



Pipeline Safety Division Investigation Report

Investigation regarding: **Bob Workman**

UPPAC Database Record ID: **4190**

Report Date: 04/04/2013

Investigator: Howard Friend

Damage Date: 10/3/2012

Damage Address: 5298 W 800 S, North Judson, Starke County

The Parties

Excavator: **Bob Workman** (Occupant)

Address: 5298 W 800 S, North Judson, In 46366

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Construction

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: 1208232063

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

Synopsis: A natural gas service was damaged during excavation for a room addition.

Findings: Reported by Carrie Ludwig (NIPSCO); excavator's response to initial notice was received on 3/9/2013. The excavator reported hitting a retired line that resulted in damage to the active line. The operator reported the excavator damaged the line with mechanized equipment within two (2) feet of the marks. The excavator/homeowner provided notice of excavation on 8/23/12 and damaged the line 41 days later.

Conclusion: There was a failure to provide notice of excavation.

Violation: 8-1-26-16(g)(expire) Failure to provide notice of excavation - expired ticket.



150 West Market Street, Suite 600
Indianapolis, IN 46204

March 6, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4190
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4190

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: 10/3/2012

Event Location: 5298 W 800 S

City: North Judson

Facility Owner: Northern Indiana Public Service Company

Excavator: Bob Workman

Other Party: N/A

Pipeline Division Case No. 4190

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. 4190	
Date of Event	10/3/2012
Event Location	5298 W 800 S
Event City	North Judson
Facility Owner	Northern Indiana Public Service Company
Excavator	Bob Workman
Date of IURC Information Request	2/13/2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	
RESPONSIBLE PARTY PERSONAL NAME	Bob Workman
TITLE (IF ANY)	
ADDRESS	5298 W 800 S
CITY/ STATE/ZIP	North Judson, IN 46366
PREFERRED TELEPHONE	574 806 7988
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	5298 W 800 S
CITY/STATE/ZIP	North Judson, IN 46366
NEAREST INTERSECTION	IN RT 39
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	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	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	1208232063
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
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>Failure to use hand tools where required</p> <p>Homeowner cut service off outside of a new addition and plugged with a bolt.</p> <p>Nipsco emergency repair ticket #: 1210031391</p>	



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Nov 26, 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: Bob Workman

Business address (*number and street*): 5298 W 800 S

City, State, and ZIP code: North Judson, IN 46366

Telephone number (*area code*): 574 806 7988

Fax number (*area code*): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Bldg. Construction

Date and Location of DamageDate of damage (*month, day, year*): Oct 3, 2012County: StarkeCity: North JudsonStreet address (*number and street, city, state, and ZIP code*):
5298 W 800 S, North Judson, IN 46366Nearest intersection: IN RT 39Right 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? 1Time to restore service (*in hours*): 3Enter number of injuries, if applicable and known: 0Enter number of fatalities, if applicable and known: 0Property damage, Estimate \$

Affected Facility InformationWhat type of pipeline was damaged? Natural GasWhat was the affected facility? Service/DropWhat was the depth of the facility, in inches? 24

Notification, Locating, MarkingDid excavator request locates prior to commencing work? YesEnter Indiana 811 ticket number, if known: 1208232063

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 and Flags

If other, please specify: _____

Was site marked by "White Lining"? No

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: --Failure to use hand tools where required

Additional Comments

Nipsco emergency repair ticket #: 1210031391

NIPSCO 00662 IUPPSa 08/23/2012 14:01:03 1208232063-00A NORM NEW STRT

NORMAL NOTICE

Ticket : 1208232063 Date: 08/23/2012 Time: 13:55 Oper: DHIGHBAUGH Chan:091

State: IN Cnty: STARKE Twp: WAYNE
Cityname: NORTH JUDSON Inside: N Near: Y
Subdivision:

Address : 5298
Street : W 800 S
Cross 1 : IN RT 39 Within 1/4 mile: N
Location: LOCATE EASTSIDE OF THE HOUSE TO THE ROAD----WHERE THE ACCESS IS
:
Grids : 4111D8648D 4111D8648C
Boundary: n 41.187080 s 41.185944 w -86.807671 e -86.800034

Work type : REMODEL
Done for : STEVEN WORKMAN
Start date: 08/27/2012 Time: 14:15 Hours notice: 96/48 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 2 DAYS Depth: UNKNOWN

Company : STEVEN WORKMAN Type: HOME
Co addr : 5298 W 800 S
City : NORTH JUDSON State: IN Zip: 46366
Caller : STEVEN WORKMAN Phone: (574)806-7988
Contact : NONE Phone:
BestTime:
Email : SWORKMAN80@YAHOO.COM

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

Submitted date: 08/23/2012 Time: 13:55
Members: ID2034 ID2511 NIPSCO ID5857

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 SOMMER JOB ORDER # 566535

TRACKING NUMBER 018 2012 10 03 007 LOCATE REF # _____

Locate Performed By: _____

DATE AND TIME OF ACCIDENT 10-3-12 2012 1042AM DATE OF REPORT 10/3/12

PLACE OF DAMAGE (INCLUDE CITY) 5298 W 800 S - NORTH JESON

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) 24" 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 SEE BACK

DURATION OF INTERRUPTION: TIME REPORTED 1042 TIME SHUT OFF 1100 TIME RESTORED 1:45

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) Bob Workman

ADDRESS OF PARTY (INCLUDE CITY) 5298 W 800 S - NORTH JESON

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE SAME - BLDG OWNER

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

COMMENTS:

TEMPORARILY RETIRED SECTION
OF SERVICE UNTIL CUSTOMER CALLS
FOR A RELOCATE OF RISER

PERSON PREPARING REPORT

Brian Swartz

FIELD SUPERVISOR

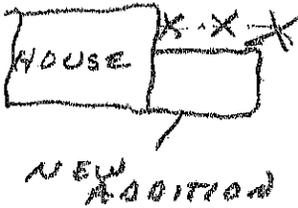
Bob Somers

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

M



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:

Brian Swartz

DATE:

10/3/12

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? No

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 PL. SERVICE

REPLACEMENT FOOTAGE REROUTE 200 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)



Property of United States Infrastructure Corporation
Photo taken on 10/3/2012 12:07:35 PM



Property of United States Infrastructure Corporation
Photo taken on 10/3/2012 11:56:33 AM



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Nov 26, 2012

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

Excavator Information, if known

Full name: Bob Workman

Business address (*number and street*): 5298 W 800 S

City, State, and ZIP code: North Judson, IN 46366

Telephone number (*area code*): 574 806 7988

Fax number (*area code*): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type: Occupant

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Bldg. Construction

Date and Location of Damage

Date of damage (*month, day, year*): Oct 3, 2012

County: Starke

City: North Judson

Street address (*number and street, city, state, and ZIP code*):
5298 W 800 S

Nearest intersection: IN RT 39

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*): 3

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? 24

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1208232063

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 and Flags

If other, please specify: _____

Was site marked by "White Lining"? No

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: --Notification to one-call center made but not sufficient

Additional Comments

Nipsco emergency repair ticket #: 1210031391

Original locate marks were wiped out due to excavation. Per USIC, homeowner cut service off outside of a new addition and plugged with a bolt.

The occupant was performing work without a valid locate. The locate had expired. MAO 12/4/2012.

To whom it may concern,

My name is Robert Workman, and I am replying to a Notice of Preliminary Determination of Violation Pipeline Safety Division letter I received. The case number on the document is 4190. I am an individual, not a business entity, who did some minor excavating on my property to build a room addition on a newly purchased home. On 8-24-12, I had a utility locate accomplished weeks prior to doing any excavating. During excavation, I was digging 6 to 8 feet from the clearly marked locate. I was extremely cautious to keep a safe distance to stay away from the gas line. While digging, I hooked onto an abandoned metal NIPSCO gas line that ran underneath the newer plastic service. When I pulled on it, it busted the active line and busted the meter stand off of the side of the house.

Shortly after the line was broken, I halted the leak with a make-shift plug completely stopping the leak of gas into the air. Within a very short time, the NIPSCO agent that reads the meter so happened to arrive. The incident was reported to him at that time. Other than the broken plastic line, there was no property damage and no injuries occurred.

This incident was an unfortunate accident and coincidental because of the abandoned steel line that was neither known of, nor located in any way, and not due to negligence on my part. Since this newly acquired home is for my son, he was present and assisting at the time of this incident. His name is Steven Workman, and his address is 5298 W 800 S, North Judson, IN 46366. His phone number is 574-806-7988.

I hope that this explanation into the events that occurred that day sufficiently answers any questions you may have into this matter. We regret the occurrence of this incident, and any oversights that we may have made. I am attaching a copy of the locate that was done prior to the excavation.

Sincerely,

Robert Workman

5501 S 750 W

North Judson, IN 46366

(219) 508-0523

NORMAL NOTICE

Ticket : 1208232063 Date: 08/23/2012 Time: 13:55 Oper: DHIGHBAUGH Chan:091

State: IN Cnty: STARKE Twp: WAYNE
Cityname: NORTH JUDSON Inside: N Near: Y
Subdivision:

Address : 5298
Street : W 800 S
Cross 1 : IN RT 39 Within 1/4 mile: N
Location: LOCATE EASTSIDE OF THE HOUSE TO THE ROAD----WHERE THE ACCESS IS
:
Grids : 4111D8648D 4111D8648C

Work type : REMODEL
Done for : STEVEN WORKMAN
Start date: 08/27/2012 Time: 14:15 Hours notice: 96/048 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 2 DAYS Depth: UNKNOWN

Company : STEVEN WORKMAN Type: HOME
Co addr : 5298 W 800 S
City : NORTH JUDSON State: IN Zip: 46366
Caller : STEVEN WORKMAN Phone: (574)806-7988
Contact : NONE Phone:
BestTime:
Email : SWORKMAN80@YAHOO.COM

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

Submitted date: 08/23/2012 Time: 13:55
Members: ID2034 ID2511 NIPSCO ID5857

SECOND NOTICE 2ND NOTICE

Ticket : 1208232063 Date: 08/24/2012 Time: 21:44 Oper: JCARTER Chan:021
Old Tkt: 1208232063 Date: 08/23/2012 Time: 13:55 Oper: DHIGHBAUGH Rev: 00A

State: IN Cnty: STARKE Twp: WAYNE
Cityname: NORTH JUDSON Inside: N Near: Y
Subdivision:

Address : 5298
Street : W 800 S
Cross 1 : IN RT 39 Within 1/4 mile: N
Location: LOCATE EASTSIDE OF THE HOUSE TO THE ROAD----WHERE THE ACCESS IS
:
Grids : 4111D8648D 4111D8648C

Work type : REMODEL
Done for : STEVEN WORKMAN
Start date: 08/27/2012 Time: 14:15 Hours notice: 64/007 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 2 DAYS Depth: UNKNOWN

Company : STEVEN WORKMAN Type: HOME
Co addr : 5298 W 800 S
City : NORTH JUDSON State: IN Zip: 46366
Caller : STEVEN WORKMAN Phone: (574)806-7988
Contact : NONE Phone:
BestTime:
Email : SWORKMAN80@YAHOO.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time
PER STEVEN WORKMAN - ONLY ELECTRIC COMPANY NEEDS TO RESPOND TO THIS REQUEST TO
RETURN AND COMPLETE MARKING TO THE ROAD ASAP
Will you be white-lining the dig site area? NO
:

Submitted date: 08/24/2012 Time: 21:44
Members: ID2034 ID2511 NIPSCO ID5857