



## Pipeline Safety Division Investigation Report

### Investigation regarding: Hipskind Concrete

UPPAC Database Record ID: 3710

Report Date: 5/27/2013

Investigator: Mike Orr

Damage Date: 9/5/2012 2:49:07 PM

Damage Address: Central Dr, Fort Wayne, Allen

### The Parties

Excavator: **Hipskind Concrete**

Address: 5502 Mason Drive, Fort Wayne, In 46809

Facility Owner: **NIPSCO**

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Curb / Sidewalk

### Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 2

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

### Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes

Indiana 811 Ticket Number: 1208132491

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

**Synopsis:** A distribution main was damaged by a backhoe while performing work for curb/sidewalk.

**Findings:** Reported by Indiana 811; excavator did not respond to initial notice mailed 9/14/2012. The excavator had allowed the locate ticket expire creating the condition of never having had a locate when the main was compromised.

**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 24, 2012

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

Pipeline Safety Division – Case No. 3710  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3710

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: 9/5/2012

Event Location: Central Dr, Fort Wayne

Facility Owner: Northern Indiana Public Service Company

Excavator: Hipskind Concrete

Other Party: N/A

Pipeline Division Case No. 3710

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. 3710</b>	
Date of Event	9/5/2012
Event Location	Central Dr, Fort Wayne
Facility Owner	Northern Indiana Public Service Company
Excavator	Hipskind Concrete
Date of IURC Information Request	9/18/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	Hipskind Concrete
RESPONSIBLE PARTY PERSONAL NAME	Joe Hipskind
TITLE (IF ANY)	
ADDRESS	5502 Mason Drive
CITY/ STATE/ZIP	Fort Wayne, IN 46809
PREFERRED TELEPHONE	260-747-1340
CELL PHONE TELEPHONE	760-6161
EMAIL ADDRESS	JHIPSKIND@COMCAST.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	3525 Central Drive
CITY/STATE/ZIP	Fort Wayne, IN 46806
NEAREST INTERSECTION	E Rudisill Blvd
<b>PRODUCT TYPE (Select One)</b>	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
<b>FACILITY TYPE (Select One)</b>	
DISTRIBUTION	X
GATHERING	
SERVICE/DROP	
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	2" plastic
PRESSURE (PSIG/INCHES)	40
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	2
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	2,277.79
<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	X
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	
Waterway Improvement	
Unknown/Other	
RELEASE OF PRODUCT (YES/NO)	Y
IGNITION AND/OR FIRE (YES/NO)	No
EXCAVATOR NOTIFY 811 (YES/NO)	Y- 1209053084
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1208132491 1209041083
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)	Y
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)	Y
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**

**NOTIFICATION ID:** 01820120905013                      **DISTRICT:** Northern IN  
**DAMAGE DATE:** 9/5/2012 2:49:22 PM      **NOTIFICATION DATE:** 9/5/2012 2:55:16 PM  
**NOTIFIED BY:** JOE HIPSKIND  
**DAMAGE ADDRESS:** CENTRAL DR  
**CITY:** FORT WAYNE      **ST:** IN      **ZIP:**

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**DAMAGED CUSTOMER:** NIPSCO

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**INVESTIGATION DATE:** 09/05/2012  
**FROM:** 15:00:00                                      **TO:** 15:15:00

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**EXCAVATOR INVOLVED:** HIPSKIND CONCRETE  
**TYPE OF EXCAVATION:** STREET REPAIR

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**ORIG. LOCATE REQ.:** 1208132491                      **START DATE/TIME:**  
**TYPE OF TICKET:** Ongoing Project      **LOCATE REQ. INFO N/A:**

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**DIG UP/DAMAGE REQ.:** 1209053084                      **START DATE/TIME:**

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**PICTURES TAKEN BY:** GREG HADDEN      **DATE/TIME:** 9/5/2012 12:00:00 AM  
**PHOTOGRAPHY TYPE:** Digital                      **FRAME #:**

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**INVESTIGATOR EMP#:** 113185                      **INVESTIGATOR NAME:** ROSS GILLESPIE  
**BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?** No

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**Fact Based Investigation Customer Information**

**NOTIFICATION ID:** 01820120905013  
**SELECT A CUSTOMER:** NIPSCO  
**CUSTOMER #:** *(optional)*

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**FACILITY DESCRIPTION:** LOWPROF                      **FACILITY ID:** Gas Main  
**LOCATOR NAME & EMP #:** Sedik Stephen - 125397  
**LOCATOR NOT KNOWN:**

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**CHECK ALL THAT APPLY TO INVESTIGATION:**  
Facility Marked Accurately

**Other:**

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**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

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**INVESTIGATOR STATEMENT/CAUSAL FACTORS:**  
PAINT AND FLAGS LINE 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

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**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** 3IN PL

**REPLACEMENT FOOTAGE** 1

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

**WHAT CONTRACTOR EQUIPMENT WAS USED?** UKN

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

**IF YES, PLEASE LIST RECORD #(S)** 1

NIPSCO 00994 IUPPSa 09/05/2012 14:49:22 1209053084-00A EMER DAMG STRT

DAMAGE DAMAGE -SEE REMARKS

Ticket : 1209053084 Date: 09/05/2012 Time: 14:43 Oper: CALEVI Chan:031

State: IN Cnty: ALLEN Twp: WAYNE  
Cityname: FORT WAYNE Inside: Y Near: N  
Subdivision:

#3710

Address :

Street : CENTRAL DR  
Cross 1 : E RUDISILL BLVD Within 1/4 mile: Y  
Location: ON THE EAST SIDE OF CENTRAL DRIVE FROM RUDISILL BLVD TO OXFORD STREET  
LOCATE FROM CENTERLINE TO SIDEWALK

Grids : 4103A8506B 4102A8506B 4103D8506B 4103C8506B 4103B8506B  
Boundary: n 41.065704 s 41.045990 w -85.112389 e -85.109695

Work type : REMOVE AND REPLACE CONCRETE STREET  
Done for : CITY OF FT. WAYNE  
Start date: 09/05/2012 Time: 14:44 Hours notice: 0/0 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 4 WEEKS Depth: 2 FEET

Company : HIPSKIND CONCRETE Type: CONT  
Co addr : 5502 MASON DRIVE  
City : FORT WAYNE State: IN Zip: 46809  
Caller : JOE HIPSKIND Phone: (260)747-1340  
Contact : PAT HIPSKIND Phone:  
BestTime:  
Mobile : (260)410-4710  
Fax : (260)747-7227  
Email : JHIPSKIND@COMCAST.NET

Remarks : All tickets are taken and processed on Eastern Daylight Time  
PER JOE -HAVE CUT A GAS MAIN-IT IS A 2 INCH YELLOW PLASTIC PIPE---IN THE STREET  
BETWEEN RUDISILL AND OXFORD ON CENTRAL--IT IS SPEWING-CREW IS ON SITE-HAVE CALL  
911 AND NIPSCO-PREVIOUS TICKET NUMBER-1208132491-SITE CONTACT IS RICK GARLAND  
-260-410-4706

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

Submitted date: 09/05/2012 Time: 14:43  
Members: AEPIN CC FW ID8000 NIPSCO SM

NIPSCO 00745 IUPPSa 08/13/2012 13:54:45 1208132491-00A NORM NEW STRT

NORMAL NOTICE JOB EXTENSION

Ticket : 1208132491 Date: 08/13/2012 Time: 13:53 Oper: JOE.HIPSKIND Chan:000  
Old Tkt: 1208012548 Date: 08/01/2012 Time: 14:54 Oper: JOE.HIPSKIND Rev: 00A

# 3710

State: IN Cnty: ALLEN Twp: WAYNE  
Cityname: FORT WAYNE Inside: Y Near: N  
Subdivision:

Address :  
Street : CENTRAL DR  
Cross 1 : E RUDISILL BLVD Within 1/4 mile: Y  
Location: ON THE EAST SIDE OF CENTRAL DRIVE FROM RUDISILL BLVD TO OXFORD STREET  
LOCATE FROM CENTERLINE TO SIDEWALK

:  
Grids : 4103A8506B 4102A8506B 4103D8506B 4103C8506B 4103B8506B  
Boundary: n 41.065704 s 41.045990 w -85.112389 e -85.109695

Work type : REMOVE AND REPLACE CONCRETE STREET  
Done for : CITY OF FT. WAYNE  
Start date: 08/15/2012 Time: 14:15 Hours notice: 48/48 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 4 WEEKS Depth: 2 FEET

Company : HIPSKIND CONCRETE Type: CONT  
Co addr : 5502 MASON DRIVE  
City : FORT WAYNE State: IN Zip: 46809  
Caller : JOE HIPSKIND Phone: (260)747-1340  
Contact : PAT HIPSKIND Phone:  
BestTime:  
Mobile : (260)410-4710  
Fax : (260)747-7227  
Email : JHIPSKIND@COMCAST.NET

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

Submitted date: 08/13/2012 Time: 13:53  
Members: AEPIN CC FW ID8000 NIPSCO SM

COMMENTS: LOCATES ACCURATE

PERSON PREPARING REPORT L Hunter

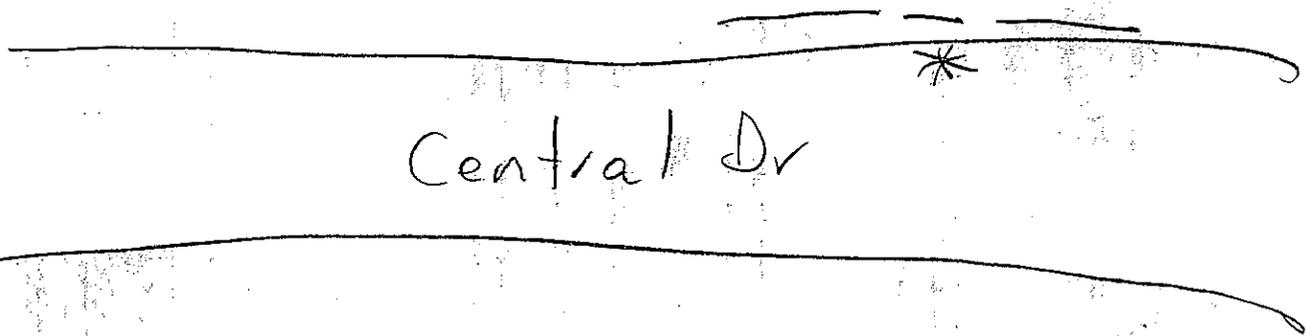
FIELD SUPERVISOR Dwight Wagner

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

3525 Central Dr



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: \_\_\_\_\_

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA FTW 220 MAXIMO WO #
OPERATING AREA CONTACT J Haner JOB ORDER # 564431
TRACKING NUMBER 018 2012-0905 OB LOCATE REF # 1209-04-1083
Locate Performed By: 1208-13-2491

DATE AND TIME OF ACCIDENT 9-5-12 14:45 M DATE OF REPORT 9-5-12
PLACE OF DAMAGE (INCLUDE CITY) 3525 Central

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 ( )
OTHER (DESCRIBE)

DEPTH OF FACILITY (inches) 17" 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: 2

DURATION OF INTERRUPTION: TIME REPORTED 13:41 TIME SHUT OFF 17:55 TIME RESTORED 18:40

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 2" Gash

LOCATE MARKS ON SITE: YES ( ) DISTANCE BETWEEN FACILITY AND LOCATE MARKS 12" NO ( )
HOW LOCATED: PAINT ( ) FLAGS ( ) BOTH ( ) WHITE LINED ( )

PARTY THAT CAUSED DAMAGES (NAME) Hipkind Concrete

ADDRESS OF PARTY (INCLUDE CITY) 747-1340 office 760-6161

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

WITNESS NAME AND ADDRESS Casey Hipkind

WITNESS REMARKS ACCURATE LOCATES -

AGENCIES NOTIFIED / ONSITE: POLICE ( ) AGENCY REPORT #

FIRE ( ) AGENCY REPORT #

OTHER ( ) Any Injuries? ( ) YES # ( ) NO

PHOTOS TAKEN: YES ( ) NO ( ) TAKEN BY: D Wagner (Sup) (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



# DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Sep 7, 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: Hipskind Concrete

Business address (*number and street*): 5502 Mason Dr

City, State, and ZIP code: Fort Wayne, IN 46809

Telephone number (*area code*): 260 747 1340

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

E-mail address: \_\_\_\_\_

## Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Curb/Sidewalk

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**Date and Location of Damage**Date of damage (*month, day, year*): Sep 5, 2012County: AllenCity: Fort WayneStreet address (*number and street, city, state, and ZIP code*):  
3525 Central Dr Fort Wayne INNearest intersection: E Rudisill BlvdRight 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? 2Time to restore service (*in hours*): 5Enter number of injuries, if applicable and known: 0Enter number of fatalities, if applicable and known: 0Property damage, Estimate \$ 

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**Affected Facility Information**What type of pipeline was damaged? Natural GasWhat was the affected facility? DistributionWhat was the depth of the facility, in inches? 17

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**Notification, Locating, Marking**Did excavator request locates prior to commencing work? YesEnter Indiana 811 ticket number, if known: 1208132491

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? Yes

### Description of Cause

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

### Additional Comments

Damage ticket #: 1209053084

Nipsco emergency repair ticket #: 1209053206



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Sep 7, 2012

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### Who is submitting this information?

Name of person providing this information: Carrie Ludwig (NIPSCO)

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

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### Excavator Information, if known

Full name: Hipskind Concrete

Business address (*number and street*): 5502 Mason Dr

City, State, and ZIP code: Fort Wayne, IN 46809

Telephone number (*area code*): 260 747 1340

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

E-mail address: \_\_\_\_\_

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### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Curb/Sidewalk

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**Date and Location of Damage**

Date of damage (*month, day, year*): Sep 5, 2012

County: Allen

City: Fort Wayne

Street address (*number and street, city, state, and ZIP code*):  
3525 Central Dr Fort Wayne IN

Nearest intersection: E Rudisill Blvd

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? 2

Time to restore service (*in hours*): 5

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? Distribution

What was the depth of the facility, in inches? 17

---

**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1208132491

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? Yes

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### **Description of Cause**

Select from the list the most accurate cause for the damage: --No notification made to the one-call center

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### **Additional Comments**

Damage ticket #: 1209053084

Nipsco emergency repair ticket #: 1209053206

This is Case 3710.

Excavator did report damage to IN811; however, the locate had expired creating a resulting determination of VIOLATION.