



INDIANA UTILITY REGULATORY COMMISSION  
101 W. WASHINGTON STREET, SUITE 1500E  
INDIANAPOLIS, INDIANA 46204-3407

<http://www.in.gov/iurc>  
Office: (317) 232-2701  
Facsimile: (317) 232-6758

## Pipeline Safety Division Investigation Report

### Investigation regarding: Mark Temple Tree Service

UPPAC Database Record ID: 4250

Report Date: 3/26/2013

Investigator: Howard Friend

Damage Date: 11/28/2012 2:36:03 PM

Damage Address: 803 Northwood Dr, South Bend, St Joseph

### The Parties

Excavator: **Mark Temple Tree Service**

Address: 28296 Inwood Road, North Liberty, In 46554

Facility Owner: **NIPSCO**

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Unknown/Other

Type of Work Performed: Landscaping

### 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: No

Indiana 811 Ticket Number:

Original Start Date:

Locate Instructions: Locate-- the east side of the property

Follow-Up Locate Instructions (if applicable):

**Synopsis:** A natural gas service was damaged while grinding tree stumps in preparation to plant a tree.

**Findings:** Reported by Indiana 811; excavator's response to initial notice was received on 2/21/2013. The excavator was using mechanized equipment and failed to provide notice of excavation.

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

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



150 West Market Street, Suite 600  
Indianapolis, IN 46204

March 7, 2013

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

Pipeline Safety Division – Case No. 4250  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4250

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: 11/28/2012

Event Location: 803 Northwood Dr

City: South Bend

Facility Owner: Northern Indiana Public Service Company

Excavator: Mark Temple Tree Service

Other Party: N/A

Pipeline Division Case No. 4250

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. 4250</b>	
Date of Event	11/28/2012
Event Location	803 Northwood Dr
Event City	South Bend
Facility Owner	Northern Indiana Public Service Company
Excavator	Mark Temple Tree Service
Date of IURC Information Request	2/13/2013
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	Mark Temple Tree Service
RESPONSIBLE PARTY PERSONAL NAME	Mark Temple
TITLE (IF ANY)	Owner
ADDRESS	28296 Inwood Rd
CITY/ STATE/ZIP	North Liberty, IN 46554
PREFERRED TELEPHONE	574-232-2700
CELL PHONE TELEPHONE	
EMAIL ADDRESS	marktempletree@aol.com
<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	1-317-538-7301
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	803 Northwood Dr
CITY/STATE/ZIP	South Bend, IN 46617
NEAREST INTERSECTION	Campeau 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
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	1 1/8"
PRESSURE (PSIG/INCHES)	35
INTERRUPTION IN SERVICE (YES/NO)	YES
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	NO
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	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trencher	
Vacuum Equipment	
Unknown/Other	X
<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	X
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 1211282220
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	NO

INDIANA 811 LOCATE TICKET NUMBER	N/A
LOCATE MARKS VISIBLE (YES/NO)	N/A
LOCATE MARKS CORRECT (YES/NO)	N/A
EXCAVATOR "WHITE LINED" (YES/NO)	NO
MAPS USED TO MARK FACILITIES (YES/NO)	N/A
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	NO
<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>No notification made to the one-call center  NIPSCO Emergency Repair Ticket# 1211282474</p>	



NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:  
n/a

NAMES OF EXCAVATOR'S REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:  
n/a

LIST ANY OTHER INDIVIDUALS ON SITE:  
n/a

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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 n/a

REPLACEMENT FOOTAGE n/a

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO? No n/a

WHAT CONTRACTOR EQUIPMENT WAS USED? n/a

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? No

IF YES, PLEASE LIST RECORD #(S) n/a

Facility: Distribution Lines; Folder: On-Hold folder; Assigned To: N/A

NIPSCO 00945 IUPPSa 11/28/2012 19:05:36 1211282801-00A NORM NEW STRI

NORMAL NOTICE

Ticket : 1211282801 Date: 11/28/2012 Time: 18:54 Oper: MWALLACE Chan:043

State: IN Cnty: ST JOSEPH Twp: PORTAGE

Cityname: SOUTH BEND Inside: Y Near: N

Subdivision:

Address : 803

Street : NORTHWOOD DR

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

Location: LOCATE THE SOUTH AND NORTH SIDE OF THE DRIVEWAY ON THE PROPERTY

:

Grids : 4141C8613C 4141C8613B 4141D8613C 4141D8613B

Boundary: n 41.687912 s 41.685543 w -86.225266 e -86.223778

Work type : PLANTING A TREE

Done for : TED WILLIS

Start date: 12/03/2012 Time: 07:00 Hours notice: 108/48 Priority: NORM

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

Duration : 1 HOUR Depth: 30 INCHES

Company : MARK TEMPLE TREE SERVICE Type: CONT

Co addr : 28296 INWOOD ROAD

City : NORTH LIBERTY State: IN Zip: 46554

Caller : MARK TEMPLE Phone: (574)232-2700

Contact : MARK TEMPLE - CELL Phone:

BestTime:

Mobile : (574)232-2700

Email : MARKTEMPLETREE@AOL.COM

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

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

:

Submitted date: 11/28/2012 Time: 18:54

Members: AEPIN COMCN ID5610 NIPSCO SBCIN SM

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

NIPSCO 00798 IUPPSa 11/29/2012 14:36:10 1211282220-00A EMER DAMG STRT

DAMAGE SEE REMARKS

Ticket : 1211282220 Date: 11/29/2012 Time: 14:24 Oper: AHUNTER Chan:037

State: IN Cnty: ST JOSEPH Twp: PORTAGE  
Cityname: SOUTH BEND Inside: Y Near: N  
Subdivision:

Address : 803  
Street : NORTHWOOD DR  
Cross 1 : CAMPEAU ST Within 1/4 mile: Y  
Location: LOCATE-- THE EAST SIDE OF THE PROPERTY  
:  
Grids : 4141C8613C 4141C8613B 4141D8613C 4141D8613B  
Boundary: n 41.687912 s 41.685543 w -86.225266 e -86.223778

Work type : STUMP REMOVSAL PLANTING TREE  
Done for : TED WILLIS  
Start date: 11/29/2012 Time: 14:29 Hours notice: 0/0 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 1 DAY Depth: 2 FEET

Company : MARK TEMPLE TREE SERVICE Type: CONT  
Co addr : 28296 INWOOD ROAD  
City : NORTH LIBERTY State: IN Zip: 46554  
Caller : MARK TEMPLE Phone: (574)232-2700  
Contact : MARK TEMPLE--CELL Phone:  
BestTime:  
Mobile : (574)232-2700  
Email : MARKTEMPLETREE@AOL.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
A NIPSCO GAS LINE HAS BEEN HIT ON THE EAST SIDE OF THE PROPERTY-- GAS LINE IS  
BLOWING-- LINE CANNOT BE SEEN SO SIZE MATERIAL AND COLOR ARE UNKNOWN-- CALLER  
HAS BEEN ADVISED TO CALL 911-- CREW ON SITE-- CALLER HAS BEEN ADVISED TO REPORT  
THE DAMAGE TO THE UTILITY COMPANY-- NO PREVIOUS TICKET NUMBER-- THANK YOU  
Will you be white-lining the dig site area? NO  
:

Submitted date: 11/29/2012 Time: 14:24  
Members: AEPIN COMCN ID5610 NIPSCO SBCIN SM

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

NIPSCO 00859 IUPPSa 11/28/2012 15:36:42 1211282474-00A EMER NEW STRT

EMERGENCY SEE REMARKS

Ticket : 1211282474 Date: 11/28/2012 Time: 15:32 Oper: MPLUMMER Chan:040

State: IN Cnty: ST JOSEPH Twp: PORTAGE  
Cityname: SOUTH BEND Inside: Y Near: N  
Subdivision:

Address : 803  
Street : NORTHWOOD DR  
Cross 1 : CAMPEAU ST Within 1/4 mile: Y  
Location: LOCATE ENTIRE PROPERTY  
:  
Grids : 4141C8613C 4141C8613B 4141D8613C 4141D8613B  
Boundary: n 41.687912 s 41.685543 w -86.225266 e -86.223778

Work type : REPAIR GAS LINE  
Done for : NIPSCO  
Start date: 11/28/2012 Time: 15:35 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 E 86TH AVE  
City : MERRILLVILLE State: IN Zip: 46410  
Caller : MARCIA KING Phone: (800)322-2806  
Contact : GARY DODGE - CELL Phone:  
BestTime:  
Mobile : (574)876-6040  
Fax : (219)647-4764

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

Submitted date: 11/28/2012 Time: 15:32  
Members: AEPIN COMCN ID5610 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 T. ARMSTRONG JOB ORDER # 575930  
TRACKING NUMBER 01820121128012 LOCATE REF # \_\_\_\_\_  
Locate Performed By: \_\_\_\_\_

DATE AND TIME OF ACCIDENT 11/28/12 14:23 2012 M DATE OF REPORT 11/28/12  
PLACE OF DAMAGE (INCLUDE CITY) 803 NORTHWOOD DR SOUTH BEND

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

OTHER (DESCRIBE) \_\_\_\_\_

GAS: SERVICE  MAIN ( ) SIZE 1 1/8 MATERIAL: PLASTIC  STEEL ( ) METER ( ) REG STATION ( ) STUB ( )  
OTHER (DESCRIBE) \_\_\_\_\_

DEPTH OF FACILITY (inches) 14 PRESSURE (PSI) 35 Lbs.

RELEASE OF GAS: YES  NO ( ) IGNITION OF GAS: YES ( ) NO  EVACUATION REQUIRED: YES  # 2 NO ( )

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

DURATION OF INTERRUPTION: TIME REPORTED 14:23 TIME RESTORED 16:23

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 1 1/8

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

PARTY THAT CAUSED DAMAGES (NAME) MARK Temple TREE

ADDRESS OF PARTY (INCLUDE CITY) 28296 Inwood RD North Liberty, IN 46554

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE MARK Temple 574-232-2700

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

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

AGENCIES NOTIFIED / ONSITE: POLICE ( ) AGENCY \_\_\_\_\_ REPORT # \_\_\_\_\_  
FIRE  AGENCY South Bend 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 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 checked="" 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 type="checkbox"/> GRADER         | <input checked="" 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 type="checkbox"/> NO NOTIFICATION                | <input type="checkbox"/> MARKS DISTURBED               | <input type="checkbox"/> STUB                      |
|   |  | <input type="checkbox"/> OTHER _____               |

COMMENTS :

TREE COMPANY DID NOT CALL IN LOCATES  
locate ticket# 1211282801 called in same day as damage

PERSON PREPARING REPORT

Scott W Olds

FIELD SUPERVISOR

RICHARD G WAHLER

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: \_\_\_\_\_



**INFORMATION REQUEST**

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

RECEIVED

FEB 21 2013

INDIANA UTILITY  
REGULATORY COMMISSION

Case Number: 4250

*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 TEMPLE TREE SERVICE

Responsible Party Personal Name: MARK TEMPLE

Title (if any): OWNER

Address (number and street): 28296 Inwood rd

City, State and ZIP Code: North Liberty IN 46554

Preferred Telephone Number (area code): 574-232-2700

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: marktempletree@aol.com

**Facility Information:**

Business Name: Same

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): Unknown/Other

Type of Work Performed (select one): Unknown/Other

**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): 803 Northwood dr

City, State and ZIP Code: South Bend IN 46619

Nearest Intersection: Corby Blvd

Product Type (select one): Natural Gas

Facility Type (select one): Service/Drop

Size (Diameter/etc.): 3/4"

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

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

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

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

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: \_\_\_\_\_

- 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

**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**

Our companies protocols were not meet at this site. We were planting 1 tree in an area with several surface roots. our employee used a stump grinder to remove the surface root, when he keep grinding deeper another employee tried to stop him. That's when gas service was struck. The employee was pulled aside , and reprimanded. All Of our employees have sense completed IURC education and training seminars. (this was the first invite we have received on the training seminar in our companies existence) We will make the program an annul part of our safety programs. It has helped employee understanding of pipeline safety and company protocols . Our company and crew have no desire to repeat the incident . We will continue to mark all sites and crews have been told not to start jobs that have not been flagged yet.

**NARRATIVE STATEMENT**

Your Pipeline Safety Division Case Number: 4250

Your Full Name: Mark Temple

Full Name of Business / Entity (if applicable): Mark Temple Tree Service

Your Business Title (if applicable): Owner

Address (number and street): 28296 Inwood Rd

City: North Liberty State: IN ZIP Code: 46554

Your E-mail Address: marktempletree@aol.com

Today's Date (month, day, year): 2-18-13

Your Signature: Mark Temple Title (if any) Owner

Please return your Narrative Statement to:

**Pipeline Safety Division – Case Number 4250**  
**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)