



## Pipeline Safety Division Investigation Report

### Investigation regarding: **Nicholas Stevens**

UPPAC Database Record ID: 3636

Investigator: Howard Friend

Report Date: 11/13/2012

Damage Date: 6/30/2012

Damage Address: 523 High St

City: Berne

County: Adams

### The Parties

Excavator: **Nicholas Stevens**

Contact:

Address: 523 High St, Berne, In, 46711

Telephone: 260-525-2110

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: Nicholas Stevens**

UPPAC Database Record ID: 3636

**Damage Impact**

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

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

Excavator request locates: No    Indiana 811 ticket Number: 1205112888 EXPIRED

Type of Equipment: Hand Tools

Type of work performed: Fencing

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

**Findings:** Reported by NIPSCO; excavator's response to initial notice was received on 10/15/2012. The excavator/homeowner reported the damaged line was the gas service to the neighbor's house and had not been located. The operator reported the gas service was accurately located however, only one locate flag remained from the original locate. The excavator provided notice of excavation on 5/11/12 and damaged the natural gas service 51 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.**

**From:** [Dawn Stevens](#)  
**To:** [IURC PipelineDamageCase](#)  
**Subject:** Pipe Line Damage Case  
**Date:** Monday, October 15, 2012 8:00:11 PM

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Page 1 of 5  
INFORMATION REQUEST  
State Form 54909 (2-12)  
INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number:     3636      
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:

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Responsible Party Personal Name:     Nicholas Stevens      
Title (if any):

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Address (number and street):     523 High St    

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City, State and ZIP Code:     Berne, IN 46711    

Preferred Telephone Number (area code):     260-525-2110    

Cellular Telephone Number (area code):     260-525-2110    

Email Address:

    ndckccstevens@gmail.com    

Facility Information:

Business Name:

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Responsible Party Personal Name:

---

Title (if any):

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Address (number and street):

---

Print Form Submit by Email

3636

Nicholas J Stevens

523 High St

Berne, IN 46711

260-525-2110

260-525-2110

[ndckccstevens@gmail.com](mailto:ndckccstevens@gmail.com)

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City, State and ZIP Code:

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Preferred Telephone Number (area code):

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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): Hand tools

Type of Work Performed (select one): Fencing

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

Personal Contact: John

Crider

\_\_\_\_\_  
Business/Organization Name:

\_\_\_\_\_  
Title (if any): Fire

Chief

\_\_\_\_\_  
Address (number and street): 1230

Parkway

\_\_\_\_\_  
City, State and ZIP Code: Berne, IN

46711

\_\_\_\_\_  
Preferred Telephone Number (area code): 260-589-  
8735

Hand Tools

Fencing

John Crider

Fire Department

Fire Chief

1230 Parkway St

Berne, IN 46711

260-589-8735

Page 3 of 5

Cellular Telephone Number (area code):

\_\_\_\_\_  
Email Address:

\_\_\_\_\_  
Utility Line Impact

Location of Damage:

Address (number and street): 523 High

St

\_\_\_\_\_  
City, State and ZIP Code: Berne, IN

46711 \_\_\_\_\_  
Nearest Intersection: \_\_US 27/ High  
St \_\_\_\_\_  
Product Type (select one):natural gas  
Facility Type (select one):  
Size (Diameter/etc.): \_\_2 inch \_\_\_\_\_  
Pressure (PSIG/Inches): \_\_\_\_\_  
Interruption in Service: Yes No Number of Customers Affected: \_no \_\_\_\_\_  
Evacuation: Yes No If yes, How Many Evacuated? \_\_\_\_\_no \_\_\_\_\_  
Repair Cost (if known): \$ \_\_\_\_\_  
Release of Product: Yes  
Ignition and/or Fire: No  
Excavator Notify 811: Yes  
Locate Information  
Excavator Request Locate: Yes  
Indiana 811 Locate Ticket Number: \_\_\_\_\_

523 High St  
Berne, IN 46711  
US 27/ High St  
Natural Gas  
Unknown/Other

2 inch  
8  
8  
8  
8  
8  
8

Page 4 of 5  
Locate Marks Visible: Yes  
Locate Marks Correct: No  
Excavator "White Lined": Yes  
Maps Used to Mark Facilities: Yes No  
Was Locate Provided within Two (2) Working Days: Yes  
Operator Employees On-site during Excavation: No  
Incident Impact Information  
Number of Outpatient Treated: \_0 \_\_\_\_\_  
Number of Inpatient Treated: \_\_\_\_0 \_\_\_\_\_  
Number of Fatalities: \_\_\_\_\_0 \_\_\_\_\_  
Fire Department Response: Yes  
Police Department Response: Yes  
Ambulance Response: No  
Additional Information / Comments

8  
8  
8  
8  
8  
0  
0  
0  
8  
8  
8

We called 811 to locate all utilites that may need attention while we were digging for

our fence posts. We asked for a survey of our whole east side of our house. The Gas company did mark and locate our gas line. The fence post in question is estimated at 4 feet away from our gas line. We went ahead and started digging. We hit something and figured it was a tree root because we were close to a tree. So, we continued to dig causing the rupture of a gas line. The said gas line was not marked because it was not our gas line, however it was our neighbors line that was in our yard and only about a foot and half deep. This line should have been marked by the surveyor even though it was not our line.

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**NARRATIVE STATEMENT**

Your Pipeline Safety Division Case Number:

\_\_\_\_\_  
Your Full Name:

\_\_\_\_\_  
Full Name of Business / Entity (if applicable):

\_\_\_\_\_  
Your Business Title (if applicable):

\_\_\_\_\_  
Address (number and street):

\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code:

\_\_\_\_\_  
Your E-mail Address:

\_\_\_\_\_  
Today's Date (month, day, year): \_\_\_\_\_

\_\_\_\_\_  
Your Signature: \_\_\_\_\_ Title (if any)

\_\_\_\_\_  
Please return your Narrative Statement to:  
Pipeline Safety Division – Case Number \_\_\_\_\_  
Indiana Utility Regulatory Commission  
101 West Washington Street, 1500E  
Indianapolis, IN 46204

Or scan the statement and Email to:

[PipelineDamageCase@urc.in.gov](mailto:PipelineDamageCase@urc.in.gov)  
3686

Nicholas Joe Stevens  
523 High St  
Berne IN 46711  
[ndckccstevens@gmail.com](mailto:ndckccstevens@gmail.com)  
October 15, 2012



101 West Ohio Street, Suite 1707  
Indianapolis, IN 46204

October 18, 2012

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

Pipeline Safety Division – Case No. 3636  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3636

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: 6/30/2012

Event Location: 523 High St, Berne

Facility Owner: Northern Indiana Public Service Company

Excavator: Nicholas Stevens

Other Party: N/A

Pipeline Division Case No. 3636

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](mailto:cearle@nisource.com)

<b>IURC INFORMATION REQUEST</b>	
<b>Pipeline Safety Division Case No. 3636</b>	
Date of Event	6/30/2012
Event Location	523 High St, Berne
Facility Owner	Northern Indiana Public Service Company
Excavator	Nicholas Stevens
Date of IURC Information Request	9/18/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	Nicholas Stevens
RESPONSIBLE PARTY PERSONAL NAME	Nicholas Stevens
TITLE (IF ANY)	
ADDRESS	523 High St
CITY/ STATE/ZIP	Berne, IN 46711
PREFERRED TELEPHONE	260/525-2110
CELL PHONE TELEPHONE	260/525-2110
EMAIL ADDRESS	
<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	
EMAIL ADDRESS	<a href="mailto:morganthompson@usicinc.com">morganthompson@usicinc.com</a>
<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	523 High St
CITY/STATE/ZIP	Berne, IN 46711
NEAREST INTERSECTION	US 27 S.
<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)	50
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) (\$)	176.25
<b>CAUSE OF DAMAGE INFORMATION:</b>	
<b>TYPE OF EQUIPMENT (Select One)</b>	
Auger	
Backhoe/Trackhoe	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	X
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	X
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	
Waterway Improvement	
Unknown/Other	
RELEASE OF PRODUCT (YES/NO)	Yes
IGNITION AND/OR FIRE (YES/NO)	No
EXCAVATOR NOTIFY 811 (YES/NO)	No
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	Yes

INDIANA 811 LOCATE TICKET NUMBER	1205112888
LOCATE MARKS VISIBLE (YES/NO)	Yes
LOCATE MARKS CORRECT (YES/NO)	Yes
EXCAVATOR "WHITE LINED" (YES/NO)	No
MAPS USED TO MARK FACILITIES (YES/NO)	Yes
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	No
<b>INCIDENT IMPACT INFORMATION</b>	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	Yes
POLICE DEPARTMENT RESPONSE (YES/NO)	Yes
AMBULANCE RESPONSE (YES/NO)	N/A
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
<p>Service to 517 High Street was line hit. Service to 517 High Street crossed onto property of 523 High Street.</p> <p>Per USIC, hit accurately marked service line but the marks were almost non-existent and needed to be relocated.</p> <p>No emergency repair ticket or damage ticket.</p>	

# Fact Based Investigation Report

01820120630006  
Northern IN  
6/30/2012 11:30:00 AM  
6/30/2012 3:38:34 PM  
TODD  
523 HIGH ST X US 27  
BERNE  
ST: IN ZIP:

---

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

NIPSCO

---

DAMAGED CUSTOMER:

06/30/2012  
17:20:00  
17:45:00

---

INVESTIGATION DATE:  
FROM:  
TO:

Homeowner  
POST HOLES

---

EXCAVATOR INVOLVED:  
TYPE OF EXCAVATION:

1205112888  
5/15/2012 4:45:00 PM  
Routine

---

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

M55285938  
6/30/2012 12:00:00 AM

---

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

TOM WILL  
6/30/2012 5:30:00 PM  
Digital

---

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

117465  
TOM WILL  
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?

INVESTIGATOR EMP#:  
INVESTIGATOR NAME:

No

## Fact Based Investigation Customer Information

01820120630006

NIPSCO

(optional)

**NOTIFICATION ID:**

**SELECT A CUSTOMER:**

**CUSTOMER #:**

LOWPROF

Gas Service

Will Tom - 117465

**FACILITY DESCRIPTION:**

**FACILITY ID:**

**LOCATOR NAME & EMP #:**

**LOCATOR NOT KNOWN:**

**CHECK ALL THAT APPLY TO INVESTIGATION:**

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

**INVESTIGATOR STATEMENT/CAUSAL FACTORS:**

H/O CUT NEIGHBOR'S SERVICE WHICH RAN ONTO HIS PROPERTY. HE COULD NOT FIND THE ORIGINAL LOCATE REQUEST # BUT STATED IT WAS BEFORE MEMORIAL WEEK END. ONLY A BENT OVER FLAG REMAINED FROM ORIGINAL LOCATE. RE-LOCATE NEEDED.

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

N/A

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

H/O NICK STEVENS. NICK STATED HIS WIFE HAD CALLED FOR LOCATES BEFORE MEMORIAL WEEK END.

**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 5/8 SERVICE

**REPLACEMENT FOOTAGE**

UKN

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

No

**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 00930 IUPPSa 05/11/2012 16:49:36 1205112888-00A NORM NEW STRT

NORMAL NOTICE

Ticket : 1205112888 Date: 05/11/2012 Time: 16:35 Oper: SLUCAS Chan:060

State: IN Cnty: ADAMS Twp: MONROE  
Cityname: BERNE Inside: Y Near: N  
Subdivision:

CASE #  
3636

Address : 523  
Street : HIGH ST  
Cross 1 : US RT 27 Within 1/4 mile: Y  
Location: LOCATE THE ENTIRE PROPERTY OUT FROM THE HOME  
:  
Grids : 4039B8457D 4039B8457C  
Boundary: n 40.661079 s 40.659950 w -84.956360 e -84.954086

Work type : WATERPROOFING BASEMENT  
Done for : STEVENS  
Start date: 05/15/2012 Time: 16:45 Hours notice: 96/48 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 2 DAYS Depth: UNKNOWN

Company : NICHOLAS STEVENS Type: HOME  
Co addr : 523 HIGH ST  
City : BERNE State: IN Zip: 46711  
Caller : DAWN STEVENS Phone: (260)525-2110  
Contact : NICHOLAS - CELL Phone:  
BestTime:  
Mobile : (260)525-2110  
Email : NDCKCCSTEVENS@GMAIL.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
Will you be white-lining the dig site area? YES  
:

Submitted date: 05/11/2012 Time: 16:35  
Members: AEPIN ID2034 ID8526 ID8822 NIPSCO ID5857 SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY  
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA FT WAGNER MAXIMO WO # 1498773  
OPERATING AREA CONTACT JASON HANVER JOB ORDER # 574418-22  
TRACKING NUMBER 018-2012-0630-006 LOCATE REF # N/A  
Locate Performed By: USIC CIS 321064200

DATE AND TIME OF ACCIDENT JUNE 30, 2012 14<sup>31</sup> PM C.S.T. DATE OF REPORT 06/30/12  
PLACE OF DAMAGE (INCLUDE CITY) YARD OF 523 HIGH ST., BERNE, IN.

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) 14" PRESSURE (PSI) 50 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 14<sup>31</sup> PM TIME SHUT OFF 14<sup>50</sup> PM C.S.T. TIME RESTORED 17<sup>30</sup> PM E.S.T.

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

LOCATE MARKS ON SITE: YES  DISTANCE BETWEEN FACILITY AND LOCATE MARKS \_\_\_\_\_ NO   
HOW LOCATED: PAINT ( ) FLAGS ( ) BOTH ( ) WHITE LINED ( ) SERVICE TO 523 HIGH ST 517 HIGH ST.

PARTY THAT CAUSED DAMAGES (NAME) NICHOLAS STEVENS

ADDRESS OF PARTY (INCLUDE CITY) 523 HIGH ST., BERNE, IN. 1-260-525-2110

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

WITNESS NAME AND ADDRESS NICHOLAS STEVENS

WITNESS REMARKS NO MARK WHERE DIGGING

AGENCIES NOTIFIED / ONSITE: POLICE  AGENCY \_\_\_\_\_ REPORT # \_\_\_\_\_

FIRE  AGENCY \_\_\_\_\_ REPORT # \_\_\_\_\_

OTHER  CITY OF BERNE Any Injuries? ( ) YES # \_\_\_\_\_  NO

PHOTOS TAKEN: YES  NO ( ) TAKEN BY: LOCATING SERVICE - USIC (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 type="checkbox"/> WATER              |
| <input type="checkbox"/> DRIVEWAY            | <input type="checkbox"/> ELECTRIC   | <input type="checkbox"/> SURVEYING     | <input type="checkbox"/> DRAINS/CULVERTS    |
| <input checked="" 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 checked="" 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 type="checkbox"/> OTHER _____       |

- 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                                     |
|  |  | <input checked="" type="checkbox"/> OTHER <u>Home owner claim</u> |

• SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM SERVICE TO 517 HIGH ST NOT MARKED SIN #110601 Rev. 6-12

COMMENTS: Home owner @ 523 High St. Called for locates approx. For 5/20/12  
 He could not produce locate #. His service (no meter) was located but  
 not service to 517 High St. (He claims). Service to 517 High St.  
 is on property of 523 High St. - Cut service was to 517 High St.  
 service was squeezed off by city of Berne employee

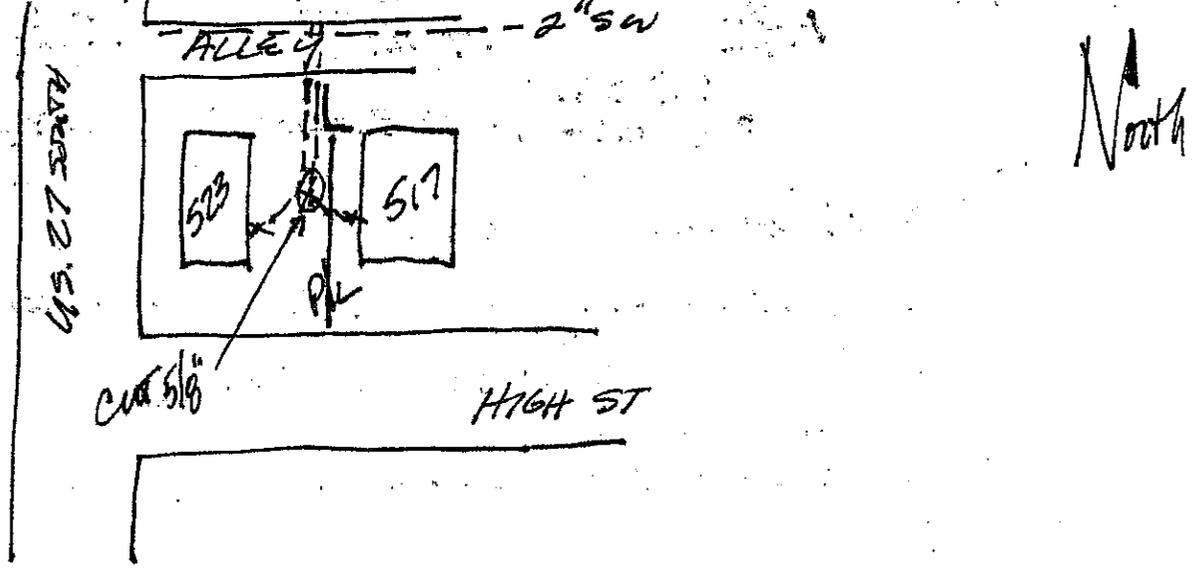
PERSON PREPARING REPORT CHARLES R. WALZMART

FIELD SUPERVISOR V. J. ...

FIELD MANAGER Railin D. ...

- 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: Charles R. Walz Mart DATE: 06/30/12



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Aug 22, 2012

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### Who is submitting this information?

Name of person providing this information: Tommy Buher

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

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### Excavator Information, if known

Full name: Nicholas Stevens

Business address (*number and street*): 523 High St

City, State, and ZIP code: Berne, IN, 46711

Telephone number (*area code*): 260-525-2110

Fax number (*area code*): \_\_\_\_\_

E-mail address: ndckccstevens@gmail.com

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### Excavation or Demolition Information

Excavator type: Occupant

Excavation or demolition equipment: Hand Tools

Type of work performed: Fencing

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**Date and Location of Damage**Date of damage (*month, day, year*): Jun 30, 2012

County: Adams

City: Berne

Street address (*number and street, city, state, and ZIP code*):  
523 High St, Berne, IN 46711

Nearest intersection: US Rt 27

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? \_\_\_\_\_

Was there a customer service interruption? Yes

If yes, how many affected? 1

Time to restore service (*in hours*): 3

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ \_\_\_\_\_

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**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? 14

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**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1205112888

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: Flags

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? No

Did the excavator notify 911 in the event of a release of product? Yes

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### Description of Cause

Select from the list the most accurate cause for the damage: Other

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### Additional Comments

Excavator hit accurately marked facility with hand tool  
Only one flag remained from original locate request  
Needed to be relocated