



## Pipeline Safety Division Investigation Report

### Investigation regarding: **John Boettcher Sewer & Excavating**

UPPAC Database Record ID: 3557

Investigator: Howard Friend

Report Date: 12/17/2012

Damage Date: 8/9/2012 4:17:24 PM

Damage Address: Main St

City: La Paz

County: Marshall

### The Parties

Excavator: **John Boettcher Sewer & Excavating**

Contact: Joe Fuksa

Address: 3305 North Home Street, Mishawaka, In 46545

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: John Boettcher Sewer & Excavating**

UPPAC Database Record ID: 3557

**Damage Impact**

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$800

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

Excavator request locates: Yes Indiana 811 ticket Number: 1207300394

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Sewer

**Synopsis:** A natural gas service was damaged during excavation for a sewer line.

**Findings:** Reported by Indiana 811; excavator did not respond to initial notice mailed 9/14/2012. The excavator had a valid locate request and the operator provided accurate locate markings. The excavator failed to maintain clearance with mechanized equipment.

**Conclusion:** Excavator failed to maintain the required clearance with mechanized equipment.

**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.**



Date: 09/17/2012

MAIL MAIL:

The following is in response to your 09/17/2012 request for delivery information on your Certified Mail(TM)/RRE item number 9214 8901 0661 5400 0004 2837 71. The delivery record shows that this item was delivered on 09/17/2012 at 10:13 AM in MISHAWAKA, IN 46545. The scanned image of the recipient information is provided below.

Signature of Recipient:

Signature of Recipient: Sue Purdonski

Address of Recipient:

Address of Recipient: 3305 N. HOME ST.

Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local Post Office or postal representative.

Sincerely,

United States Postal Service

The customer reference info shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

3557  
JOE FUKSA  
JOHN BOETTCHER SEWER AND EXCAVAT  
3305 N HOME ST  
MISHAWAKA IN 46545-4433



101 West Ohio Street, Suite 1707  
Indianapolis, IN 46204

October 17, 2012

*Via Electronic Transmission – [PipelineDamageCase@urc.in.gov](mailto:PipelineDamageCase@urc.in.gov)*

Pipeline Safety Division – Case No. 3557  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3557

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: 8/9/2012

Event Location: Main St, La Paz

Facility Owner: Northern Indiana Public Service Company

Excavator: John Boettcher Sewer & Excavating

Other Party: N/A

Pipeline Division Case No. 3557

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](mailto:cearle@nisource.com)

<b>IURC INFORMATION REQUEST</b>	
<b>Pipeline Safety Division Case No. 3557</b>	
Date of Event	8/9/2012
Event Location	Main St, La Paz
Facility Owner	Northern Indiana Public Service Company
Excavator	John Boettcher Sewer & Excavating
Date of IURC Information Request	9/18/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	John Boettcher Sewer & Excavating
RESPONSIBLE PARTY PERSONAL NAME	Dave Kell
TITLE (IF ANY)	
ADDRESS	3305 N. Home St
CITY/ STATE/ZIP	Mishawaka, IN 46545
PREFERRED TELEPHONE	574-229-4204
CELL PHONE TELEPHONE	
EMAIL ADDRESS	JOE@JOHNBOETTCHER.COMCASTBIZ.NET
<b>FACILITY INFORMATION - OWNER/OPERATOR OF UTILITY LINE:</b>	
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
<b>LOCATOR SERVICE INFORMATION</b>	
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
<b>OTHER (WITNESS, POLICE, FIRE, OTHER) INFORMATION</b>	
PERSONAL CONTACT	
BUSINESS/ORGANIZATION NAME	
TITLE (IF ANY)	

ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
<b>UTILITY LINE IMPACT</b>	
<b>LOCATION OF DAMAGE</b>	
ADDRESS	204 Main St
CITY/STATE/ZIP	Lapas, IN 4537
NEAREST INTERSECTION	Walnut St
<b>PRODUCT TYPE (Select One)</b>	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
<b>FACILITY TYPE (Select One)</b>	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	5/8 plastic
PRESSURE (PSIG/INCHES)	40
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	N
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	800.13
<b>CAUSE OF DAMAGE INFORMATION:</b>	
<b>TYPE OF EQUIPMENT (Select One)</b>	
Auger	
Backhoe/Trackhoe	X
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trancher	
Vacuum Equipment	
Unknown/Other	
<b>TYPE OF WORK PERFORMED (Select One)</b>	
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)	X
Site Development	
Steam	
Storm Drain/Culvert	
Street Light	
Telecommunications	
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 - 1208092459
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1207300394
LOCATE MARKS VISIBLE (YES/NO)	Y
LOCATE MARKS CORRECT (YES/NO)	Y
EXCAVATOR "WHITE LINED" (YES/NO)	N
MAPS USED TO MARK FACILITIES (YES/NO)	
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	N
<b>INCIDENT IMPACT INFORMATION</b>	
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)	
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
Failure to use hand tools where required	

# Fact Based Investigation Report

01820120809005  
Northern IN  
8/9/2012 4:17:30 PM  
8/9/2012 4:25:20 PM  
JOE FUKSA  
MAIN ST  
LA PAZ  
ST: IN ZIP:

---

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

NIPSCO

---

DAMAGED CUSTOMER:

08/09/2012  
16:45:00  
17:10:00

---

INVESTIGATION DATE:  
FROM:  
TO:

JOHN BOETTCHER  
SEWER

---

EXCAVATOR INVOLVED:  
TYPE OF EXCAVATION:

1207300394

---

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

1208092459

---

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

JIM HOSTETLER  
8/9/2012 5:10:00 PM  
Digital  
N/A

---

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

125835

---

INVESTIGATOR EMP#:  
INVESTIGATOR NAME:

JIM HOSTETLER  
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?  
No

## Fact Based Investigation Customer Information

01820120809005

NIPSCO

(optional)

NOTIFICATION ID:

SELECT A CUSTOMER:

CUSTOMER #:

LOWPROF

Gas Service

Hostetler Jim - 125835

FACILITY DESCRIPTION:

FACILITY ID:

LOCATOR NAME & EMP #:

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:**

JIM "CONTRACTOR EXPOSED RETIRED PLASTIC SERV. THEN CUT LIVE SERV. OVER ABOUT 5IN , MARKS GOOD"

**NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:**

N/A

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

N/A

**LIST ANY OTHER INDIVIDUALS ON SITE:**

N/A

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

Yes

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

Yes

**WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS?**

Yes

**EXTENT OF FACILITY DAMAGE**

CUT

**REPLACEMENT FOOTAGE**

2

**WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?**

No N/A

**WHAT CONTRACTOR EQUIPMENT WAS USED?**

N/A

**IS THE FACILITY SHOWN ON THE UTILITY RECORDS?**

No

**IF YES, PLEASE LIST RECORD #(S)**

N/A

NIPSCO 00832 IUPPSa 08/09/2012 16:17:30 1208092459-00A EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1208092459 Date: 08/09/2012 Time: 16:15 Oper: KSWANK Chan:063

State: IN Cnty: MARSHALL Twp: NORTH  
Cityname: LA PAZ Inside: Y Near: N  
Subdivision:

#3557

Address :

Street : MAIN ST

Cross 1 : WALNUT ST Within 1/4 mile: Y

Location: FROM THE INTERSECTION---LOCATE HEADING SOUTH ON BOTH SIDES OF MAIN ST  
FOR APPROX 330 FEET

:

Grids : 4127C8618B 4127B8618B

Boundary: n 41.459671 s 41.457741 w -86.310234 e -86.308731

Work type : INSTALL STORM SEWER

Done for : TOWN OF LAPAZ

Start date: 08/09/2012 Time: 16:15 Hours notice: 0/0 Priority: EMER

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

Duration : 20 DAYS Depth: 12 FEET

Company : JOHN BOETTCHER SEWER AND EXCAVATING Type: CONT

Co addr : 3305 NORTH HOME STREET

City : MISHAWAKA State: IN Zip: 46545

Caller : JOE FUKSA Phone: (574)259-1418

Contact : DAVE FELL - CELL Phone:

BestTime:

Mobile : (574)229-4204

Fax : (574)259-1417

Email : JOE@JOHNBOETTCHER.COMCASTBIZ.NET

Remarks : All tickets are taken and processed on Eastern Daylight Time  
A NIPSCO GAS LINE WAS HIT IN FRONT OF 204 MAIN STREET ON THE EAST SIDE OF MAIN  
STREET - GAS IS NOT BLOWING - CREW IS ON SITE - THIS IS A YELLOW PLASTIC SERVICE  
LINE APPROX 1 TO 2 INCHES - THE LINE IS TAPED OFF - CALLER HAS CALLED NIPSCO TO  
REPORT THE DAMAGED LINE AND HAS BEEN ADVISED TO CALL 911 - PREVIOUS TICKET  
NUMBER 1207300394 - THANKS!

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

:

Submitted date: 08/09/2012 Time: 16:15

Members: AEPIN ID2034 ID5344 ID7634 ID8738 NIPSCO SBCIN ID5857 SM

NIPSCO 00138 IUPPSa 07/30/2012 08:20:49 1207300394-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1207300394 Date: 07/30/2012 Time: 08:20 Oper: CJODOM Chan:056

State: IN Cnty: MARSHALL Twp: NORTH  
Cityname: LA PAZ Inside: Y Near: N  
Subdivision:

#3557

Address :  
Street : MAIN ST  
Cross 1 : WALNUT ST Within 1/4 mile: Y  
Location: FROM THE INTERSECTION---LOCATE HEADING SOUTH ON BOTH SIDES OF MAIN ST  
FOR APPROX 330 FEET

Grids : 4127C8618B 4127B8618B  
Boundary: n 41.459671 s 41.457741 w -86.310234 e -86.308731

Work type : INSTALL STORM SEWER  
Done for : TOWN OF LAPAZ  
Start date: 08/01/2012 Time: 08:30 Hours notice: 48/48 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 20 DAYS Depth: 12 FEET

Company : JOHN BOETTCHER SEWER AND EXCAVATING Type: CONT  
Co addr : 3305 NORTH HOME STREET  
City : MISHAWAKA State: IN Zip: 46545  
Caller : JOE FUKSA Phone: (574)259-1418  
Contact : DAVE FELL--CELL Phone:  
BestTime:  
Mobile : (574)229-4204  
Fax : (574)259-1417  
Email : JOE@JOHNBOETTCHER.COMCASTBIZ.NET

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

Submitted date: 07/30/2012 Time: 08:20  
Members: AEPIN ID2034 ID5344 ID7634 ID8738 NIPSCO SBCIN ID5857 SM

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 B Somers JOB ORDER # 566261

TRACKING NUMBER 01820120809007 LOCATE REF #

Locate Performed By:

DATE AND TIME OF ACCIDENT 8-9-12 20, 515PM DATE OF REPORT 8-9-12

PLACE OF DAMAGE (INCLUDE CITY) 201 Main ST - LMPARZ

DAMAGE WAS TO:

ELECTRIC - POLE / TRANSFORMER: # SIZE YEAR INSTALLED BROKEN YES ( ) NO ( )

OTHER (DESCRIBE)

GAS: SERVICE MAIN ( ) SIZE 3/8 MATERIAL: PLASTIC STEEL ( ) METER ( ) REG STATION ( ) STUB ( )

DEPTH OF FACILITY (inches) 24 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: 1

DURATION OF INTERRUPTION: TIME REPORTED 1715 TIME SHUT OFF 1800 TIME RESTORED 1930

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 5/8" CUT THRU

LOCATE MARKS ON SITE: YES ( ) DISTANCE BETWEEN FACILITY AND LOCATE MARKS 3-4 IN NO ( )

HOW LOCATED: PAINT ( ) FLAGS ( ) BOTH ( ) WHITE LINED ( )

PARTY THAT CAUSED DAMAGES (NAME) John Boettcher Sewer & Excavating

ADDRESS OF PARTY (INCLUDE CITY) Mishawaka

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE Dave Cell 574-229-4204

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 ( ) DRAINS/CULVERTS
( ) FENCING ( ) GRADING ( ) IRRIGATION ( ) MOWING
( ) LANDSCAPING ( ) PIPELINE ( ) MILLING ( ) OTHER
( ) POLE/SIGN POST ( ) ROAD WORK (X) SEWER

TYPE OF EQUIPMENT USED - CHECK APPROPRIATE CHOICE BELOW

- ( ) AUGER ( ) HAND TOOLS (X) 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 (X) CARELESS MACHINE OPERATOR
( ) NO NOTIFICATION ( ) MARKS DISTURBED ( ) STUB ( ) OTHER

SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

COMMENTS :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PERSON PREPARING REPORT

*Morrzale*

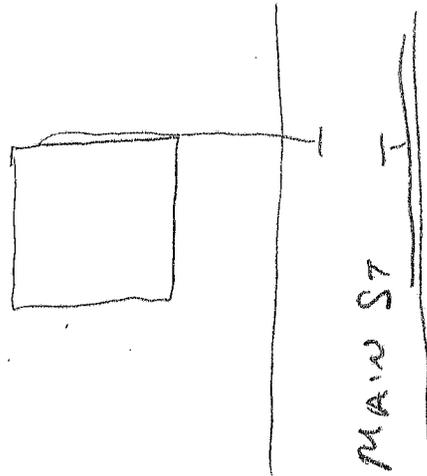
FIELD SUPERVISOR

*LOPEZ*

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 | <input checked="" type="checkbox"/> NO |
| • NO IN 811 LOCATE CALLED IN                    | YES | <input type="checkbox"/> NO            |
| • DAMAGE CAUSED FROM EXCAVATION WITHIN 24" ZONE | YES | <input type="checkbox"/> NO            |
| • EXPIRED LOCATE                                | YES | <input type="checkbox"/> NO            |
| • WAS WHITE LINING INDICATED ON LOCATE REQUEST  | YES | <input type="checkbox"/> 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 28, 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: John Boettcher Sewer and Excavating

Business address (*number and street*): 3305 North Home St

City, State, and ZIP code: Mishawaka, IN 46545

Telephone number (*area code*): (574)259-1418

Fax number (*area code*): (574)259-1417

E-mail address: JOE@JOHNBOETTCHER.COMCASTBIZ.NET

### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Sewer (Sanitary/Storm)

**Date and Location of Damage**

Date of damage (month, day, year): Aug 9, 2012

County: Marshall

City: Lapaz

Street address (number and street, city, state, and ZIP code):  
204 Main St, Lapaz, IN, 46537

Nearest intersection: Walnut St

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): 1.5

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? 24

**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1207300394

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"? No

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? Unknown/Other

---

**Description of Cause**

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

---

**Additional Comments**

Nipsco emergency repair ticket 1208092635

Damage ticket 1208092459