



## Pipeline Safety Division Investigation Report

### Investigation regarding: Hasse Construction Company

UPPAC Database Record ID: 4039

Report Date: 7/11/2013

Investigator: Mike Orr

Damage Date: 10/17/2012 12:23:49 PM

Damage Address: Tod Ave, East Chicago, Lake

### The Parties

Excavator: **Hasse Construction Company**

Address: 10 Lincoln Ave, Calumet City, Il 60409

Facility Owner: **NIPSCO**

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Unknown/Other

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Sewer

### 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: 1210020844

Original Start Date:

Locate Instructions: LOCATE TOD AVE FROM 148TH STREET NORTH TO CHICAGO STREET APPROX 600 FEET

Follow-Up Locate Instructions (if applicable):

**Synopsis:** Excavator struck and damaged an underground natural gas live service stub while performing sewer work.

**Findings:** Reported by Indiana 811; excavator's response to initial notice was received on 12/20/2012. Excavator had a valid locate ticket; however, the gas operator failed to show on maps and records a live service stub which was not located.

**Conclusion:** There was a failure to provide a locate of the facility damaged.

**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 31, 2013

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

Pipeline Safety Division – Case No. 4039  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4039

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: 10/17/2012

Event Location: Tod Ave

Facility Owner: Northern Indiana Public Service Company

Excavator: Hasse Construction Company

Other Party: N/A

Pipeline Division Case No. 4039

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. 4039</b>	
Date of Event	10/17/2012
Event Location	Tod Ave
Event City	East Chicago
Facility Owner	Northern Indiana Public Service Company
Excavator	Hasse Construction Company
Date of IURC Information Request	12/5/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	Hasse Construction Co
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	PO Box 310
CITY/ STATE/ZIP	Calumet City, IL 60409
PREFERRED TELEPHONE	219-932-1611
CELL PHONE TELEPHONE	219-746-3752
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	Same
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	4707 Tod Ave
CITY/STATE/ZIP	East Chicago, IL 46312
NEAREST INTERSECTION	148 <sup>th</sup> St
<b>PRODUCT TYPE (Select One)</b>	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
<b>FACILITY TYPE (Select One)</b>	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X – In-service gas stub
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	5/8"
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) (\$)	
<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- 1210171802
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1210020844
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
<b>INCIDENT IMPACT INFORMATION</b>	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	
POLICE DEPARTMENT RESPONSE (YES/NO)	
AMBULANCE RESPONSE (YES/NO)	
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
<p>Facility could not be found/located.</p> <p>In-service gas stub</p>	

**Fact Based Investigation Report**

NOTIFICATION ID: 01820121017007

DISTRICT: Northern IN

DAMAGE DATE: 10/17/2012 12:24:06 PM

NOTIFICATION DATE: 10/17/2012 12:25:14 PM

NOTIFIED BY: JOE PATRICK

DAMAGE ADDRESS: TOD AVE

CITY: EAST CHICAGO

ST: IN ZIP:

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 10/19/2012

FROM: 10:00:00

TO: 10:30:00

EXCAVATOR INVOLVED: HASSE CONSTRUCTION

TYPE OF EXCAVATION: Sewer Project

ORIG. LOCATE REQ.: 1210020844

START DATE/TIME:

TYPE OF TICKET:

LOCATE REQ. INFO N/A:

DIG UP/DAMAGE REQ.: 1210171802

START DATE/TIME: 10/17/2012 12:20:00 PM

PICTURES TAKEN BY: Bob Anderson DATE/TIME: 10/19/2012 10:20:00 AM

PHOTOGRAPHY TYPE: Digital

FRAME #: 1

INVESTIGATOR EMP#: 117382

INVESTIGATOR NAME: Bob Anderson

BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

**Fact Based Investigation Customer Information**

NOTIFICATION ID: 01820121017007

SELECT A CUSTOMER: NIPSCO

CUSTOMER #: *(optional)*

FACILITY DESCRIPTION: LOWPROF

FACILITY ID: Gas Service

LOCATOR NAME & EMP #: Johnson Vince - 118013

LOCATOR NOT KNOWN:

**CHECK ALL THAT APPLY TO INVESTIGATION:**

Abandoned Facility,  
Other

Other: Service not in use

**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:**

Vince had gone on this damage on the 17th but was unable to get good photos at that time. I went back on the 19th and obtain better photos and found that this was a gas service that is no longer in use at this building. There is no meter on this

building and no one knew that there was a riser on the building the time of the damage. It was covered by an old sign and other items leaning up against the north wall. Nipsco placed a curb box on the service at this time so it can be used in the future if needed. The main is in the alley on the south side of the building and was marked correctly.

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

Nipsco Hammond district was there on the 17th and did the work as needed.

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

N/A

**LIST ANY OTHER INDIVIDUALS ON SITE:**

Shop workers on site but no statements.

**WERE ANY MARKINGS VISIBLE ON THE DAMAGE SITE UPON ARRIVAL?** No

**WERE ANY OTHER INDICATORS OF FACILITY PRESENT IN THE AREA?** No

**WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS?** No

**EXTENT OF FACILITY DAMAGE** Hit plastic service

**REPLACEMENT FOOTAGE** None

**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)**

CASE #  
4039

NIPSCO 00276 IUPPSa 10/02/2012 09:27:29 1210020844-00A NORM NEW GRID

NORMAL NOTICE REMARK

Ticket : 1210020844 Date: 10/02/2012 Time: 09:25 Oper: BRIAN.STARESINA Chan:000  
Old Tkt: 1209120898 Date: 09/12/2012 Time: 09:27 Oper: BRIAN.STARESINA Rev: 00A

State: IN Cnty: LAKE Twp: NORTH  
Cityname: EAST CHICAGO Inside: Y Near: N  
Subdivision:

Address :  
Street : TOD AVE  
Cross 1 : 148TH ST Within 1/4 mile: Y  
Location: LOCATE TOD AVE FROM 148TH STREET NORTH TO CHICAGO STREET APPROX 600 FEET

:  
Grids : 4137B8728B 4137A8728B  
Boundary: n 41.629784 s 41.626839 w -87.478752 e -87.477226

Work type : SEWER  
Done for : CITY OF EAST CHICAGO  
Start date: 10/04/2012 Time: 09:45 Hours notice: 48/48 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 9 MONTHS Depth: 10 FEET

Company : HASSE CONSTRUCTION COMPANY Type: CONT  
Co addr : 10 LINCOLN AVE  
City : CALUMET CITY State: IL Zip: 60409  
Caller : BRIAN STARESINA Phone: (219)932-1611  
Contact : JOE PATRICK Phone:  
BestTime:  
Mobile : (219)746-0271  
Fax : (708)862-2455

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

Submitted date: 10/02/2012 Time: 09:25  
Members: BE COMCN IB ID2708 ID7382 NIPSCO SM

CASE #  
4039

NIPSCO 00554 IUPPSa 10/17/2012 12:24:06 1210171802-00A EMER DAMG GRID

DAMAGE DAMAGE

Ticket : 1210171802 Date: 10/17/2012 Time: 12:20 Oper: JELEWITZ Chan:086

State: IN Cnty: LAKE Twp: NORTH  
Cityname: EAST CHICAGO Inside: Y Near: N  
Subdivision:

Address :  
Street : TOD AVE  
Cross 1 : 148TH ST Within 1/4 mile: Y  
Location: LOCATE TOD AVE FROM 148TH STREET NORTH TO CHICAGO STREET APPROX 600 FEET

:  
Grids : 4137B8728B 4137A8728B  
Boundary: n 41.629784 s 41.626839 w -87.478752 e -87.477226

Work type : SEWER  
Done for : CITY OF EAST CHICAGO  
Start date: 10/17/2012 Time: 12:20 Hours notice: 0/0 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 9 MONTHS Depth: 10 FEET

Company : HASSE CONSTRUCTION COMPANY Type: CONT  
Co addr : 10 LINCOLN AVE  
City : CALUMET CITY State: IL Zip: 60409  
Caller : JOE PATRICK Phone: (219)932-1611  
Contact : JOE PATRICK Phone:  
BestTime:  
Mobile : (219)746-0271  
Fax : (708)862-2455

Remarks : All tickets are taken and processed on Eastern Daylight Time  
AN UNKNOWN GAS LINE HAS BEEN CUT ON THE EAST SIDE OF TOD AVENUE APPROX 100 FEET  
NORTH OF 148TH STREET IN FRONT OF 4707 TOD AVENUE -- BELIEVES COMPANY IS NIPSCO  
-- LINE IS NOT BLOWING -- LINE IS ORANGE PLASTIC APPROX 1/2 INCH IN DIAMETER --  
ADVISED TO CALL 911 AND NIPSCO -- CREW IS ON SITE -- PREVIOUS TICKET NUMBER  
1210020844 -- THANK YOU  
Will you be white-lining the dig site area? NO  
:

Submitted date: 10/17/2012 Time: 12:20  
Members: BE COMCN IB ID2708 ID7382 NIPSCO SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY  
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA HAMMOND MAXIMO WO # \_\_\_\_\_  
OPERATING AREA CONTACT \_\_\_\_\_ JOB ORDER # 568631  
TRACKING NUMBER 01820121017008 LOCATE REF # \_\_\_\_\_  
Locate Performed By: \_\_\_\_\_

DATE AND TIME OF ACCIDENT 10-17-12 2012, \_\_\_\_\_ M DATE OF REPORT 10-17-12  
PLACE OF DAMAGE (INCLUDE CITY) 4707 Top Av.

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) 18" 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: 0

DURATION OF INTERRUPTION: TIME REPORTED 11:29 AM TIME RESTORED N/A

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 5/8" SERVICE RATED 1/2 HALF

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

PARTY THAT CAUSED DAMAGES (NAME) HASSE CONSTRUCTION Co. INC.

ADDRESS OF PARTY (INCLUDE CITY) P.O. Box 310, Columbus City, IL (708) 862-2450

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE VARNER SMITH (219) 296-3752

WITNESS NAME AND ADDRESS \_\_\_\_\_

WITNESS REMARKS \_\_\_\_\_

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

FIRE ( ) AGENCY \_\_\_\_\_ REPORT # \_\_\_\_\_

OTHER  811 Any Injuries? ( ) YES # \_\_\_\_\_  NO

PHOTOS TAKEN: YES ( ) NO  TAKEN BY: \_\_\_\_\_ (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 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 checked="" 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>5/8" SERVICE NOT LOCATED</u> |

COMMENTS :

7

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PERSON PREPARING REPORT J. Shepard

FIELD SUPERVISOR Tony Sanchez

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: \_\_\_\_\_ DATE: \_\_\_\_\_



## INFORMATION REQUEST

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 4039 \_\_\_\_\_

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*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.*

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### The Parties

#### Excavator Information:

Business Name: Hasse Construction Co., Inc.

Responsible Party Personal Name: Joe Patrick

Title (if any): Superintendent

Address (number and street): 10 Lincoln Ave.

City, State and ZIP Code: Calumet City, IL 60409

Preferred Telephone Number (area code): 219-932-1611

Cellular Telephone Number (area code): 219-746-0271

Email Address: jpatrick@hasseconstruction.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: \_\_\_\_\_

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**Cause of Damage Information**

**Type of Equipment (*select one*):** Backhoe/Trackhoe

**Type of Work Performed (*select one*):** Water

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

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**Utility Line Impact**

**Location of Damage:**

Address (*number and street*): 4707 Tod Ave \_\_\_\_\_

City, State and ZIP Code: East Chicago, IN 46312 \_\_\_\_\_

Nearest Intersection: Chicago Ave & Tod Ave \_\_\_\_\_

**Product Type (*select one*):** Natural Gas

**Facility Type (*select one*):** Service/Drop

**Size (Diameter/etc.):** 1/2" \_\_\_\_\_

**Pressure (PSIG/Inches):** \_\_\_\_\_

**Interruption in Service:**  Yes  No **Number of Customers Affected:** 1 \_\_\_\_\_

**Evacuation:**  Yes  No **If yes, How Many Evacuated?** 0 \_\_\_\_\_

**Repair Cost (if known):** \$ \_\_\_\_\_

**Release of Product:**  Yes  No

**Ignition and/or Fire:**  Yes  No

**Excavator Notify 811:**  Yes  No

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**Locate Information**

**Excavator Request Locate:**  Yes  No

**Indiana 811 Locate Ticket Number:** 1210020844 \_\_\_\_\_

**Locate Marks Visible:**  Yes  No

**Locate Marks Correct:**  Yes  No

**Excavator "White Lined":**  Yes  No

**Maps Used to Mark Facilities:**  Yes  No

**Was Locate Provided within Two (2) Working Days:**  Yes  No

**Operator Employees On-site during Excavation:**  Yes  No

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**Incident Impact Information**

**Number of Outpatient Treated:** <sup>0</sup> \_\_\_\_\_

**Number of Inpatient Treated:** <sup>0</sup> \_\_\_\_\_

**Number of Fatalities:** <sup>0</sup> \_\_\_\_\_

**Fire Department Response:**  Yes  No

**Police Department Response:**  Yes  No

**Ambulance Response:**  Yes  No

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**Additional Information / Comments**

This gas service was not located at any time during the 4 months that locates were called in. NIPSCO was unaware that this line even existed and it was not on our drawings.

On October 17th, 2012 while excavating for water services, our crew hit and broke a 1/2" plastic gas service on Tod Ave. Locates had been requested prior to construction and regularly updated during. This gas service was never marked. When NIPSCO came to make repairs they told us that they had no idea that there was a service in that location.

Attached are photographs taken after utilities were located and prior to construction.

**NARRATIVE STATEMENT**

Your Pipeline Safety Division Case Number: 4039

Your Full Name: Joe Patrick

Full Name of Business / Entity (if applicable): Hasse Construction Co., Inc.

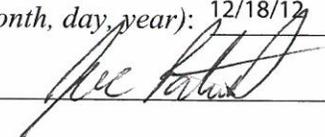
Your Business Title (if applicable): Superintendent

Address (number and street): 10 Lincoln Ave.

City: Calumet City State: IL ZIP Code: 60409

Your E-mail Address: jpatrick@hasseconstruction.com

Today's Date (month, day, year): 12/18/12

Your Signature:  Title (if any) Supr.

Please return your Narrative Statement to:

**Pipeline Safety Division – Case Number 4039**  
**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)

TIRES  
YONDA

**USED TIRES**  
13 '15-20    14 '25-30  
15 '25-30    16 '30-35  
17 '40-45  
**WE FIX RIMS**  
Quality Product - Great Service

TIRE  
VISION  
LLANTAS  
USADAS

Fix  
FLATS

4707





**USED TIRES**  
13 '15-20    14 '25-'30  
15 '25-'30    16 '30-'35  
17 '40-'45  
**WE FIX RIMS**  
*Quality Product - Great Service*

**TIRE SHOP**  
LANTAS  
USADAS

**Fix  
FLATS**

#707

E 1st

NORMAL NOTICE REMARK

Ticket : 1210020844 Date: 10/02/2012 Time: 09:25 Oper: BRIAN.STARESINA Chan:000  
 Old Tkt: 1209120898 Date: 09/12/2012 Time: 09:27 Oper: BRIAN.STARESINA Rev: 00A

State: IN Cnty: LAKE Twp: NORTH  
 Cityname: EAST CHICAGO Inside: Y Near: N  
 Subdivision:

Address :  
 Street : TOD AVE  
 Cross 1 : 148TH ST Within 1/4 mile: Y  
 Location: LOCATE TOD AVE FROM 148TH STREET NORTH TO CHICAGO STREET APPROX 600 FEET  
 :  
 Grids : 4137B8728B 4137A8728B

Work type : SEWER  
 Done for : CITY OF EAST CHICAGO  
 Start date: 10/04/2012 Time: 09:45 Hours notice: 48/48 Priority: NORM  
 Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
 Duration : 9 MONTHS Depth: 10 FEET

Company : HASSE CONSTRUCTION COMPANY Type: CONT  
 Co addr : 10 LINCOLN AVE  
 City : CALUMET CITY State: IL Zip: 60409  
 Caller : BRIAN STARESINA Phone: (219)932-1611  
 Contact : JOE PATRICK Phone:  
 BestTime:  
 Mobile : (219)746-0271  
 Fax : (708)862-2455

Remarks : All tickets are taken and processed on Eastern Daylight Time  
 Will you be white-lining the dig site area? NO  
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Submitted date: 10/02/2012 Time: 09:25  
 Members: BE COMCN IB ID2708 ID7382 NIPSCO SM

Member Name	Facility Types
AT&T - DISTRIBUTION	TELEPHONE
BUCKEYE	PIPELINE
COMCAST NORTH	CABLE TV
EXPLORER PIPELINE COMPANY	PIPELINE
MCI	FIBER OPTIC
NIPSCO	GAS & ELECTRIC