



## Pipeline Safety Division Investigation Report

### Investigation regarding: **Mark Milo Enterprises Inc**

UPPAC Database Record ID: 3837

Investigator: Howard Friend

Report Date: 3/7/13

Damage Date: 9/18/2012 4:02:00 PM

Damage Address: 7677 N In Rt 23

City: Koontz Lake

County: Starke

### The Parties

Excavator: **Mark Milo Enterprises Inc**

Contact: Mark Milo, President

Address: 5015 E 250 S, Knox, In 46534

Telephone: 574-772-6335

Facility Owner: NIPSCO

Contact: Kit Earle

Address: 150 W Market Street, Indianapolis, IN 46204

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

**Investigation regarding: Mark Milo Enterprises Inc**

UPPAC Database Record ID: 3837

**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: Yes Indiana 811 ticket Number: 1208311676

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Sewer

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

**Findings:** Reported by Indiana 811; excavator's response to initial notice was received on 12/10/2012. The excavator had a valid locate request and the operator provided accurate locate markings. The operator reported that due to construction and the age of the locate (18 days) a remark could have prevented the damage.

**Conclusion:** There was a failure to maintain two (2) feet of clearance.

**Violation: 8-1-26-20(a)(2): Failure to maintain two (2) feet clearance with mechanized equipment.**



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Sep 28, 2012

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### Who is submitting this information?

Name of person providing this information: Steve Noffsinger (NIPSCo)

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: Mark Milo Enterprises Inc

Business address (*number and street*): 5015 E 250 S

City, State, and ZIP code: Knox, IN, 46534

Telephone number (*area code*): (574)772-6335

Fax number (*area code*): (574)772-6335

E-mail address: JMILO28@HOTMAIL.COM

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### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Sewer (Sanitary/Storm)

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## Date and Location of Damage

Date of damage (*month, day, year*): Sep 18, 2012

County: St. Joseph

City: Walkerton

Street address (*number and street, city, state, and ZIP code*):  
7677 St Rd 23, Walkerton, IN, 46574

Nearest intersection: E Tippecanoe Dr

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*): 2

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? 12

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## Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1208311676

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

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### **Description of Cause**

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

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### **Additional Comments**

Damage ticket 1209183012

Nipsco emergency repair ticket 1209183072

Excavator did report damage to IN811. MAO 10/1/2012.



150 West Market Street, Suite 600  
Indianapolis, IN 46204

January 29, 2012

*Via Electronic Transmission – PipelineDamageCase@urc.in.gov*

Pipeline Safety Division – Case No. 3837  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3837

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: 9/18/2012

Event Location: 7677 N In Rt 23

Facility Owner: Northern Indiana Public Service Company

Excavator: Mark Milo Enterprises Inc

Other Party: N/A

Pipeline Division Case No. 3837

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. 3837</b>	
Date of Event	9/18/2012
Event Location	7677 N In Rt 23
Event City	Koontz Lake
Facility Owner	Northern Indiana Public Service Company
Excavator	Mark Milo Enterprises Inc
Date of IURC Information Request	12/5/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	Mark Milo Enterprises
RESPONSIBLE PARTY PERSONAL NAME	Mark Milo
TITLE (IF ANY)	
ADDRESS	5015 E 250 S
CITY/ STATE/ZIP	Knox, IN 46534
PREFERRED TELEPHONE	574-772-6335
CELL PHONE TELEPHONE	574-249-2737
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	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	7677 N IN RT 23
CITY/STATE/ZIP	Walkerton, IN 46574
NEAREST INTERSECTION	
<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"
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	N
IF YES, HOW MANY EVACUATED	
REPAIR COST (IF KNOWN) (\$)	
<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 1209183012
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1208311676
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)	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)	N
POLICE DEPARTMENT RESPONSE (YES/NO)	N
AMBULANCE RESPONSE (YES/NO)	N
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
<p>Failure to use hand tool where required. To the extent the marks had been obscured by work activities, a re-mark would have been appropriate.</p> <p>Nipsco emergency repair ticket #: 1209183072</p>	

**Fact Based Investigation Report**

NOTIFICATION ID: 01820120918009

DISTRICT: Northern IN

DAMAGE DATE: 9/18/2012 4:02:05 PM

NOTIFICATION DATE: 9/18/2012 4:05:19 PM

NOTIFIED BY: MARK MILO

DAMAGE ADDRESS: 7677 N IN RT 23

CITY: WALKERTON

ST: IN ZIP:

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 09/18/2012

FROM: 16:45:00

TO: 17:00:00

EXCAVATOR INVOLVED: MARK MILO

TYPE OF EXCAVATION: SEWER

ORIG. LOCATE REQ.: 1208311676

START DATE/TIME:

TYPE OF TICKET:

LOCATE REQ. INFO N/A:

DIG UP/DAMAGE REQ.: 1209183012

START DATE/TIME:

PICTURES TAKEN BY: JIM HOSTETLER DATE/TIME: 9/18/2012 4:50:00 PM

PHOTOGRAPHY TYPE: Digital

FRAME #: NA

INVESTIGATOR EMP#: 125835

INVESTIGATOR NAME: JIM HOSTETLER

BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

**Fact Based Investigation Customer Information**

NOTIFICATION ID: 01820120918009

SELECT A CUSTOMER: NIPSCO

CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF

FACILITY ID: Gas Service

LOCATOR NAME & EMP #: Hanselman Dick - 121917

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:

CONTRACTOR CUT A PL. GAS SERVICE INSTALLING SEWER, ALOT OF MARKS HAD BEEN COVERED BY DIRT PILES BUT POST LOCATES SHOW SERVICE WAS MARKED ACCURATLY.

**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

**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 PL. SERVICE

**REPLACEMENT FOOTAGE** 2 FT

**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 00578 IUPPSa 08/31/2012 13:15:07 1208311676-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1208311676 Date: 08/31/2012 Time: 13:05 Oper: DHIGHBAUGH Chan:091

State: IN Cnty: STARKE Twp: OREGON  
Cityname: KOONTZ LAKE Inside: Y Near: N  
Subdivision:

Case:3837

Address : 7677  
Street : N IN RT 23  
Cross 1 : E TIPPECANOE DR Within 1/4 mile: Y  
Location: LOCATE SOUTH AND EASTSIDES OF THE PROPERTY  
:  
Grids : 4124B8629C 4124A8629C  
Boundary: n 41.414112 s 41.411453 w -86.489494 e -86.487679

Work type : INSTALL NEW SEWER  
Done for : HOMEOWNERS  
Start date: 09/05/2012 Time: 13:15 Hours notice: 120/48 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 2 DAYS Depth: 5 FEET

Company : MARK MILO ENTERPRISES INC Type: CONT  
Co addr : 5015 E 250 S  
City : KNOX State: IN Zip: 46534  
Caller : MARK MILO Phone: (574)772-6335  
Contact : MARK - CELL Phone:  
BestTime:  
Mobile : (574)249-2737  
Fax : (574)772-6335  
Email : JMILO28@HOTMAIL.COM

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

Submitted date: 08/31/2012 Time: 13:05  
Members: ID0004 ID2034 ID2885 NIPSCO ID5857 SM

NIPSCO 01003 IUPPSa 09/18/2012 16:02:05 1209183012-00A EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1209183012 Date: 09/18/2012 Time: 15:58 Oper: AHUNTER Chan:037

State: IN Cnty: STARKE Twp: OREGON  
Cityname: KOONTZ LAKE Inside: Y Near: N  
Subdivision:

Case: 3837

Address : 7677  
Street : N IN RT 23  
Cross 1 : E TIPPECANOE DR Within 1/4 mile: Y  
Location: LOCATE SOUTH AND EASTSIDES OF THE PROPERTY  
:  
Grids : 4124B8629C 4124A8629C  
Boundary: n 41.414112 s 41.411453 w -86.489494 e -86.487679

Work type : INSTALL NEW SEWER  
Done for : HOMEOWNERS  
Start date: 09/18/2012 Time: 15:58 Hours notice: 0/0 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 2 DAYS Depth: 5 FEET

Company : MARK MILO ENTERPRISES INC Type: CONT  
Co addr : 5015 E 250 S  
City : KNOX State: IN Zip: 46534  
Caller : MARK MILO Phone: (574)772-6335  
Contact : MARK - CELL Phone:  
BestTime:  
Mobile : (574)249-2737  
Fax : (574)772-6335  
Email : JMILO28@HOTMAIL.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
A NIPSCO GAS LINE HAS BEEN CUT ON THE SOUTH SIDE OF THE HOUSE-- LINE IS NOT  
BLOWING-- LINE IS A PLASTIC 1/2 INCH LINE-- ADVISED CALLER TO CALL 911-- CREW  
IS ON SITE-- ADVISED CALLER TO REPORT THE DAMAGE TO THE UTILITY COMPANY--  
PREVIOUS TICKET NUMBER 1208311676--- THANK YOU  
Will you be white-lining the dig site area? NO  
:

Submitted date: 09/18/2012 Time: 15:58  
Members: ID0004 ID2034 ID2885 NIPSCO 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 Bob Somers JOB ORDER # 566487

TRACKING NUMBER 018 2012 0918 009 LOCATE REF #
Locate Performed By: USIC

DATE AND TIME OF ACCIDENT Sept. 18 2012 2:54 PM DATE OF REPORT 9-18-12

PLACE OF DAMAGE (INCLUDE CITY) 7677 ST RD 23 - WALKERTON

DAMAGE WAS TO:

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

OTHER (DESCRIBE)

GAS: SERVICE (X) MAIN ( ) SIZE 5/8" MATERIAL: PLASTIC (X) STEEL ( ) METER ( ) REG STATION ( ) STUB ( )
OTHER (DESCRIBE)

DEPTH OF FACILITY (Inches) 12" PRESSURE (PSI) 40 Lbs.

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

INTERRUPTION OF SERVICE: YES (X) NO ( ) NUMBER OF CUSTOMERS LOST: 1

DURATION OF INTERRUPTION: TIME REPORTED 2:54 TIME SHUT OFF 3:00 TIME RESTORED 5:00

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

LOCATE MARKS ON SITE: YES (X) DISTANCE BETWEEN FACILITY AND LOCATE MARKS 3-4 IN NO ( )
HOW LOCATED: PAINT (X) FLAGS ( ) BOTH ( ) WHITE LINED ( )

PARTY THAT CAUSED DAMAGES (NAME) Mark Milo Enterprise 574-249-2737

ADDRESS OF PARTY (INCLUDE CITY) 5015 E 250 S. 574-772-6335

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

WITNESS NAME AND ADDRESS

WITNESS REMARKS

AGENCIES NOTIFIED / ONSITE: POLICE ( ) AGENCY REPORT #

FIRE ( ) AGENCY REPORT #

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

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

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: Repaired 3/8" plastic service

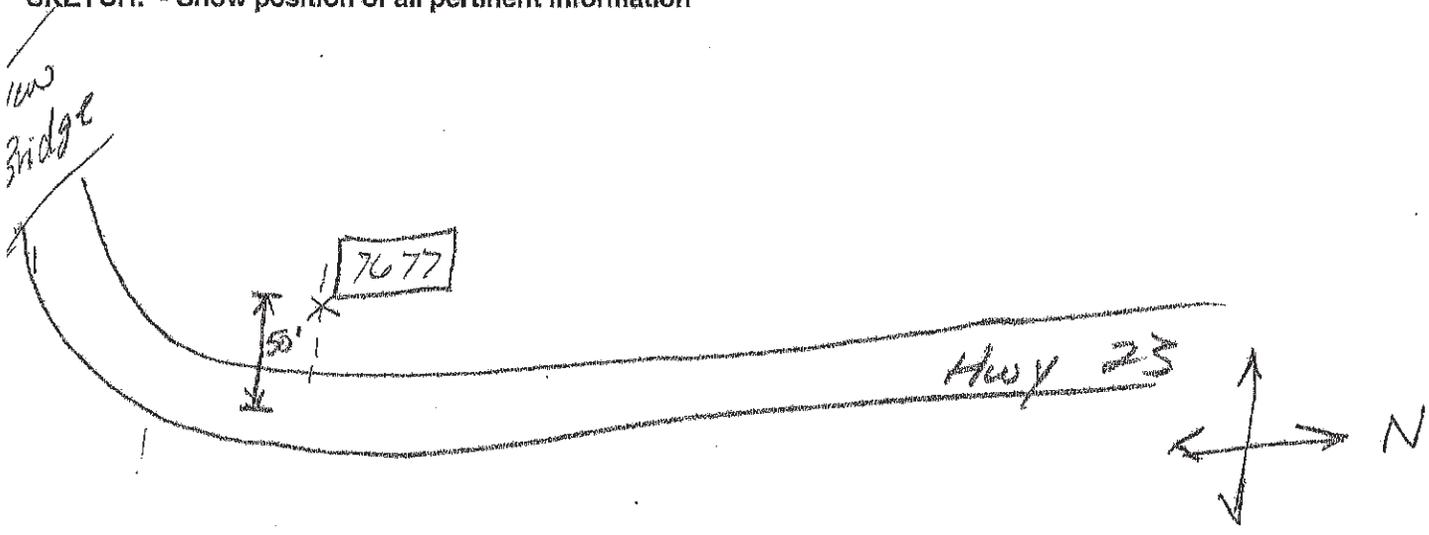
PERSON PREPARING REPORT Kevin Leffert 121457

FIELD SUPERVISOR Bob Samers

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 | 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: Kevin Leffert DATE: 9/18/12



**INFORMATION REQUEST**

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 3837

*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: Mark Milo Enterprises Inc.

Responsible Party Personal Name: Mark Milo

Title (if any): Pres

Address (number and street): 5015 E250S

City, State and ZIP Code: Knox In. 46534

Preferred Telephone Number (area code): 574-772-6335

Cellular Telephone Number (area code): 574-249-2737

Email Address: jmilo28@hotmail.com

**Facility 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: \_\_\_\_\_

**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): *Backhoe / Trackhoe / Excavator*

Type of Work Performed (select one): *Drainage / Sewer hook up*

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

Personal Contact: \_\_\_\_\_

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

**Utility Line Impact**

**Location of Damage:**

Address (number and street): 7677 N IN Rt 23

City, State and ZIP Code: Walberton IN 46574

Nearest Intersection: South Ave.

Product Type (select one): Natural Gas

Facility Type (select one): Home service line

Size (Diameter/etc.): Small

Pressure (PSIG/Inches): unknown

Interruption in Service:  Yes  No Number of Customers Affected: 1

Evacuation:  Yes  No If yes, How Many Evacuated? \_\_\_\_\_

Repair Cost (if known): \$ 122<sup>80</sup>/<sub>100</sub>

Release of Product:  Yes  No

Ignition and/or Fire:  Yes  No

Excavator Notify 811:  Yes  No

**Locate Information**

Excavator Request Locate:  Yes  No

Indiana 811 Locate Ticket Number: 1208311676  
Aug 31 2012

Locate Marks Visible:  Yes  No  
 Locate Marks Correct:  Yes  No  
 Excavator "White Lined":  Yes  No  
 Maps Used to Mark Facilities:  Yes  No *unknown*  
 Was Locate Provided within Two (2) Working Days:  Yes  No  
 Operator Employees On-site during Excavation:  Yes  No

**Incident Impact Information**

Number of Outpatient Treated: NONE

Number of Inpatient Treated: NONE

Number of Fatalities: None

Fire Department Response:  Yes  No

Police Department Response:  Yes  No

Ambulance Response:  Yes  No

**Additional Information / Comments**

Digging was on adjacent property,  
 No legal easement for this utility  
 to be on that property.  
 Flagging did not indicate loop on  
 next door property.

**NARRATIVE STATEMENT**

Your Pipeline Safety Division Case Number: # 3837

Your Full Name: Mark Milo

Full Name of Business / Entity (if applicable): Mark Milo Enterprises Inc.

Your Business Title (if applicable): Pres.

Address (number and street): 5015 E250

City: Knob State: IN ZIP Code: 46534

Your E-mail Address: jmilo28@hotmail.com

Today's Date (month, day, year): 12-10-12

Your Signature: Mark Milo Title (if any) Pres.

Please return your Narrative Statement to:

**Pipeline Safety Division – Case Number 3837**  
**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)