



Pipeline Safety Division Investigation Report

Investigation regarding: **S And L Builders**

UPPAC Database Record ID: 3575

Investigator: Howard Friend

Report Date: 12/31/2012

Damage Date: 8/16/2012 7:07:47 AM

Damage Address: N 1st St

City: Goshen

County: Elkhart

The Parties

Excavator: **S And L Builders**

Contact: Steve Kuhns

Address: 6537 East County Line Road, Millersburg, In 46543

Telephone:

Facility Owner: NIPSCO

Contact: Kit Earle

Address: 101 West Ohio Street, Indianapolis, IN 46204

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Investigation regarding: S And L Builders

UPPAC Database Record ID: 3575

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 53

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$2807

Excavator Activities/Cause of damage information:

Excavator request locates: Yes Indiana 811 ticket Number: 1207250066, EXPIRED

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Road Work

Synopsis: A two (2) inch plastic natural gas service was damaged during excavation for road work.

Findings: Reported by Indiana 811; excavator did not respond to initial notice mailed 9/14/2012. The excavator provided notice of excavation on 7/25/12 and damaged the natural gas line 22 days later.

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

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



101 West Ohio Street, Suite 1707
Indianapolis, IN 46204

October 17, 2012

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 3575
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3575

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: 8/16/2012

Event Location: N 1st St, Goshen

Facility Owner: Northern Indiana Public Service Company

Excavator: S and L Builders

Other Party: N/A

Pipeline Division Case No. 3575

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. 3575	
Date of Event	8/16/2012
Event Location	N 1st St, Goshen
Facility Owner	Northern Indiana Public Service Company
Excavator	S and L Builders
Date of IURC Information Request	9/18/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	S&L Concrete
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	6537 E. County Line Road
CITY/ STATE/ZIP	Millersburg, IN 46543
PREFERRED TELEPHONE	574-536-8569
CELL PHONE TELEPHONE	574-536-1178
EMAIL ADDRESS	CHUPP1982@YAHOO.COM
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	323 N. 1 st Street
CITY/STATE/ZIP	Goshen, IN
NEAREST INTERSECTION	W. Wilkinson
PRODUCT TYPE (Select One)	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
FACILITY TYPE (Select One)	
DISTRIBUTION	X
GATHERING	
SERVICE/DROP	
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	2 plastic
PRESSURE (PSIG/INCHES)	45
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	53
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	2,807.30
CAUSE OF DAMAGE INFORMATION:	
TYPE OF EQUIPMENT (Select One)	
Auger	
Backhoe/Trackhoe	X
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trancher	
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	X
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)	Y
IGNITION AND/OR FIRE (YES/NO)	N
EXCAVATOR NOTIFY 811 (YES/NO)	Y - 1208160108
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1207250066
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)	No
INCIDENT IMPACT INFORMATION	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	Y
POLICE DEPARTMENT RESPONSE (YES/NO)	Y
AMBULANCE RESPONSE (YES/NO)	
ADDITIONAL INFORMATION/COMMENTS	
Excavator working with expired locate when damage occurred. Marks from previous locate were obscured.	

Fact Based Investigation Report

NOTIFICATION ID: 01820120816002 **DISTRICT:** Northern IN
DAMAGE DATE: 8/16/2012 7:50:00 AM **NOTIFICATION DATE:** 8/16/2012 7:50:28 AM
NOTIFIED BY: LAKISHA Facility Owner
DAMAGE ADDRESS: WILKINSON ST X 1ST ST.
CITY: GOSHEN **ST:** IN **ZIP:**

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 08/16/2012
FROM: 07:30:00 **TO:** 09:30:00

EXCAVATOR INVOLVED: S&L BUILDERS
TYPE OF EXCAVATION: water main

ORIG. LOCATE REQ.: 1207250066 **START DATE/TIME:** 7/25/2012 8:00:00 AM
TYPE OF TICKET: Routine **LOCATE REQ. INFO N/A:**

DIG UP/DAMAGE REQ.: 1208160108 **START DATE/TIME:** 8/16/2012 8:40:00 AM

PICTURES TAKEN BY: tom pasko **DATE/TIME:** 8/16/2012 8:30:00 AM
PHOTOGRAPHY TYPE: Digital **FRAME #:**

INVESTIGATOR EMP#: 121650 **INVESTIGATOR NAME:** tom pasko
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01820120816002
SELECT A CUSTOMER: NIPSCO
CUSTOMER #: *(optional)*

FACILITY DESCRIPTION: LOWPROF **FACILITY ID:** Gas Main
LOCATOR NAME & EMP #: Pasko Tom - 121650
LOCATOR NOT KNOWN:

CHECK ALL THAT APPLY TO INVESTIGATION:
Facility Marked Accurately,
Old Request,
Relocate Needed

Other:

CHECK ALL THAT APPLY TO METHOD OF INVESTIGATION (at least one must be checked):

Visual, Facility Exposed At Time Of Investigation,
Investigator Verified Existing Marks By Hooking Up,
Investigation Results Verified By Utility Representative

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

this was mard by scott schooley , no marks left at hit or most of street. photos from locate shows main marked. main was exposed 2 day ago at hit.relocate needed

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

relocate needed

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 2" main pl

REPLACEMENT FOOTAGE ?

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO? No

WHAT CONTRACTOR EQUIPMENT WAS USED?

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? Yes

IF YES, PLEASE LIST RECORD #(S) goshen

NIPSCO 00026 IUPPSa 08/16/2012 07:08:00 1208160108-00A EMER DAMG GRID

DAMAGE DAMAGE

Ticket : 1208160108 Date: 08/16/2012 Time: 07:03 Oper: BTHOMPSON Chan:084

State: IN Cnty: ELKHART Twp: ELKHART
Cityname: GOSHEN Inside: Y Near: N
Subdivision:

3575

Address :

Street : N 1ST ST

Cross 1 : US RT 33 Within 1/4 mile: Y

Location: FROM THE ABOVE INTERSECTION LOCATE GOING NORTH ALONG BOTH SIDES OF
NORTH 1ST STREET FOR APPROX 750 FEET AND ENDING ON THE NORTH SIDE OF WEST
WILKINSON STREET

:

Grids : 4135C8550C

Boundary: n 41.591259 s 41.588558 w -85.840736 e -85.839218

Work type : INSTALL NEW STREET/ REPLACING WATER LINE

Done for : CITY OF GOSHEN

Start date: 08/16/2012 Time: 07:03 Hours notice: 0/0 Priority: EMER

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

Duration : UNKNOWN Depth: UNKNOWN

Company : S AND L BUILDERS Type: CONT

Co addr : 6537 EAST COUNTY LINE ROAD

City : MILLERSBURG State: IN Zip: 46543

Caller : STEVE KUHNS Phone: (574)536-8569

Contact : LARRY---CELL Phone:

BestTime:

Mobile : (574)536-1178

Fax : (574)642-9991

Email : CHUPP1982@YAHOO.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time
PER STEVE CHUPP--HAS HIT A NIPSCO GAS LINE AND IS BLOWING ON THE WEST SIDE OF
THE ROAD APPROX 350 FEET NORTH OF THE INTERSECTION--ORANGE AND 3 INCHES IN
DIAMETER--HAS CALLED 911 AND NIPSCO--CREW IS ONSITE--PREVIOUS TICKET NUMBER
1207250066--THANK YOU

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

:

Submitted date: 08/16/2012 Time: 07:03

Members: COMCN ID2178 ID5306 ID7053 ID8000 NIPSCO SM

NIPSCO 00009 IUPPSa 07/25/2012 07:03:33 1207250066-00A NORM NEW GRID

NORMAL NOTICE REMARK

Ticket : 1207250066 Date: 07/25/2012 Time: 06:51 Oper: DSEGO Chan:087

State: IN Cnty: ELKHART Twp: ELKHART
Cityname: GOSHEN Inside: Y Near: N
Subdivision:

#3575

Address :

Street : N 1ST ST

Cross 1 : US RT 33 Within 1/4 mile: Y

Location: FROM THE ABOVE INTERSECTION LOCATE GOING NORTH ALONG BOTH SIDES OF
NORTH 1ST STREET FOR APPROX 750 FEET AND ENDING ON THE NORTH SIDE OF WEST
WILKINSON STREET

:

Grids : 4135C8550C

Boundary: n 41.591259 s 41.588558 w -85.840736 e -85.839218

Work type : INSTALL NEW STREET/ REPLACING WATER LINE

Done for : CITY OF GOSHEN

Start date: 07/27/2012 Time: 07:00 Hours notice: 48/48 Priority: NORM

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

Duration : UNKNOWN Depth: UNKNOWN

Company : S AND L BUILDERS Type: CONT

Co addr : 6537 EAST COUNTY LINE ROAD

City : MILLERSBURG State: IN Zip: 46543

Caller : STEVE KUHNS Phone: (574)536-8569

Contact : LARRY---CELL Phone:

BestTime:

Mobile : (574)536-1178

Fax : (574)642-9991

Email : CHUPP1982@YAHOO.COM

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

REMARK AS NEEDED DUE TO CONSTRUCTION --- PREVIOUS TICKET NUMBER IS 1207180514

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

:

Submitted date: 07/25/2012 Time: 06:51

Members: COMCN ID2178 ID5306 ID7053 ID8000 NIPSCO SM



DAMAGE INFORMATION REPORT -- PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Sep 20, 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: S & L Builders

Business address (*number and street*): 6537 E County Line Rd

City, State, and ZIP code: Millersburg, IN 46543

Telephone number (*area code*): 574 536 8569

Fax number (*area code*): 574 642 9991

E-mail address: chupp1982@yahoo.com

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Road Work

Date and Location of DamageDate of damage (*month, day, year*): Aug 16, 2012County: ElkhartCity: GoshenStreet address (*number and street, city, state, and ZIP code*):
Wilkinson St & 1st St Goshen INNearest intersection: 1st StRight 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? YesIf yes, how many affected? 53Time to restore service (*in hours*): 7.25Enter number of injuries, if applicable and known: 0Enter number of fatalities, if applicable and known: 0Property damage, Estimate \$

Affected Facility InformationWhat type of pipeline was damaged? Natural GasWhat was the affected facility? DistributionWhat was the depth of the facility, in inches? 24

Notification, Locating, MarkingDid excavator request locates prior to commencing work? YesEnter Indiana 811 ticket number, if known: 1207250066

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:

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? Yes

Description of Cause

Select from the list the most accurate cause for the damage: --Failure to maintain the marks

Additional Comments

Excavator failed to call for remarks

Damage ticket #: 1208160108

Nipsco emergency repair ticket #: 1208160332

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA 110-Goshen MAXIMO WO# M533777 + M533887

OPERATING AREA CONTACT K ADAMS JOB ORDER # 546590

TRACKING NUMBER 018-20120816002 LOCATE REF # 1207250066

DATE AND TIME OF ACCIDENT 08-16-2012 07:09 M DATE OF REPORT 08-16-2012

PLACE OF DAMAGE (INCLUDE CITY) 323 N. 1st St. Apt 3. Goshen

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

OTHER (DESCRIBE)

GAS: SERVICE () MAIN () SIZE 2" MATERIAL: PLASTIC () STEEL () METER () REG STATION () STUB ()

DEPTH OF FACILITY (inches) 2 FT PRESSURE (PSI) 45 Lbs.

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

INTERRUPTION OF SERVICE: YES () NO () NUMBER OF CUSTOMERS LOST: 53

DURATION OF INTERRUPTION: TIME REPORTED 07:09 TIME RESTORED 14:30

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: Slice 1/2 way

LOCATE MARKS ON SITE: YES () DISTANCE BETWEEN FACILITY AND LOCATE MARKS HOW LOCATED: PAINT () FLAGS () BOTH () WHITE LINED ()

PARTY THAT CAUSED DAMAGES (NAME) S&L CONCRETE

ADDRESS OF PARTY (INCLUDE CITY) 6537 East County Line Rd Millersburg IN

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

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

- 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 () 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 Expired Locates

COMMENTS: Contractor Hit 2" Gas Main while Doing Roadwork

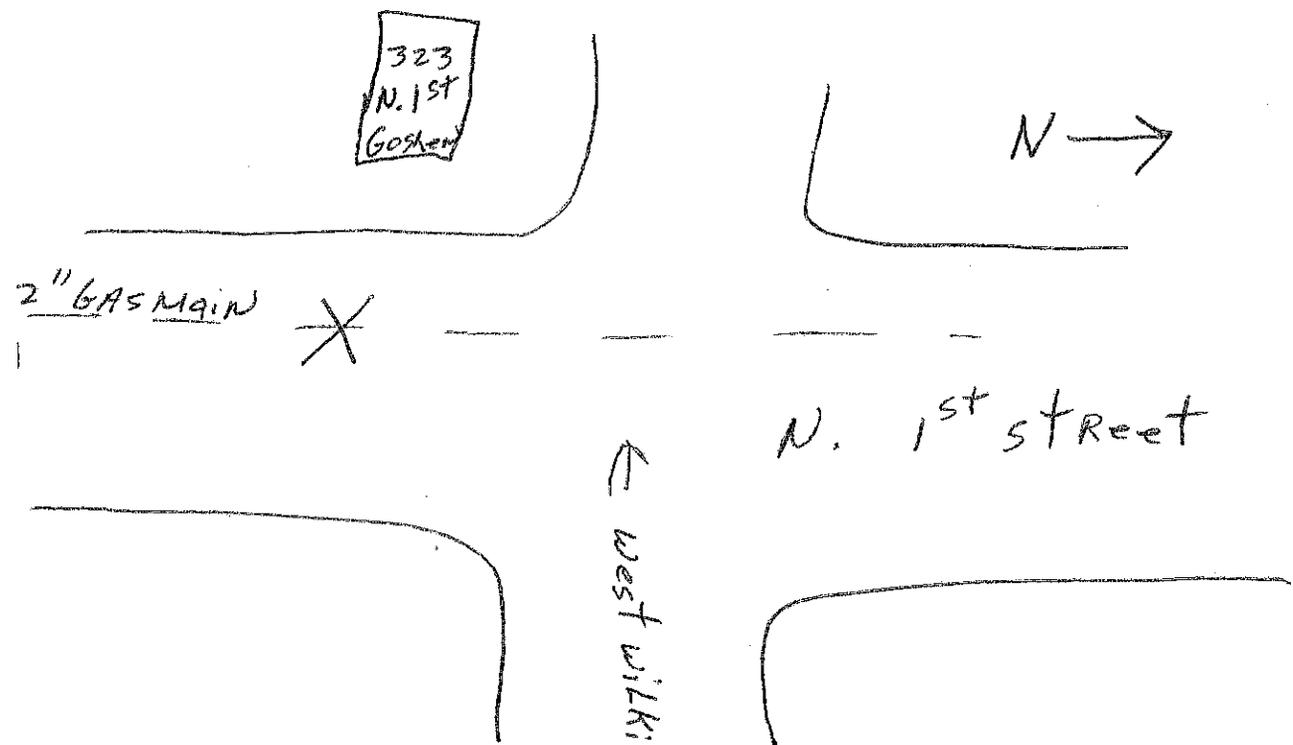
PERSON PREPARING REPORT Keith Adams 117197

FIELD SUPERVISOR Mark Knisley

FIELD MANAGER Rick Gray R. Gray

- 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: _____