



Pipeline Safety Division Investigation Report

Investigation regarding: Pfeiffer Construction

UPPAC Database Record ID: 4181

Report Date: 04/04/2013

Investigator: Howard Friend

Damage Date: 10/2/2012

Damage Address: 710 W Dewey St, Bremen, Marshall County

The Parties

Excavator: **Pfeiffer Construction** (Contractor)

Address: 502 North Bowen Ave, Bremen, In 46506

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Sewer

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: 1209241020

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Carrie Ludwig; excavator's response to initial notice was received on 2/20/2013. Ultimately, the gas service was damaged some time before actual reported damage date when sidewalk collapsed. The service was crimped off at that time and left for later. Operator made a 'temporary' retirement until construction is completed.

Conclusion: Excavator failed to warrant the integrity of the ditch, thereby endangering the service. Damage occurred as a result.

Violation: 8-1-26-20(a)(1) Failure to plan excavation to avoid damage or interference with underground facilities.



150 West Market Street, Suite 600
Indianapolis, IN 46204

March 6, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4181
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4181

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: 10/2/2012

Event Location: 710 W Dewey St

City: Bremen

Facility Owner: Northern Indiana Public Service Company

Excavator: Pfeiffer Construction

Other Party: N/A

Pipeline Division Case No. 4181

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. 4181	
Date of Event	10/2/2012
Event Location	710 W Dewey St
Event City	Bremen
Facility Owner	Northern Indiana Public Service Company
Excavator	Pfeiffer Construction
Date of IURC Information Request	2/13/2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Pfeiffer Construction
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	502 North Bowen Ave
CITY/ STATE/ZIP	Bremen, IN 46506
PREFERRED TELEPHONE	574 546 3004
CELL PHONE TELEPHONE	
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	Same
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	710 W Dewey St
CITY/STATE/ZIP	Bremen, IN 46506
NEAREST INTERSECTION	N Baltimore St
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.)	5/8"
PRESSURE (PSIG/INCHES)	35
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	1
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	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	X
Hand Tools	
Milling Equipment	
Probing Device	

Trancher	
Vacuum Equipment	
Unknown/Other	
TYPE OF WORK PERFORMED (Select One)	
Agriculture	
Cable TV	
Curb/Sidewalk	
Bldg. Construction	X
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)	N
EXCAVATOR NOTIFY 811 (YES/NO)	N
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1209241020
LOCATE MARKS VISIBLE (YES/NO)	Y Date damage was called in
LOCATE MARKS CORRECT (YES/NO)	Y Date damage was called in
EXCAVATOR "WHITE LINED" (YES/NO)	
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)	
POLICE DEPARTMENT RESPONSE (YES/NO)	
AMBULANCE RESPONSE (YES/NO)	
ADDITIONAL INFORMATION/COMMENTS	
<p>Damage occurred 2 weeks prior to date called in and was crimped off. Nipsco employee discovered it and called it in on 10-2-12 as a damage</p> <p>Failure to support exposed facilities</p> <p>Nipsco emergency repair ticket #: 1210023201</p>	

NIPSCO 00280 IUPPSa 09/24/2012 09:47:20 1209241020-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1209241020 Date: 09/24/2012 Time: 09:42 Oper: JSMITH Chan:088

State: IN Cnty: MARSHALL Twp: GERMAN
Cityname: BREMEN Inside: Y Near: N
Subdivision:

Address :

Street : W DEWEY ST

Cross 1 : N BALTIMORE ST Within 1/4 mile: Y

Location: THIS IS A CORNER LOT AT THE ADDRESS OF 427 NORTH BALTIMORE
STREET--LOCATE THE NORTH SIDE OF THE PROPERTY INCLUDING BOTH SIDES OF WEST DEWEY
STREET AND THE ENTIRE ROADWAY AND THE TREE LAWN ON THE SOUTH SIDE OF THE ROAD

:

Grids : 4126A8609D 4127D8609D 4126A8609C 4127D8609C

Boundary: n 41.450504 s 41.449127 w -86.155067 e -86.153465

Work type : INSTALLING SEWER

Done for : BREEMAN CASTINGS INC

Start date: 09/26/2012 Time: 10:00 Hours notice: 48/48 Priority: NORM

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

Duration : 30 DAYS Depth: 6 FEET

Company : PFEIFFER CONSTRUCTION Type: CONT

Co addr : 502 NORTH BOWEN AVENUE

City : BREMEN State: IN Zip: 46506

Caller : DEB PENROSE Phone: (574)546-3004

Contact : DEB PENROSE--OFFICE Phone:

BestTime:

Mobile : (574)546-3004

Fax : (574)546-3183

Email : PFEIFFERCONST@FOURWAY.NET

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

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

:

Submitted date: 09/24/2012 Time: 09:42

Members: ID2034 ID4324 ID4636 ID5344 ID7634 NIPSCO ID5857 SM

Fact Based Investigation Report

NOTIFICATION ID: 01820121002012

DISTRICT: Northern IN

DAMAGE DATE: 10/2/2012 6:00:00 PM

NOTIFICATION DATE: 10/2/2012 5:59:41 PM

NOTIFIED BY: MARCIA KING 800-322-2806 Other

DAMAGE ADDRESS: 710 W DEWEY ST

CITY: BREMEN

ST: IN ZIP:

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 10/03/2012

FROM: 11:30:00

TO: 11:55:00

EXCAVATOR INVOLVED: PFEIFFER CONSTRUCTION

TYPE OF EXCAVATION: SEWER

ORIG. LOCATE REQ.: 1209072861

START DATE/TIME:

TYPE OF TICKET:

LOCATE REQ. INFO N/A:

DIG UP/DAMAGE REQ.: 1210023201

START DATE/TIME:

PICTURES TAKEN BY: JIM HOSTETLER DATE/TIME: 10/3/2012 11:55:00 AM

PHOTOGRAPHY TYPE: Digital

FRAME #: NA

INVESTIGATOR EMP#: 117330

INVESTIGATOR NAME: BRAD WELLMAN

BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01820121002012

SELECT A CUSTOMER: NIPSCO

CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF

FACILITY ID: Gas Service

LOCATOR NAME & EMP #: Hostetler Jim - 125835

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):

Investigator Verified Existing Marks By Hooking Up

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

FROM TALKING TO CONTRACTOR THIS DAMAGE OCCURED A COUPLE WEEKS AGO WHEN SIDEWALL COLLAPSED AND BROKE PL. GAS SERVICE, CONTRACTOR AT THAT TIME CRIMPED IT OFF AS IT WAS GOING TO BE REROUTED ANYHOW. ON 10-2 A NIPSCO EMPLOYEE SAW IT AND CALLED IN DAMAGE, WE WENT AFTER HOURS BUT NOBODY WAS ON SITE AND WE COULD NOT FIND ANY DAMAGE, CALLED NIPSCO AND COULD NOT

GET ANY FURTHER INFO SO WE CONTINUED THE FOLLOWING DAY. THE LAST TICKET FOR THIS AREA WHICH I PUT IN REPORT IS NOT FOR DAMAGING CONTRACTOR, WAS FOR TOWN OF BREMEN, SHOWS SERVICE WAS MARKED, NOW DAMAGE HAS BEEN CAPPED UNDER GROUND AND COVERED. UNSURE WHEN THE SERVICE WAS CAPPED OFF.

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

RON SOMERS

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 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)

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 SAMERS JOB ORDER # 566268

TRACKING NUMBER 018 201 200 0212 LOCATE REF # _____

Locate Performed By: _____

DATE AND TIME OF ACCIDENT 10-2-12 20 10:18 P.M DATE OF REPORT 10-2-12

PLACE OF DAMAGE (INCLUDE CITY) 710 W DRYWY ST BREMER

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) 16" PRESSURE (PSI) 35 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 1618 TIME SHUT OFF 1630 TIME RESTORED SEE BACK

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

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

PARTY THAT CAUSED DAMAGES (NAME) UNKNOWN - GC

ADDRESS OF PARTY (INCLUDE CITY) _____

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE _____

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: _____ (ATTACH PHOTOS TO REPORT)
MEDIA ON SITE YES () NO

WORK IN PROGRESS WHEN FACILITY DAMAGED - CHECK APPROPRIATE CHOICE BELOW

- | | | | |
|---|-------------------------------------|--|---|
| <input checked="" type="checkbox"/> AGRICULTURE/FARMING | <input type="checkbox"/> CABLE TV | <input type="checkbox"/> CURB/SIDEWALK | <input type="checkbox"/> TELECOMMUNICATIONS |
| <input checked="" 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 type="checkbox"/> SEWER | |

TYPE OF EQUIPMENT USED - CHECK APPROPRIATE CHOICE BELOW

- | | | |
|--|--|--|
| <input type="checkbox"/> AUGER | <input 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 checked="" type="checkbox"/> GRADER | <input type="checkbox"/> OTHER _____ |

REASON DAMAGE OCCURRED - CHECK APPROPRIATE CHOICE BELOW

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> AUTOMOTIVE ACCIDENT | <input type="checkbox"/> EXCAVATING BEFORE LOCATES DUE | <input type="checkbox"/> CARELESS MACHINE OPERATOR |
| <input checked="" type="checkbox"/> NO NOTIFICATION | <input type="checkbox"/> MARKS DISTURBED | <input type="checkbox"/> STUB () OTHER _____ |

COMMENTS:

TEMPORARILY REVISED SERVICE
UNTILL CUSTOMERS CALLS FOR
A RELOCATE FOR NEW CONSTRUCTION

PERSON PREPARING REPORT

Joe Morroale

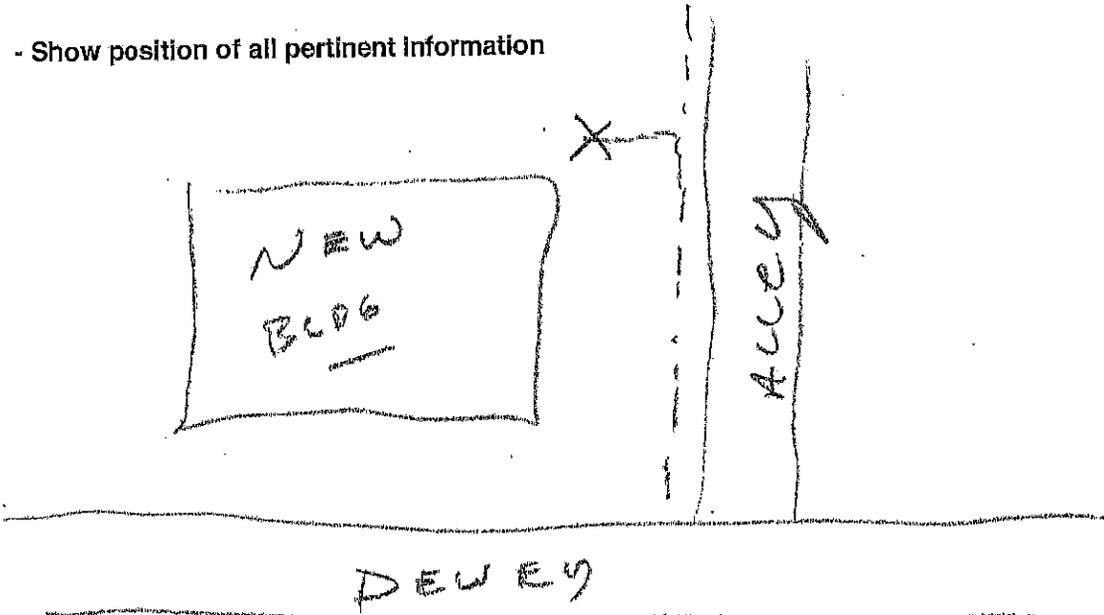
FIELD SUPERVISOR

Bob Somers

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:

Joe Morroale

DATE:

10/2/11



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Nov 21, 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: Pfeiffer Construction

Business address (*number and street*): 502 North Bowen Ave

City, State, and ZIP code: Bremen, IN 46506

Telephone number (*area code*): 574 546 3004

Fax number (*area code*): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Grader/Scraper

Type of work performed: Bldg. Construction

Date and Location of Damage

Date of damage (month, day, year): Oct 2, 2012

County: Marshall

City: Bremen

Street address (number and street, city, state, and ZIP code):
710 W Dewey St, Bremen, IN

Nearest intersection: N Whitlock St

Right of way where damage occurred: Private - Business

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): _____

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ _____

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? 16

Notification, Locating, Marking

Did excavator request locates prior to commencing work? No

Enter Indiana 811 ticket number, if known: _____

Was the locate request completed within two working days? Unknown/Other

If locates were performed, were they done so by a contractor or pipeline employee? Unknown/Other

If a contractor locator, enter the company name, if known: _____

Were facility marks visible in the area of excavation? No

Were facilities marked correctly? Unknown/Other

Type of markings used: Other

If other, please specify: no locates _____

Was site marked by "White Lining"?

Were special instructions part of the locate request? Unknown/Other

Were maps used to complete the locate request? Unknown/Other

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? Unknown/Other

Description of Cause

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

Additional Comments

Nipsco emergency repair ticket #: 1210023201



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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INDIANA UTILITY REGULATORY COMMISSION

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Excavator Information, if known

Full name: Pfeiffer Construction

Business address (*number and street*): 502 North Bowen Ave

City, State, and ZIP code: Bremen, IN 46506

Telephone number (*area code*): 574 546 3004

Fax number (*area code*): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Grader/Scraper

Type of work performed: Bldg. Construction

Date and Location of Damage

Date of damage (*month, day, year*): Oct 2, 2012

County: Marshall

City: Bremen

Street address (*number and street, city, state, and ZIP code*):
710 W Dewey St

Nearest intersection: N Whitlock St

Right of way where damage occurred: Private - Business

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*): _____

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ _____

Affected Facility Information

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Were facilities marked correctly? Unknown/Other

Type of markings used: Other

If other, please specify: no locates _____

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Were special instructions part of the locate request? Unknown/Other

Were maps used to complete the locate request? Unknown/Other

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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? Unknown/Other

Description of Cause

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

Additional Comments

Nipsco emergency repair ticket #: 1210023201

Pfeiffer Construction, Inc.

NAME Tim

WEEK ENDING 10-6-12

		JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME	JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME
		J.B.'s HOUSE - POND LANE						J.B.'s POND LANE					
		LAY OUT AT ROAD						STRIP TOP SOIL &					
		REMOVE TOPSOIL	17			1		ROLL SUB GRADE					
MACH. UNIT		LEVEL & ROLL	12			2		GRADE OFF SIAG					
Air Comp - 11		SUB GRADE	27			1	R	+ ROLL	VOLVO			1 1/2	
JD-450C - 12			VOLVO			4			1-R ROLLER			1 1/2	
JD-450 - 13			1-R ROLLER			4 1/2	0		12			4	R
310-D - 14									14			1	
M-45C - 15													
B-166 - 16													
LABOR - 17		7:15 AM 4:30 PM						7:15 AM 4:00 PM					
M Crane - 18		DATE 10/1	MONDAY 8.5				DATE 10/2	TUESDAY 8					
586-D - 19		JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME	JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME
Bobcat - 20		BCI-MED. BLDG						J.B.'s-POND LANE					
Crane - 21		DIG, INSTALL &						STRIP TOPSOIL					
950-B - 24		BACKFILL WATER						GRADE & ROLL SUB					
		LINES, CONNECT TO						SUB GRADE, LEVEL					
		CITY VALVE	27			5		ROLL SIAG.	VOLVO			3	
		J.B.'s-POND LANE							12			4 1/2	R
		STRIP TOP SOIL							1-R ROLLER			1	5.2
225 CAT - 25		GRADE & ROLL	VOLVO			2	R						
B Crane - 26		SUB GRADE	12			1/2							
Kubota - 27			1-R ROLLER			1/2		7:15 AM 4:15 PM					
Drott - 28		7:15 AM 4:00 PM						1/2 HR LUNCH					
R-Model - 31		DATE 10/3	WEDNESDAY 8				DATE 10/4	THURSDAY 8.5					
Mack-Tri - 33		JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME	JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME
C-65 - 35		IN. CARTON-NEW ROOST						IN CARTON					
F-750 - 36		SAW & REMOVE CONCR						SAW CONCRETE					
KW-Tri - 37		REMOVE UNSTABLE						BRING TOOLS &					
KW-Tri - 38		SUBGRADE & COMPACT.						MISC. BACK	17			2	0
KW-Semi - 39		PLACE 1/2" L.G. COMP.											
D6H - 40		PLACE EXP. JOINT	SIM JUMP			3	R						
215 Cat - 215		VISQUEEN, MESH & R.V. STAK				3							
		POUR FINISH	15 K. HYSTER			3	2.5						
		MARK & SPRAY CURE	17			5 1/2	0						
		7:00 AM 9:30 PM											
		NO LUNCH											
		DATE 10/5	FRIDAY 14.5				DATE 10/6	SATURDAY 2					

49.5 hrs

job 49.5 shop - -

Pfeiffer Construction, Inc.

NAME Rick

WEEK ENDING 10-6-12

		JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME	JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME
		J.B HOUSE MARK AND HELP DIG OUT DRIVEWAY FOR POND	17			8		J.B. HOUSE MARK AND DIG OUT DRIVEWAY, START BACK FILLING WITH SLAG, PUT FUEL IN 450G AND ROLL ON	17			8	
MACH.	UNIT												
Air Comp	- 11												
JD-450C	- 12												
JD-450	- 13												
310-D	- 14												
M-45C	- 15												
B-166	- 16												
LABOR	- 17												
M Crane	- 18												
586-D	- 19												
Bobcat	- 20												
Crane	- 21												
950-B	- 24												
225 CAT	- 25												
B Crane	- 26												
Kubota	- 27												
Drott	- 28												
R-Model	- 31												
Mack-Tri	- 33												
C-65	- 35												
F-750	- 36												
KW-Tri	- 37												
KW-Tri	- 38												
KW-Semi	- 39												
D6H	- 40												
215 Cat	- 215												
		J.B HOUSE DIG OUT ON DRIVE	17			5		J.B DRIVEWAY TO POND DIG OUT SOO, GRADE OUT SIDE'S, BACK FILL WITH SLAG, GRADE OUT, CLEAN SIDE'S	17			8	
		FOR POND CLEAN SIDE'S	17			3		7:15					
		DATE 10/3	WEDNESDAY				8	DATE 10/4	THURSDAY				8
		JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME	JOB	UNIT	ON JOB	LEFT JOB	REG. HOURS	OVER TIME
		INDIANA CARTON											
		CUT-LIFT OUT CONCRETE											
		DIG DOWN TO 16" PACK											
		BACK FILL TO 8" PACK WITH 539 TONK											
		LAP WIRE DRILL HOLES FOR REBAR, POUR CONCRETE											
		GRADE OUT, CLEAN UP TOOL'S & EQUIP				11	PT 30						
		NO LUNCH											
		7:00 AM											
		6:00 PM											
		DATE 10/5	FRIDAY				11	DATE 10/6	SATURDAY				

43 hrs

PF 43 on-o-

Job 43 Shop -o-