS: DEVERON DR
CITY: NEW HAVEN **ST:** IN **ZIP:**

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 08/06/2012
FROM: 00:00:00 **TO:** 00:00:00

EXCAVATOR INVOLVED: CULY CONSTRUCTION
TYPE OF EXCAVATION: concrete

ORIG. LOCATE REQ.: 1208011992 **START DATE/TIME:**
TYPE OF TICKET: **LOCATE REQ. INFO N/A:**

DIG UP/DAMAGE REQ.: 1208063091 **START DATE/TIME:**

PICTURES TAKEN BY: Greg Hadden **DATE/TIME:** 8/6/2012 12:00:00 AM
PHOTOGRAPHY TYPE: Digital **FRAME #:**

INVESTIGATOR EMP#: 125397 **INVESTIGATOR NAME:** Greg Hadden
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01820120806015
SELECT A CUSTOMER: NIPSCO
CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF **FACILITY ID:** Gas Service
LOCATOR NAME & EMP #: Hadden Gregory - 134866
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 STATEMENT/CAUSAL FACTORS:

Paint lines up with damage site

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? Yes

WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS? Yes

EXTENT OF FACILITY DAMAGE cut in 2

REPLACEMENT FOOTAGE 1'

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO? No n

WHAT CONTRACTOR EQUIPMENT WAS USED? saw

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? No

IF YES, PLEASE LIST RECORD #(S) na



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Sep 29, 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: Culy Contracting

Business address (*number and street*): 5 Industrial Park Dr

City, State, and ZIP code: Winchester, IN, 47394

Telephone number (*area code*): (765)584-8509

Fax number (*area code*): (765)584-8060

E-mail address: RICKS@CULYCONTRACTING.COM

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Unknown/Other

Type of work performed: Water

Date and Location of Damage

Date of damage (month, day, year): Aug 6, 2012

County: Allen

City: New Haven

Street address (number and street, city, state, and ZIP code):
Devron Dr & Green Rd, New Haven, IN, 46774

Nearest intersection: Green Rd

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? Yes

If yes, how many evacuated? 2

Was there a customer service interruption? Yes

If yes, how many affected? _____

Time to restore service (in hours): 3.75

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? 8

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1208011992

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? Yes

Were facilities marked correctly? Yes

Type of markings used: Paint

If other, please specify: _____

Was site marked by "White Lining"? Yes

Were special instructions part of the locate request? No

Were maps used to complete the locate request? Yes

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? Yes

Description of Cause

Select from the list the most accurate cause for the damage: --Failure to use hand tools where required

Additional Comments

Type of equipment was a concrete saw

Damage ticket 1208063091

Nipsco emergency repair ticket 1208063589

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA FORT WAYNE MAXIMO WO # M525940
OPERATING AREA CONTACT Roger Brown JOB ORDER # 564416
TRACKING NUMBER 018-2012-0806-019 LOCATE REF # 1208011992
Locate Performed By: DAM TIC # 1208063091

DATE AND TIME OF ACCIDENT 8-6-12 @ 1508 20 M DATE OF REPORT 8-6-12
PLACE OF DAMAGE (INCLUDE CITY) 1312 DEVERON DR NEW HAVEN, IN 46774

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) 8" PRESSURE (PSI) 15# Lbs.

RELEASE OF GAS: YES NO () IGNITION OF GAS: YES () NO EVACUATION REQUIRED: YES # 2 NO ()

INTERRUPTION OF SERVICE: YES NO () NUMBER OF CUSTOMERS LOST: _____

DURATION OF INTERRUPTION: TIME REPORTED 1508 TIME SHUT OFF 16:57 TIME RESTORED 20:45 pm

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: CUT IN TWO 1/2"

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

PARTY THAT CAUSED DAMAGES (NAME) CULY CONTRACTING

ADDRESS OF PARTY (INCLUDE CITY) 5 INDUSTRIAL PK DR WINCHESTER IN 47394

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE RICK SMITH

WITNESS NAME AND ADDRESS DARIN VANEY

WITNESS REMARKS 8-10" BLADE CUTTING STREET

AGENCIES NOTIFIED / ONSITE: POLICE () AGENCY _____ REPORT # _____

FIRE AGENCY NHFD 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

<input type="checkbox"/> AGRICULTURE/FARMING	<input type="checkbox"/> CABLE TV	<input type="checkbox"/> CURB/SIDEWALK	<input type="checkbox"/> TELECOMMUNICATIONS
<input type="checkbox"/> BLDG CONSTRUCTION	<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> DRAINAGE	<input checked="" type="checkbox"/> WATER
<input type="checkbox"/> DRIVEWAY	<input type="checkbox"/> ELECTRIC	<input type="checkbox"/> SURVEYING	<input type="checkbox"/> DRAINS/CULVERTS
<input type="checkbox"/> FENCING	<input type="checkbox"/> GRADING	<input type="checkbox"/> IRRIGATION	<input type="checkbox"/> MOWING
<input type="checkbox"/> LANDSCAPING	<input type="checkbox"/> PIPELINE	<input type="checkbox"/> MILLING	<input type="checkbox"/> OTHER _____
<input type="checkbox"/> POLE/SIGN POST	<input type="checkbox"/> ROAD WORK	<input type="checkbox"/> SEWER	

TYPE OF EQUIPMENT USED - CHECK APPROPRIATE CHOICE BELOW

<input type="checkbox"/> AUGER	<input type="checkbox"/> HAND TOOLS	<input type="checkbox"/> BACKHOE/TRACKHOE
<input type="checkbox"/> MILLING EQUIPMENT	<input type="checkbox"/> PROBING DEVICE	<input type="checkbox"/> BORING / DRILLING
<input type="checkbox"/> EXPLOSIVES	<input type="checkbox"/> TRENCHER	<input type="checkbox"/> FARM EQUIPMENT
<input type="checkbox"/> VACCUUM EQUIPMENT	<input type="checkbox"/> GRADER	<input checked="" type="checkbox"/> OTHER <u>Concrete Saw</u>

REASON DAMAGE OCCURRED - CHECK APPROPRIATE CHOICE BELOW

<input type="checkbox"/> AUTOMOTIVE ACCIDENT	<input type="checkbox"/> EXCAVATING BEFORE LOCATES DUE	<input type="checkbox"/> CARELESS MACHINE OPERATOR
<input type="checkbox"/> NO NOTIFICATION	<input type="checkbox"/> MARKS DISTURBED	<input type="checkbox"/> STUB <u>OTHER Could Not See How</u>

• SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM Deep Service WAS SIN #110601 Rev. 6-12
(WAS CUTTING CONCRETE W/ DIAMOND SAW)

COMMENTS: While Sawing Concrete Contractor Sawing Street
Cut into a 5/8" PLASTIC Service w/ Concrete Saw
Had No Way of Knowing Depth. (8" deep)

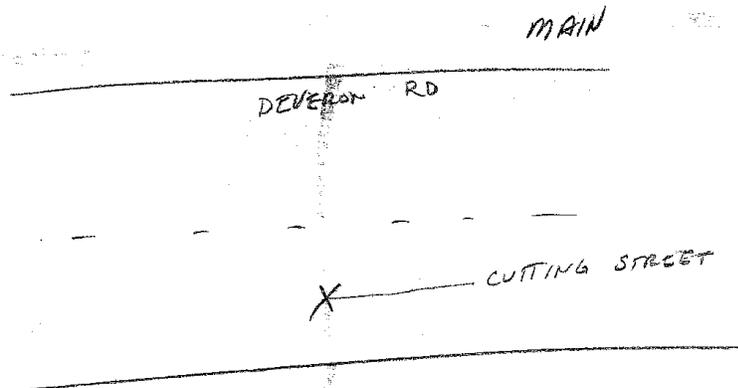
PERSON PREPARING REPORT SANCE

FIELD SUPERVISOR D. Roger Brown

FIELD MANAGER Radell Dumm

- 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:

1312

- | | | |
|---|-----|----|
| • 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: _____