



Pipeline Safety Division Investigation Report

Investigation regarding: S And T Bancroft Electric Inc

UPPAC Database Record ID: 4221

Report Date: 04/05/2013

Investigator: Howard Friend

Damage Date: 11/16/2012 11:20:23 AM

Damage Address: N West St, Mishawaka, St Joseph County

The Parties

Excavator: S And T Bancroft Electric Inc (Contractor)

Address: 25020 State Road 2, South Bend, In 46619

Facility Owner: NIPSCO

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Electric

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 15

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes

Indiana 811 Ticket Number: 1211050047

Original Start Date:

Locate Instructions: FROM THE ABOVE INTERSECTION LOCATE GOING BOTH NORTH AND SOUTH ALONG THE EAST SIDE OF NORTH WEST STREET FOR APPROX 300 FEET

Follow-Up Locate Instructions (if applicable):

Synopsis: A natural gas main was damaged during excavation to install an electric line.

Findings: Reported by Indiana 811; excavator's response to initial notice was received on 3/7/2013. Operator reported that excavator indicated there would be no excavation where the damage actually occurred. Regardless, the excavator failed to pothole and expose the main in sufficient places to avoid damage.

Conclusion: Excavator failed to maintain the required clearance from the gas facility with mechanized equipment.

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



150 West Market Street, Suite 600
Indianapolis, IN 46204

March 6, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4221
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4221

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: 11/16/2012

Event Location: N West St

City: Mishawaka

Facility Owner: Northern Indiana Public Service Company

Excavator: S And T Bancroft Electric Inc

Other Party: N/A

Pipeline Division Case No. 4221

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. 4221	
Date of Event	11/16/2012
Event Location	N West St
Event City	Mishawaka
Facility Owner	Northern Indiana Public Service Company
Excavator	S And T Bancroft Electric Inc
Date of IURC Information Request	2/13/2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	S&T Bancroft Electric Inc
RESPONSIBLE PARTY PERSONAL NAME	Gene Mann
TITLE (IF ANY)	
ADDRESS	25020 SR 2
CITY/ STATE/ZIP	South Bend, IN 46619
PREFERRED TELEPHONE	574-968-2040
CELL PHONE TELEPHONE	574-532-6640
EMAIL ADDRESS	gene@stbancroft.com
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	1-317-538-7301
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	N West St
CITY/STATE/ZIP	Mishawaka, IN 46544
NEAREST INTERSECTION	W 1 st St
PRODUCT TYPE (Select One)	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
FACILITY TYPE (Select One)	
DISTRIBUTION	X
GATHERING	
SERVICE/DROP	
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	2
PRESSURE (PSIG/INCHES)	35
INTERRUPTION IN SERVICE (YES/NO)	YES
NUMBER OF CUSTOMERS AFFECTED	15
EVACUATION (YES/NO)	NO
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	

Trencher	
Vacuum Equipment	
Unknown/Other	
TYPE OF WORK PERFORMED (Select One)	
Agriculture	
Cable TV	
Curb/Sidewalk	
Bldg. Construction	
Bldg. Demolition	
Drainage	
Driveway	
Electric	X
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)	YES
IGNITION AND/OR FIRE (YES/NO)	NO
EXCAVATOR NOTIFY 811 (YES/NO)	YES- 1211161242
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	YES

INDIANA 811 LOCATE TICKET NUMBER	1211050047
LOCATE MARKS VISIBLE (YES/NO)	YES
LOCATE MARKS CORRECT (YES/NO)	YES
EXCAVATOR "WHITE LINED" (YES/NO)	NO
MAPS USED TO MARK FACILITIES (YES/NO)	YES
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	NO
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 NIPSCO Emergency Repair Ticket# 1211161420</p>	

Fact Based Investigation Report

NOTIFICATION ID: 01820121116005 DISTRICT: Northern IN
DAMAGE DATE: 11/16/2012 11:20:25 AM NOTIFICATION DATE: 11/16/2012 11:25:16 AM
NOTIFIED BY: GENE MANN
DAMAGE ADDRESS: N WEST ST
CITY: MISHAWAKA ST: IN ZIP:

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 11/16/2012
FROM: 12:00:00 TO: 14:35:00

EXCAVATOR INVOLVED: S & T BANCROFT
TYPE OF EXCAVATION: TRENCHING FOR CONDUIT

ORIG. LOCATE REQ.: 1211050047 START DATE/TIME: 11/8/2012 12:00:00 AM
TYPE OF TICKET: Routine LOCATE REQ. INFO N/A:

DIG UP/DAMAGE REQ.: 1211161242 START DATE/TIME: 11/16/2012 12:00:00 AM

PICTURES TAKEN BY: B ARENS DATE/TIME: 11/16/2012 1:00:00 PM
PHOTOGRAPHY TYPE: Digital FRAME #:

INVESTIGATOR EMP#: 113463 INVESTIGATOR NAME: BRIAN ARENS
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01820121116005
SELECT A CUSTOMER: NIPSCO
CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF FACILITY ID: Gas Main
LOCATOR NAME & EMP #: Galicia Jose - 131981
LOCATOR NOT KNOWN:

CHECK ALL THAT APPLY TO INVESTIGATION:
Facility Marked Accurately,
Contractor Dug Outside Marking Instructions

Other:

CHECK ALL THAT APPLY TO METHOD OF INVESTIGATION (at least one must be checked):
Visual, Facility Exposed At Time Of Investigation,
Investigator Verified Existing Marks By Hooking Up,
Investigation Results Verified By Utility Representative

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

SEE TR# 1211161242 FOR ALL DAMAGE PHOTOS INCLUDING PHOTOS OF MEET SHEET WHERE CONTR STATES 'NO NEED TO MARK' IN AREA WHERE HE DAMAGED THE 2" PL GAS MAIN BECAUSE HE WOULD NOT BE DIGGING HERE. SEE TR# 1211072770 FOR POST LOCATE PHOTOS. CONTR TRENCHED INTO THE NIPSCO OWNED 2" GAS MAIN ON THE EAST SIDE OF WEST STREET NORTH OF 1ST ST. THE MAIN WAS PAINTED AND FLAGGED ACCURATELY. THE SINGLE PHASE MAIN FEEDS A CONDO COMPLEX, WHERE IT DEAD ENDS.

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:
DAVE AND ROBERT HAYWOOD. BOTH AGREED THE MAIN WAS MARKED ACCURATELY.

NAMES OF EXCAVATOR'S REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:
FOREMAN, STATED THE MAIN WAS 5' DEEP AT THE SOUTH END OF THE STREET AND 'FIGURED IT WAS 5' EVERYWHERE (MAIN WAS LESS THAN 2' AT THE DAMAGE SPOT)

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 VERY LARGE RIP IN THE MAIN

REPLACEMENT FOOTAGE 6'

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO? No NA

WHAT CONTRACTOR EQUIPMENT WAS USED? NA

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? Yes

IF YES, PLEASE LIST RECORD #(S) ARC READER

Facility: Transmission Lines; Folder: N/A; Assigned To: N/A

NIPSCO 00013 IUPPSa 11/05/2012 06:43:38 1211050047-00A NORM NEW STRT

NORMAL NOTICE

Ticket : 1211050047 Date: 11/05/2012 Time: 06:37 Oper: JSMITH Chan:088

State: IN Cnty: ST JOSEPH Twp: PENN
Cityname: MISHAWAKA Inside: Y Near: N
Subdivision:

Address :
Street : N WEST ST
Cross 1 : W 1ST ST Within 1/4 mile: Y
Location: FROM THE ABOVE INTERSECTION LOCATE GOING BOTH NORTH AND SOUTH ALONG
THE EAST SIDE OF NORTH WEST STREET FOR APPROX 300 FEET
:
Grids : 4139B8611D 4139A8611D
Boundary: n 41.663609 s 41.660538 w -86.186737 e -86.185242

Work type : INSTALLING CONDUIT/LIGHT BASE FOUNDATION
Done for : C AND E EXCAVATING
Start date: 11/08/2012 Time: 07:00 Hours notice: 72/48 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 3 WEEKS Depth: 4 FEET

Company : S AND T BANCROFT ELECTRIC INC Type: CONT
Co addr : 25020 STATE ROAD 2
City : SOUTH BEND State: IN Zip: 46619
Caller : GENE MANN Phone: (574)968-2040
Contact : GENE MANN--CELL Phone:
BestTime:
Mobile : (574)532-6640
Fax : (574)968-2045
Email : GENE@STBANCROFT.COM

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

Submitted date: 11/05/2012 Time: 06:37
Members: COMCN ID1639 ID1640 ID5121 ID6590 NIPSCO SBCIN SM

Facility: Transmission Lines; Folder: N/A; Assigned To: N/A

NIPSCO 00414 IUPPSa 11/16/2012 11:20:25 1211161242-00A EMER DAMG STRT

DAMAGE SEE REMARKS

Ticket : 1211161242 Date: 11/16/2012 Time: 11:15 Oper: DMEYER Chan:034

State: IN Cnty: ST JOSEPH Twp: PENN
Cityname: MISHAWAKA Inside: Y Near: N
Subdivision:

Address :

Street : N WEST ST

Cross 1 : W 1ST ST Within 1/4 mile: Y

Location: FROM THE ABOVE INTERSECTION LOCATE GOING BOTH NORTH AND SOUTH ALONG
THE EAST SIDE OF NORTH WEST STREET FOR APPROX 300 FEET

:

Grids : 4139B8611D 4139A8611D

Boundary: n 41.663609 s 41.660538 w -86.186737 e -86.185242

Work type : INSTALLING CONDUIT/LIGHT BASE FOUNDATION

Done for : C AND E EXCAVATING

Start date: 11/16/2012 Time: 11:15 Hours notice: 0/0 Priority: EMER

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

Duration : 3 WEEKS Depth: 4 FEET

Company : S AND T BANCROFT ELECTRIC INC Type: CONT

Co addr : 25020 STATE ROAD 2

City : SOUTH BEND State: IN Zip: 46619

Caller : GENE MANN Phone: (574)968-2040

Contact : GENE MANN--CELL Phone:

BestTime:

Mobile : (574)532-6640

Fax : (574)968-2045

Email : GENE@STBANCROFT.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time
PER GENE MANN --- A NIPSCO GAS LINE HAS BEEN HIT --- THE GAS IS BLOWING ---
COULD SMELL AND HEAR IT --- DIGGING 100 FEET NORTH OF THE INTERSECTION BEHIND
THE CURB --- 2 INCH PLASTIC - COLOR MAUVE --- HAVE NOT CALLED 911 --- CREW IS
STILL ON SITE --- NIPSCO HAS BEEN CALLED --- PREVIOUS TICKET 1211050047
Will you be white-lining the dig site area? NO

:

Submitted date: 11/16/2012 Time: 11:15

Members: COMCN ID1639 ID1640 ID5121 ID6590 NIPSCO SBCIN SM

Facility: Transmission Lines; Folder: N/A; Assigned To: N/A

NIPSCO 00463 IUPPSa 11/16/2012 11:53:40 1211161420-00A EMER NEW STRT

EMERGENCY SEE REMARKS

Ticket : 1211161420 Date: 11/16/2012 Time: 11:49 Oper: SHARRIS Chan:089

State: IN Cnty: ST JOSEPH Twp: PENN
Cityname: MISHAWAKA Inside: Y Near: N
Subdivision:

Address :
Street : W 1ST ST
Cross 1 : N WEST ST Within 1/4 mile: Y
Location: LOCATE A 200 FOOT RADIUS OF THE INTERSECTION
:
Grids : 4139B8611D 4139A8611D
Boundary: n 41.662636 s 41.661537 w -86.186722 e -86.185257

Work type : REPAIR GAS LINE
Done for : NIPSCO
Start date: 11/16/2012 Time: 11:51 Hours notice: 0/0 Priority: EMER
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y
Duration : 1 DAY Depth: 6 FEET

Company : NIPSCO Type: MEMB
Co addr : 801 EAST 86TH AVENUE
City : MERRILLVILLE State: IN Zip: 46410
Caller : TANECIA GHOLSTON Phone: (800)322-2806
Contact : RICH WAHLGREN - CELL Phone:
BestTime:
Mobile : (574)360-9736

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

Submitted date: 11/16/2012 Time: 11:49
Members: COMCN ID1639 ID1640 ID5121 ID6590 NIPSCO SBCIN SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA South Bend MAXIMO WO # _____
OPERATING AREA CONTACT Tim Armstrong JOB ORDER # 589691
TRACKING NUMBER 018 2012 1116 006 LOCATE REF # 1211050047
Locate Performed By: _____

DATE AND TIME OF ACCIDENT November 16 2012 1111A M DATE OF REPORT 16 NOV 12
PLACE OF DAMAGE (INCLUDE CITY) 1st & West Mishawaka

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

OTHER (DESCRIBE) _____

GAS: SERVICE () MAIN SIZE 2" MATERIAL: PLASTIC STEEL () METER () REG STATION () STUB ()
OTHER (DESCRIBE) _____

DEPTH OF FACILITY (inches) 21" 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: 15

DURATION OF INTERRUPTION: TIME REPORTED 1111AM TIME SHUT OFF 1240PM TIME RESTORED 1530 hrs

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 8" X 2" GAS H

LOCATE MARKS ON SITE: YES DISTANCE BETWEEN FACILITY AND LOCATE MARKS within 26" NO ()
HOW LOCATED: PAINT FLAGS () BOTH () WHITE LINED ()

PARTY THAT CAUSED DAMAGES (NAME) Bancroft Electric

ADDRESS OF PARTY (INCLUDE CITY) 25020 STATE RD 2

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE Gene Mann

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 type="checkbox"/> BLDG CONSTRUCTION | <input type="checkbox"/> DEMOLITION | <input type="checkbox"/> DRAINAGE | <input type="checkbox"/> WATER |
| <input type="checkbox"/> DRIVEWAY | <input checked="" type="checkbox"/> ELECTRIC | <input type="checkbox"/> SURVEYING | <input type="checkbox"/> DRAINS/CULVERTS |
| <input type="checkbox"/> FENCING | <input type="checkbox"/> GRADING | <input type="checkbox"/> IRRIGATION | <input type="checkbox"/> MOWING |
| <input type="checkbox"/> LANDSCAPING | <input type="checkbox"/> PIPELINE | <input type="checkbox"/> MILLING | <input type="checkbox"/> OTHER _____ |
| <input type="checkbox"/> POLE/SIGN POST | <input type="checkbox"/> ROAD WORK | <input type="checkbox"/> SEWER | |

- TYPE OF EQUIPMENT USED** - CHECK APPROPRIATE CHOICE BELOW
- | | | |
|--------------------------------------------|-----------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> AUGER | <input type="checkbox"/> HAND TOOLS | <input checked="" type="checkbox"/> BACKHOE/TRACKHOE |
| <input type="checkbox"/> MILLING EQUIPMENT | <input type="checkbox"/> PROBING DEVICE | <input type="checkbox"/> BORING / DRILLING |
| <input type="checkbox"/> EXPLOSIVES | <input type="checkbox"/> TRENCHER | <input type="checkbox"/> FARM EQUIPMENT |
| <input type="checkbox"/> VACCUUM EQUIPMENT | <input type="checkbox"/> GRADER | <input type="checkbox"/> OTHER _____ |

- REASON DAMAGE OCCURRED** - CHECK APPROPRIATE CHOICE BELOW
- | | | |
|----------------------------------------------|--------------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> AUTOMOTIVE ACCIDENT | <input type="checkbox"/> EXCAVATING BEFORE LOCATES DUE | <input type="checkbox"/> CARELESS MACHINE OPERATOR |
| <input type="checkbox"/> NO NOTIFICATION | <input type="checkbox"/> MARKS DISTURBED | <input type="checkbox"/> STUB |
| | | <input checked="" type="checkbox"/> OTHER <u>Failure To Hand Dig</u> |

COMMENTS :

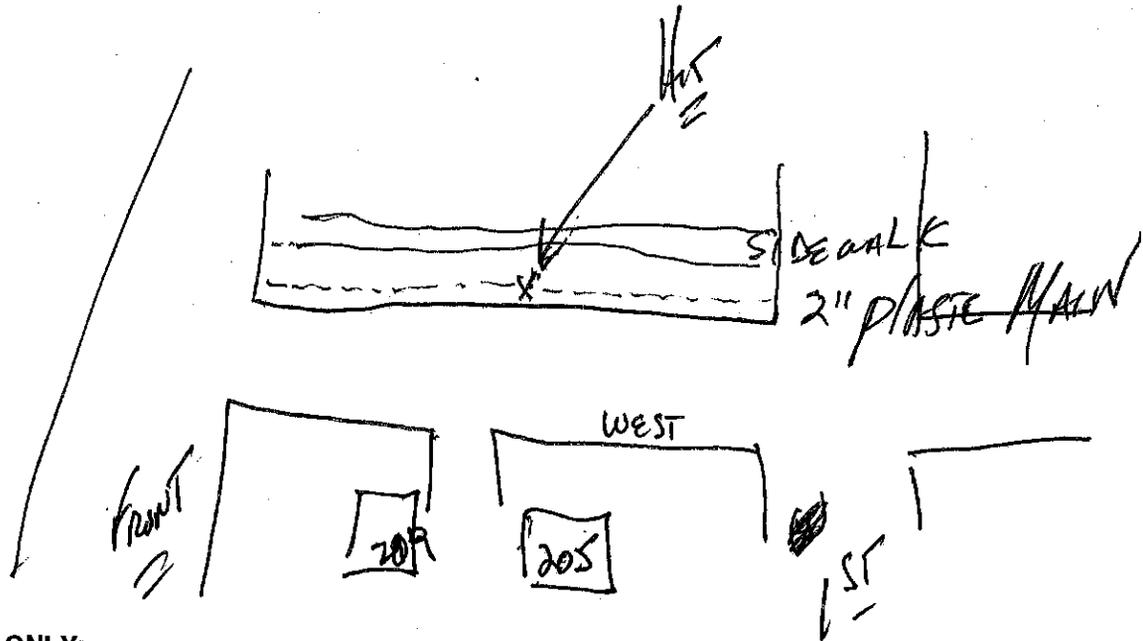
PERSON PREPARING REPORT DAVID STEARNS

FIELD SUPERVISOR Tim C

FIELD MANAGER R. Gray

- 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: _____



Property of United States Infrastructure Corporation
Photo taken on 11/04/2012 12:50:29 PM



Property of United States Infrastructure Corporation
Photo taken on 11/06/2012 12:45:34 PM

ERROR: undefined
OFFENDING COMMAND: get

STACK:

/quit
-dictionary-
-mark-