



Pipeline Safety Division Investigation Report

Investigation regarding: H And G Plumbing And Heating Underground Utilities

UPPAC Database Record ID: 3823

Report Date: 9/11/2013

Investigator: Mike Orr

Damage Date: 9/17/2012 10:29:04 AM

Damage Address: Old Us Rt 31, Rochester, Fulton

The Parties

Excavator: H And G Plumbing And Heating Underground Utilities

Address: 1355 East In Rt 2, Laporte, In 46350

Facility Owner: NIPSCO

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Water

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: False

Number of Customers Affected: 0

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes

Indiana 811 Ticket Number: 1209130023

Original Start Date:

Locate Instructions: FROM THE ABOVE INTERSECTION LOCATE NORTH ON THE WEST SIDE OF OLD US RT 31 FOR 2500 FEET

Follow-Up Locate Instructions (if applicable):

Synopsis: Excavator struck and damaged an underground natural gas service while performing water work.

Findings: Reported by Indiana 811; excavator did not respond to initial notice mailed 11/30/2012. Excavator had a valid locate ticket; however, the gas operator self reported a failure to provide facility locate markings for a live gas stub.

Conclusion: There was a failure to provide facility locate markings.

Violation: IC 8-1-26-18(f) Operator failed to locate or provided incorrect locate markings.



150 West Market Street, Suite 600
Indianapolis, IN 46204

January 28, 2012

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 3823
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3823

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: 9/17/2012

Event Location: Old Us Rt 31

Facility Owner: Northern Indiana Public Service Company

Excavator: H & G Plumbing And Heating Underground Utilities

Other Party: N/A

Pipeline Division Case No. 3823

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. 3823	
Date of Event	9/17/2012
Event Location	Old Us Rt 31
Event City	Rochester
Facility Owner	Northern Indiana Public Service Company
Excavator	H And G Plumbing And Heating Underground Utilities
Date of IURC Information Request	12/5/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	H and G Plumbing and Heating and Underground
RESPONSIBLE PARTY PERSONAL NAME	Shawn Schwark
TITLE (IF ANY)	
ADDRESS	1355 East In RT 2
CITY/ STATE/ZIP	Laporte, IN 46350
PREFERRED TELEPHONE	219-362-1632
CELL PHONE TELEPHONE	574-876-3729
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
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	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	4377 Old US Hwy 31
CITY/STATE/ZIP	Rochester, IN 46975
NEAREST INTERSECTION	E 375 N
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.)	3/4"
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	N
NUMBER OF CUSTOMERS AFFECTED	0
EVACUATION (YES/NO)	N
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	
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	
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)	Y
IGNITION AND/OR FIRE (YES/NO)	N
EXCAVATOR NOTIFY 811 (YES/NO)	Y 1209171549
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1209130023
LOCATE MARKS VISIBLE (YES/NO)	N
LOCATE MARKS CORRECT (YES/NO)	N
EXCAVATOR "WHITE LINED" (YES/NO)	N
MAPS USED TO MARK FACILITIES (YES/NO)	Y
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	N
INCIDENT IMPACT INFORMATION	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	N
POLICE DEPARTMENT RESPONSE (YES/NO)	N
AMBULANCE RESPONSE (YES/NO)	N
ADDITIONAL INFORMATION/COMMENTS	
Facility could not be found/located In-service gas stub	

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

Visual, Facility Exposed At Time Of Investigation,
Investigation Results Verified By Utility Representative

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

CONTRACTOR DAMAGED A 3/4 INCH ST DRIP LINE THAT WAS STUBBED APPROX 10 FT EAST OF MAIN. TOOK THEM APPROX 2 HOURS TO DIG UP AND FIND SHUT OFF. CAPPED OFF AT DAMAGE SPOT

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

JIM PANTHER DIDNT HAVE ANY RECORD OF LINE.

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? No

EXTENT OF FACILITY DAMAGE CUT ST. DRIP LINE

REPLACEMENT FOOTAGE CAPPED

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO? No

WHAT CONTRACTOR EQUIPMENT WAS USED? NA

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? No

IF YES, PLEASE LIST RECORD #(S)

NIPSCO 00007 IUPPSa 09/13/2012 05:00:52 1209130023-00A NORM NEW GRID

NORMAL NOTICE REMARK

Ticket : 1209130023 Date: 09/13/2012 Time: 04:49 Oper: NPICKEREL Chan:022

State: IN Cnty: FULTON Twp: ROCHESTER
Cityname: ROCHESTER Inside: N Near: Y
Subdivision:

CASE: 3823

Address :

Street : OLD US RT 31

Cross 1 : E 375 N Within 1/4 mile: Y

Location: FROM THE ABOVE INTERSECTION LOCATE NORTH ON THE WEST SIDE OF OLD US RT
31 FOR 2500 FEET

***Boring Where = CO RT 375 425 N

:

Grids : 4106B8613C 4106A8613C 4106A8613B 4107D8613B

Boundary: n 41.118938 s 41.109612 w -86.227066 e -86.221947

Work type : INSTALLING WATER MAIN

Done for : TOWN OF ROCHESTER

Start date: 09/17/2012 Time: 07:00 Hours notice: 98/48 Priority: NORM

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

Duration : 2 WEEKS Depth: 5 FEET

Company : H AND G PLUMBING AND HEATING UNDERGROUND Type: CONT

Co addr : 1355 EAST IN RT 2

City : LAPORTE State: IN Zip: 46350

Caller : SHAWN SCHWARK Phone: (219)362-1632

Contact : SHAWN SCHWARK CELL Phone:

BestTime:

Mobile : (574)876-3729

Fax : (219)325-9136

Email : MATT@HNGUU.COM

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

REMARK DUE TO WEATHER - PREVIOUS TICKET 1209041913

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

:

Submitted date: 09/13/2012 Time: 04:49

Members: COMCN ID0002 ID4396 NIPSCO SBCIN SM

NIPSCO 00530 IUPPSa 09/17/2012 11:10:46 1209171549-00A EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1209171549 Date: 09/17/2012 Time: 10:26 Oper: AGRIGGS Chan:074

State: IN Cnty: FULTON Twp: ROCHESTER
Cityname: ROCHESTER Inside: N Near: Y
Subdivision:

CASE:3823

Address :

Street : OLD US RT 31

Cross 1 : E 375 N Within 1/4 mile: Y

Location: FROM THE ABOVE INTERSECTION LOCATE NORTH ON THE WEST SIDE OF OLD US RT
31 FOR 2500 FEET

***Boring Where = CO RT 375 425 N

:

Grids : 4106B8613C 4106A8613C 4106A8613B 4107D8613B

Boundary: n 41.118938 s 41.109612 w -86.227066 e -86.221947

Work type : INSTALLING WATER MAIN

Done for : TOWN OF ROCHESTER

Start date: 09/17/2012 Time: 10:26 Hours notice: 0/0 Priority: EMER

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

Duration : 2 WEEKS Depth: 5 FEET

Company : H AND G PLUMBING AND HEATING UNDERGROUND Type: CONT

Co addr : 1355 EAST IN RT 2

City : LAPORTE State: IN Zip: 46350

Caller : SHAWN SCHWARK Phone: (219)362-1632

Contact : SHAWN SCHWARK CELL Phone:

BestTime:

Mobile : (574)876-3729

Fax : (219)325-9136

Email : MATT@HNGUU.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time
A NIPSCO GAS LINE HAS BEEN HIT AND IS BLOWING 2500 FEET NORTH OF THE
INTERSECTION ON THE WEST SIDE OF THE ROAD - STEEL LINE - APPROX 1/2 INCH
DIAMETER - ADVISED TO CALL 911 - ADVISED TO CALL NIPSCO TO REPORT DAMAGE - CREW
ON SITE - PREVIOUS TICKET NUMBER 1209130023
Will you be white-lining the dig site area? NO

:

Submitted date: 09/17/2012 Time: 10:26

Members: COMCN ID0002 ID4396 NIPSCO SBCIN SM

**NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT**

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

REPORTING OPERATING AREA FEW-180 MAXIMO WO # M558379, M558402
 OPERATING AREA CONTACT Diana Palmer JOB ORDER # 579946-18
 TRACKING NUMBER 018 2012 0917 002 LOCATE REF # 1209130023
 Locate Performed By: _____

DATE AND TIME OF ACCIDENT 09-17-12 10:30 AM , _____ M DATE OF REPORT 09-17-12
 PLACE OF DAMAGE (INCLUDE CITY) 4377 OLD US HWY 31

DAMAGE WAS TO:

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

OTHER (DESCRIBE) _____

GAS: SERVICE () MAIN () SIZE 3/4" MATERIAL: PLASTIC () STEEL () METER () REG STATION () STUB ()
 OTHER (DESCRIBE) old drip that was not located

DEPTH OF FACILITY (inches) 60 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: 0

DURATION OF INTERRUPTION: TIME REPORTED 10:30 AM TIME SHUT OFF 12:35 P.M. TIME RESTORED _____

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 3/4"

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

PARTY THAT CAUSED DAMAGES (NAME) H & G UNDERGROUND UTILITIES

ADDRESS OF PARTY (INCLUDE CITY) 7 BERKEL DR CAPRISTE ILL.

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

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: 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 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 checked="" 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>not located</u> |

• SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

219 326 0000

60

12:35

COMMENTS :

PERSON PREPARING REPORT Gellinger

FIELD SUPERVISOR D. Palmer

FIELD MANAGER [Signature] D. Selmon

- 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: [Signature] DATE: 09-17-12