



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: Emc Enterprises Llc

UPPAC Database Record ID: 4251

Report Date: 7/29/2013

Investigator: Mike Orr

Damage Date: 11/29/2012 2:05:36 PM

Damage Address: 107 E Main St, Peru, Miami

The Parties

Excavator: **Emc Enterprises Llc**

Address: 13236 Lorenzo Blvd, Carmel, In 46074

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Auger

Type of Work Performed: Fencing

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: 1211161996

Original Start Date:

Locate Instructions: LOCATE THE BACK YARD

Follow-Up Locate Instructions (if applicable):

Synopsis: Excavator struck and damaged an underground natural gas service while performing fencing work.

Findings: Reported by Indiana 811; excavator did not respond to initial notice mailed 2/14/2013. The excavator had a valid locate and the gas operator provided accurate locate markings; however, the excavator used a power auger damaging the service facility.

Conclusion: There was a failure to maintain two (2) feet clearance.

Violation: IC 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 7, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4251
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4251

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: 11/29/2012

Event Location: 107 E Main St

City: Peru

Facility Owner: Northern Indiana Public Service Company

Excavator: Emc Enterprises Llc

Other Party: N/A

Pipeline Division Case No. 4251

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. 4251	
Date of Event	11/29/2012
Event Location	107 E Main St
Event City	Peru
Facility Owner	Northern Indiana Public Service Company
Excavator	Emc Enterprises Llc
Date of IURC Information Request	2/13/2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	EMC Enterprises LLC
RESPONSIBLE PARTY PERSONAL NAME	Jason Clouse
TITLE (IF ANY)	
ADDRESS	13236 Lorenzo Blvd
CITY/ STATE/ZIP	Carmel, IN 46074
PREFERRED TELEPHONE	317-703-9544
CELL PHONE TELEPHONE	765-327-3006
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	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	107 E Main St
CITY/STATE/ZIP	Peru, IN
NEAREST INTERSECTION	N Huntington 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)	
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) (\$)	
CAUSE OF DAMAGE INFORMATION:	
TYPE OF EQUIPMENT (Select One)	
Auger	X
Backhoe/Trackhoe	
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	
Engineering/Surveying	
Fencing	X
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 1211292185
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	YES

INDIANA 811 LOCATE TICKET NUMBER	1211161996
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	
Failure to use hand tools where required	

Fact Based Investigation Report

NOTIFICATION ID: 01820121129005

DISTRICT: Northern IN

DAMAGE DATE: 11/29/2012 2:05:37 PM

NOTIFICATION DATE: 11/29/2012 2:10:36 PM

NOTIFIED BY: GINDY RIDENOUR

DAMAGE ADDRESS: 107 E MAIN ST

CITY: PERU

ST: IN ZIP:

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 11/29/2012

FROM: 14:30:00

TO: 14:40:00

EXCAVATOR INVOLVED: EMC INTERPRISES

TYPE OF EXCAVATION: FENCE

ORIG. LOCATE REQ: 1211161996

START DATE/TIME:

TYPE OF TICKET:

LOCATE REQ. INFO N/A:

DIG UP/DAMAGE REQ: 1211292185

START DATE/TIME: 11/29/2012 2:05:00 PM

PICTURES TAKEN BY: MIKE CADE

DATE/TIME: 11/29/2012 2:35:00 PM

PHOTOGRAPHY TYPE: Digital

FRAME #: N/A

INVESTIGATOR EMP#: 112151

INVESTIGATOR NAME: MIKE CADE

BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01820121129005

SELECT A CUSTOMER: NIPSCO

CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF

FACILITY ID: Gas Service

LOCATOR NAME & EMP #: Donaldson Tim - 134256

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):

Visual, Facility Exposed At Time Of Investigation

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

MARKS GOOD

NAMES OF UTILITY REPRESENTIVES CONTACTED OR ON SITE AND STATEMENT:
DARRELL WINIFSO "MARKS ARE DEAD ON"

NAMES OF EXCAVATOR'S REPRESENTIVES CONTACTED OR ON SITE AND STATEMENT:
N/A

LIST ANY OTHER INDIVIDUALS ON SITE:
N/A

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

REPLACEMENT FOOTAGE 1

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

NIPSCO 00640 IUPFSA 11/16/2012 14:28:44 1211161996-00A NORM NEW STRI

NORMAL NOTICE

Ticket : 1211161996 Date: 11/16/2012 Time: 14:22 Oper: AGRIGGS Chan:074

State: IN Cnty: MIAMI Twp: PERU
Cityname: PERU Inside: Y Near: N
Subdivision:

Address : 107
Street : E MAIN ST
Cross 1 : N HUNTINGTON ST Within 1/4 mile: Y
Location: LOCATE THE BACK YARD
:
Grids : 4045C8603A 4045C8604D
Boundary: n 40.756451 s 40.754364 w -86.066986 e -86.063644

Work type : INSTALL POST HOLES FOR FENCING
Done for : CINDY RIDENOUR
Start date: 11/20/2012 Time: 14:30 Hours notice: 96/48 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 3 DAYS Depth: UNKNOWN

Company : EMC ENTERPRISES LLC Type: HOME
Co addr : 13236 LORENZO BLVD
City : CARMEL State: IN Zip: 46074
Caller : CINDY RIDENOUR Phone: (317)703-9544
Contact : CINDY RIDENOUR - CELL Phone:
BestTime:
Mobile : (765)327-3006

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

Submitted date: 11/16/2012 Time: 14:22
Members: ID3651 ID3652 ID6633 NIPSCO SBCIN SM

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

NIPSCO 00653 IUPPSa 11/29/2012 14:05:37 1211292185-00A EMER DAMG STRT

DAMAGE SEE REMARKS

Ticket : 1211292185 Date: 11/29/2012 Time: 14:04 Oper: SPOPE Chan:044

State: IN Cnty: MIAMI Twp: PERU
Cityname: PERU Inside: Y Near: N
Subdivision:

Address : 107
Street : E MAIN ST
Cross 1 : N HUNTINGTON ST Within 1/4 mile: Y
Location: LOCATE THE BACK YARD
:
Grids : 4045C8603A 4045C8604D
Boundary: n 40.756451 s 40.754364 w -86.066986 e -86.063644

Work type : INSTALL POST HOLES FOR FENCING
Done for : CINDY RIDENOUR
Start date: 11/29/2012 Time: 14:04 Hours notice: 0/0 Priority: EMER
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y
Durstion : 3 DAYS Depth: UNKNOWN

Company : EMC ENTERPRISES LLC Type: HOME
Co addr : 13236 LORENZO BLVD
City : CARMEL State: IN Zip: 46074
Caller : CINDY RIDENOUR Phone: (317)703-9544
Contact : CINDY RIDENOUR - CELL Phone:
BestTime:
Mobile : (765)327-3006

Remarks : All tickets are taken and processed on Eastern Daylight Time
NIPSCO GAS LINE HAS BEEN CUT--LINE IS BLOWING--FIRE DEPT ON SITE--LINE WAS CUT
AT REAR OF PROPERTY--SIZE/COLOR UNKNOWN--CREW ON SITE--PREV TICKET
1211161996--THANK YOU
Will you be white-lining the dig site area? NO
:

Submitted date: 11/29/2012 Time: 14:04
Members: ID3651 ID3652 ID6633 NIPSCO SBCIN SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA Perrin MAXIMO WO # M617411 / M617456
OPERATING AREA CONTACT J. Panther JOB ORDER # 593304-17
TRACKING NUMBER 01820121129 LOCATE REF # _____
Locate Performed By: _____

DATE AND TIME OF ACCIDENT 11/29/12 14030 M DATE OF REPORT 11/29/12
PLACE OF DAMAGE (INCLUDE CITY) 107 E. Main Perrin IN 46970

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) _____ 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 2:10 3pm TIME SHUT OFF 2:30 TIME RESTORED _____

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

LOCATE MARKS ON SITE: YES DISTANCE BETWEEN FACILITY AND LOCATE MARKS 0 NO ()

HOW LOCATED: PAINT () FLAGS () BOTH () WHITE LINED ()

PARTY THAT CAUSED DAMAGES (NAME) EMC Enterprise / Lowe's

ADDRESS OF PARTY (INCLUDE CITY) 13236 Lorenzo Blvd Carmel IN 46074

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE Jason Clouse

WITNESS NAME AND ADDRESS _____

WITNESS REMARKS _____

AGENCIES NOTIFIED / ONSITE: POLICE () AGENCY _____ REPORT # _____

FIRE AGENCY Perrin Fire Dept. 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 checked="" 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 checked="" 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 type="checkbox"/> OTHER _____ |

REASON DAMAGE OCCURRED - CHECK APPROPRIATE CHOICE BELOW

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

• SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

COMMENTS:

Failed to hand dig

PERSON PREPARING REPORT

Daryl Tague

FIELD SUPERVISOR

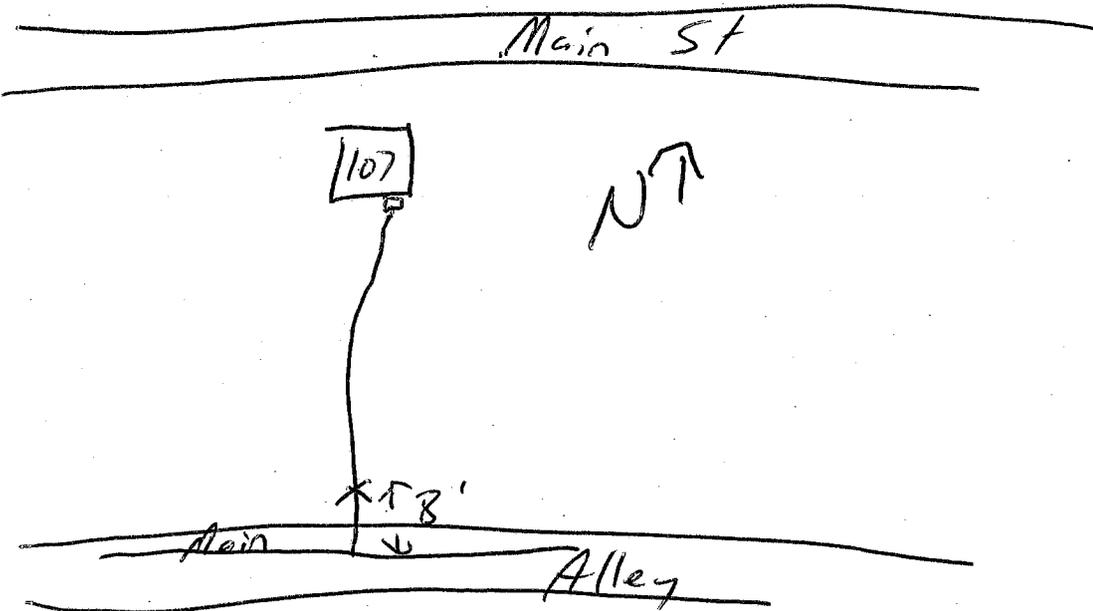
D. Palmer

FIELD MANAGER

D. Salmons

- 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:

Daryl Tague

DATE:

11/25/12



Property of United States Infrastructure Corporation
Photo taken on 11/29/2012 2:28:01 PM