



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: Nipsco

UPPAC Database Record ID: 4255

Report Date: 7/12/2013

Investigator: Mike Orr

Damage Date: 11/30/2012 1:48:46 PM

Damage Address: 9441 Sheffield Ave, Dyer, Lake

The Parties

Excavator: Nipsco

Address: 20 South Joseph Street, Crown Point, In 46307

Facility Owner: NIPSCO

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Unknown/Other

Type of Equipment: Trencher

Type of Work Performed: Electric

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: False

Number of Customers Affected: 0

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes

Indiana 811 Ticket Number: 1211270969

Original Start Date:

Locate Instructions: LOCATE THE ENTIRE PROPERTY -- PLEASE PAINT AND FLAG

Follow-Up Locate Instructions (if applicable):

Synopsis: Excavator struck and damaged an underground natural gas live service stub while performing electric work.

Findings: Reported by Indiana 811; excavator's response to initial notice was received on 3/15/2013. The excavator had a valid locate ticket; however, the gas operator self reported a failure to locate the unknown live gas stub due to incorrect maps and records.

Conclusion: There was a failure to provide locate markings of the live unknown gas stub.

Violation: IC 8-1-26-18(f) Operator failed to locate or provided incorrect locate markings.



150 West Market Street, Suite 600
Indianapolis, IN 46204

March 7, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4255
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4255

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: 11/30/2012

Event Location: 9441 Sheffield Ave

City: Dyer

Facility Owner: Northern Indiana Public Service Company

Excavator: Nipsco

Other Party: N/A

Pipeline Division Case No. 4255

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. 4255	
Date of Event	11/30/2012
Event Location	9441 Sheffield Ave
Event City	Dyer
Facility Owner	Northern Indiana Public Service Company
Excavator	Nipsco
Date of IURC Information Request	2/13/2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	NIPSCO
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	20 South Joseph St
CITY/ STATE/ZIP	Crown Point, IN 46307
PREFERRED TELEPHONE	219-877-9115
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	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	9510 Sheffield Ave
CITY/STATE/ZIP	Dyer, IN
NEAREST INTERSECTION	93 rd Ave
PRODUCT TYPE (Select One)	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
FACILITY TYPE (Select One)	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	
TRANSMISSION	
UNKNOWN/OTHER	X in service gas stub
SIZE (DIAMETER/ETC.)	5/8
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	NO
NUMBER OF CUSTOMERS AFFECTED	0
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	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trencher	X
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 1211301718
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	YES

INDIANA 811 LOCATE TICKET NUMBER	1211270969
LOCATE MARKS VISIBLE (YES/NO)	YES
LOCATE MARKS CORRECT (YES/NO)	NO
EXCAVATOR "WHITE LINED" (YES/NO)	NO
MAPS USED TO MARK FACILITIES (YES/NO)	YES
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	YES
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>Facility marking or location not sufficient In service gas stub was not located NIPSCO Emergency repair ticket# 1211301754</p>	

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

NIPSCO 00275 IUPPSa 11/27/2012 10:14:36 1211270969-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1211270969 Date: 11/27/2012 Time: 10:09 Oper: ANINES Chan:075

State: IN Cnty: LAKE Twp: ST JOHN

Cityname: DYER Inside: Y Near: N

Subdivision: ENCLAVE

Address : 9441

Street : SHEFFIELD AVE

Cross 1 : 93RD AVE Within 1/4 mile: Y

Location: LOCATE THE ENTIRE PROPERTY -- PLEASE PAINT AND FLAG

:

Grids : 4126B8730A 4126A8730A 4126B8731D 4126A8731D

Boundary: n 41.448715 s 41.443588 w -87.518135 e -87.514397

Work type : INSTALL ELECTRIC

Done for : NIPSCO

Start date: 11/29/2012 Time: 10:30 Hours notice: 48/48 Priority: NORM

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

Duration : 1 DAY Depth: 6 FEET

Company : NIPSCO Type: MEMB

Co addr : 20 SOUTH JOSEPH STREET

City : CROWN POINT State: IN Zip: 46307

Caller : GAIL NIMON Phone: (219)662-4233

Contact : KELLY HAYS--OFFICE Phone:

BestTime:

Mobile : (219)877-9115

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

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

:

Submitted date: 11/27/2012 Time: 10:09

Members: BE COMCN IB ID6513 NIPSCO SM

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

NIPSCO 00567 IUPPSa 11/30/2012 13:48:57 1211301718-00A EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1211301718 Date: 11/30/2012 Time: 13:46 Oper: KLEWIS Chan:032

State: IN Cnty: LAKE Twp: ST JOHN
Cityname: DYER Inside: Y Near: N
Subdivision: ENCLAVE

Address : 9441
Street : SHEFFIELD AVE
Cross 1 : 93RD AVE Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY -- PLEASE PAINT AND FLAG
:
Grids : 4126A8730A 4126A8731D 4126B8730A 4126B8731D
Boundary: n 41.448715 s 41.443588 w -87.518135 e -87.514397

Work type : INSTALL ELECTRIC
Done for : NIPSCO
Start date: 11/30/2012 Time: 13:46 Hours notice: 0/000 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 : 20 SOUTH JOSEPH STREET
City : CROWN POINT State: IN Zip: 46307
Caller : GAIL NIMON Phone: (219)662-4233
Contact : KELLY HAYS--OFFICE Phone:
BestTime:
Mobile : (219)877-9115

Remarks : All tickets are taken and processed on Eastern Daylight Time
PER DAWN- HIT A NIPSCO GAS SERVICE LINE BY THE CURB - IT IS A BLACK PLASTIC LINE
- IT IS NOT BLOWING IT IS PINCHED OFF - CREW IS ON SITE - ALREADY CONTACTED
NIPSCO FOR REPAIRS - PREVIOUS TICKET NUMBER 1211270969
Will you be white-lining the dig site area? NO
:

Submitted date: 11/30/2012 Time: 13:46
Members: BE COMCN IB ID6513 NIPSCO SM

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

NIPSCO 00580 IUPPSa 11/30/2012 13:55:26 1211301754-00A EMER NEW STRT

EMERGENCY SEE REMARKS

Ticket : 1211301754 Date: 11/30/2012 Time: 13:50 Oper: KLEWIS Chan:032

State: IN Cnty: LAKE Twp: ST JOHN
Cityname: DYER Inside: Y Near: N
Subdivision:

Address : 9510
Street : SHEFFIELD AVE
Cross 1 : W 91ST AVE Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY
:
Grids : 4126A8731D 4126B8731D 4126C8731D
Boundary: n 41.447828 s 41.441381 w -87.518931 e -87.517270

Work type : REPAIR GAS LINE
Done for : NIPSCO
Start date: 11/30/2012 Time: 13:52 Hours notice: 0/000 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 : DAWN GALAMBUS Phone: (800)322-2806
Contact : STAN LEWANDOWSKI - CELL Phone:
BestTime:
Mobile : (219)313-6786

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

Submitted date: 11/30/2012 Time: 13:50
Members: BE COMCN IB ID6513 NIPSCO SM

COMMENTS: This was a long side stub from demolished house - not detected by locator - should have been ret. (I am who retored)

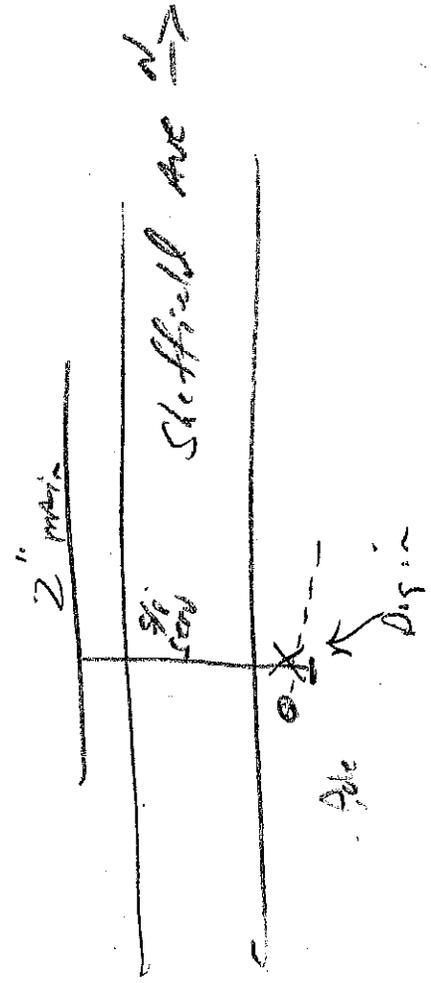
PERSON PREPARING REPORT M. Schussel

FIELD SUPERVISOR F.A. Schussel

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: _____ DATE: _____

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA 030 MAXIMO WO # _____
OPERATING AREA CONTACT M. Schiessle JOB ORDER # 3583972
TRACKING NUMBER 018 2012 1130 008 LOCATE REF # _____
Locate Performed By: _____

DATE AND TIME OF ACCIDENT 11-30-2012, 11:00AM DATE OF REPORT 11-30-12
PLACE OF DAMAGE (INCLUDE CITY) Across the street from 9510 SHEFFIELD AVE DYER

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

GAS: SERVICE MAIN () SIZE 3" MATERIAL: PLASTIC STEEL () METER () REG STATION () STUB ()
OTHER (DESCRIBE) _____
DEPTH OF FACILITY (inches) 26" PRESSURE (PSI) 45 Lbs.
RELEASE OF GAS: YES NO () IGNITION OF GAS: YES () NO EVACUATION REQUIRED: YES () # NO
INTERRUPTION OF SERVICE: YES () NO NUMBER OF CUSTOMERS LOST: 0
DURATION OF INTERRUPTION: TIME REPORTED _____ TIME SHUT OFF _____ TIME RESTORED _____
DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: Cut off end

LOCATE MARKS ON SITE: YES DISTANCE BETWEEN FACILITY AND LOCATE MARKS _____ NO ()
HOW LOCATED: PAINT () FLAGS () BOTH () WHITE LINED ()
PARTY THAT CAUSED DAMAGES (NAME) NIPSCO

ADDRESS OF PARTY (INCLUDE CITY) 20 S. Joseph ST
WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE Const Lane Crew
WITNESS NAME AND ADDRESS J. Payne

WITNESS REMARKS no locates on stub
AGENCIES NOTIFIED / ONSITE: POLICE () AGENCY _____ REPORT # _____
FIRE () AGENCY _____ REPORT # _____
OTHER () _____ Any Injuries? () YES # _____ () NO _____
(ATTACH PHOTOS TO REPORT)

PHOTOS TAKEN: YES () NO TAKEN BY: _____
MEDIA ON SITE YES () NO

WORK IN PROGRESS WHEN FACILITY DAMAGED -- CHECK APPROPRIATE CHOICE BELOW
() AGRICULTURE/FARMING () CABLE TV () CURB/SIDEWALK () TELECOMMUNICATIONS
() BLDG CONSTRUCTION () DEMOLITION () DRAINAGE () WATER ()
() DRIVEWAY () ELECTRIC SURVEYING () SURVEYING () DRAINS/CULVERTS ()
() FENCING () GRADING () IRRIGATION () MOWING ()
() LANDSCAPING () PIPELINE () MILLING () OTHER ()
() POLE/SIGN POST () ROAD WORK () SEWER ()

TYPE OF EQUIPMENT USED -- CHECK APPROPRIATE CHOICE BELOW
() AUGER () HAND TOOLS () BACKHOE/TRACKHOE
() MILLING EQUIPMENT () PROBING DEVICE () BORING / DRILLING ()
() EXPLOSIVES TRENCHER () FARM EQUIPMENT ()
() VACCUUM EQUIPMENT () GRADER () OTHER ()

REASON DAMAGE OCCURRED-- CHECK APPROPRIATE CHOICE BELOW
() AUTOMOTIVE ACCIDENT () EXCAVATING BEFORE LOCATES DUE () CARELESS MACHINE OPERATOR
() NO NOTIFICATION () MARKS DISTURBED () STUB () OTHER ()

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

Mark Schiessle LOA manager for Crown Point stated that USIC is not a fault for this line not being marked. He agreed there was no indicators of its location. NIPSCO actually used this stub to tie in the service they needed to run to the pump station that was being work on. Again, USIC is not at fault.

NAMES OF EXCAVATOR'S REPRESENTATIVES 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? 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 cut in retired stub

REPLACEMENT FOOTAGE n/a

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?

WHAT CONTRACTOR EQUIPMENT WAS USED?

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? No

IF YES, PLEASE LIST RECORD #(S)



150 West Market Street, Suite 600
Indianapolis, IN 46204

March 15, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4255
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Notification of Preliminary Determination of Violation
Date of Event: 11/30/2012
Event Location: 9441 Sheffield Ave
City: Dyer
Facility Owner: Northern Indiana Public Service Company
Excavator: Northern Indiana Public Service Company
Other Party: N/A
Pipeline Division Case No. 4255

To Whom It May Concern:

In response to the Notice of Preliminary Determination, as detailed above, attached please find) written information from Northern Indiana Public Service Company (“NIPSCO”) including both NIPSCO’s operator records relevant to the damage as well as information that addresses the potential statutory violation by NIPSCO as an excavator. The records provided indicate that the long side stub struck by the NIPSCO crew had not been correctly located prior to the excavation.

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 me.

Very truly yours,

A handwritten signature in black ink, appearing to read "Christopher Earle".

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. 4255	
Date of Event	11/30/2012
Event Location	9441 Sheffield Ave
Event City	Dyer
Facility Owner	Northern Indiana Public Service Company
Excavator	Nipsco
Date of IURC Information Request	2/13/2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	NIPSCO
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	20 South Joseph St
CITY/ STATE/ZIP	Crown Point, IN 46307
PREFERRED TELEPHONE	219-877-9115
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	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	9510 Sheffield Ave
CITY/STATE/ZIP	Dyer, IN
NEAREST INTERSECTION	93 rd Ave
PRODUCT TYPE (Select One)	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
FACILITY TYPE (Select One)	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	
TRANSMISSION	
UNKNOWN/OTHER	X in service gas stub
SIZE (DIAMETER/ETC.)	5/8
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	NO
NUMBER OF CUSTOMERS AFFECTED	0
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	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trencher	X
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 1211301718
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	YES

INDIANA 811 LOCATE TICKET NUMBER	1211270969
LOCATE MARKS VISIBLE (YES/NO)	YES
LOCATE MARKS CORRECT (YES/NO)	NO
EXCAVATOR "WHITE LINED" (YES/NO)	NO
MAPS USED TO MARK FACILITIES (YES/NO)	YES
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	YES
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>Facility marking or location not sufficient In service gas stub was not located NIPSCO Emergency repair ticket# 1211301754</p>	

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

NIPSCO 00275 IUPPSa 11/27/2012 10:14:36 1211270969-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1211270969 Date: 11/27/2012 Time: 10:09 Oper: ANINES Chan:075

State: IN Cnty: LAKE Twp: ST JOHN
Cityname: DYER Inside: Y Near: N
Subdivision: ENCLAVE

Address : 9441
Street : SHEFFIELD AVE
Cross 1 : 93RD AVE Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY -- PLEASE PAINT AND FLAG
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Grids : 4126B8730A 4126A8730A 4126B8731D 4126A8731D
Boundary: n 41.448715 s 41.443588 w -87.518135 e -87.514397

Work type : INSTALL ELECTRIC
Done for : NIPSCO
Start date: 11/29/2012 Time: 10:30 Hours notice: 48/48 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 1 DAY Depth: 6 FEET

Company : NIPSCO Type: MEMB
Co addr : 20 SOUTH JOSEPH STREET
City : CROWN POINT State: IN Zip: 46307
Caller : GAIL NIMON Phone: (219)662-4233
Contact : KELLY HAYS--OFFICE Phone:
BestTime:
Mobile : (219)877-9115

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

Submitted date: 11/27/2012 Time: 10:09
Members: BE COMCN IB ID6513 NIPSCO SM

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

NIPSCO 00567 IUPPSa 11/30/2012 13:48:57 1211301718-00A EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1211301718 Date: 11/30/2012 Time: 13:46 Oper: KLEWIS Chan:032

State: IN Cnty: LAKE Twp: ST JOHN
Cityname: DYER Inside: Y Near: N
Subdivision: ENCLAVE

Address : 9441
Street : SHEFFIELD AVE
Cross 1 : 93RD AVE Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY -- PLEASE PAINT AND FLAG
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Duration : 1 DAY Depth: 6 FEET

Company : NIPSCO Type: MEMB
Co addr : 20 SOUTH JOSEPH STREET
City : CROWN POINT State: IN Zip: 46307
Caller : GAIL NIMON Phone: (219)662-4233
Contact : KELLY HAYS--OFFICE Phone:
BestTime:
Mobile : (219)877-9115

Remarks : All tickets are taken and processed on Eastern Daylight Time
PER DAWN- HIT A NIPSCO GAS SERVICE LINE BY THE CURB - IT IS A BLACK PLASTIC LINE
- IT IS NOT BLOWING IT IS PINCHED OFF - CREW IS ON SITE - ALREADY CONTACTED
NIPSCO FOR REPAIRS - PREVIOUS TICKET NUMBER 1211270969
Will you be white-lining the dig site area? NO
:

Submitted date: 11/30/2012 Time: 13:46
Members: BE COMCN IB ID6513 NIPSCO SM

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

NIPSCO 00580 IUPPSa 11/30/2012 13:55:26 1211301754-00A EMER NEW STRT

EMERGENCY SEE REMARKS

Ticket : 1211301754 Date: 11/30/2012 Time: 13:50 Oper: KLEWIS Chan:032

State: IN Cnty: LAKE Twp: ST JOHN
Cityname: DYER Inside: Y Near: N
Subdivision:

Address : 9510
Street : SHEFFIELD AVE
Cross 1 : W 91ST AVE Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY
:
Grids : 4126A8731D 4126B8731D 4126C8731D
Boundary: n 41.447828 s 41.441381 w -87.518931 e -87.517270

Work type : REPAIR GAS LINE
Done for : NIPSCO
Start date: 11/30/2012 Time: 13:52 Hours notice: 0/000 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 : DAWN GALAMBUS Phone: (800)322-2806
Contact : STAN LEWANDOWSKI - CELL Phone:
BestTime:
Mobile : (219)313-6786

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

Submitted date: 11/30/2012 Time: 13:50
Members: BE COMCN IB ID6513 NIPSCO SM

COMMENTS: This was a long side stub from demolished house - not detected by locator - should have been ret. (I am who retored)

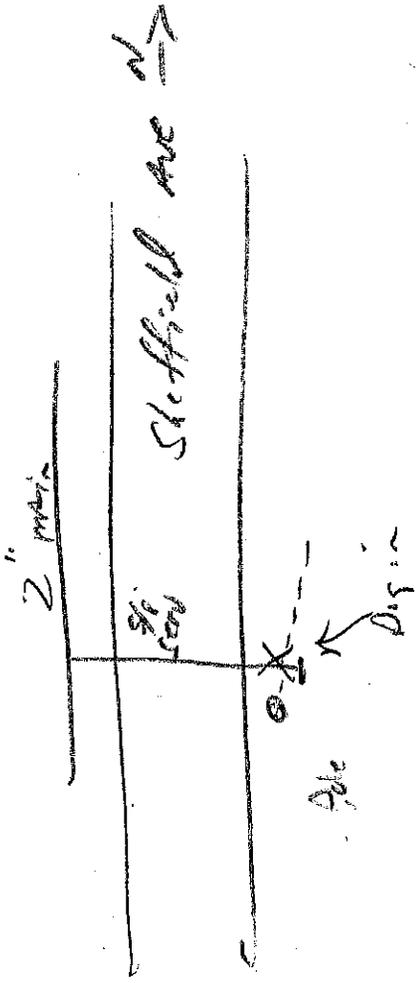
PERSON PREPARING REPORT M. Schussel

FIELD SUPERVISOR F.A. Schussel

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: _____ DATE: _____

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA 030 MAXIMO WO # _____
OPERATING AREA CONTACT M. Schiessle JOB ORDER # 3583972
TRACKING NUMBER 018 2012 1130 008 LOCATE REF # _____
Locate Performed By: _____

DATE AND TIME OF ACCIDENT 11-30-2012, 11:00AM DATE OF REPORT 11-30-12
PLACE OF DAMAGE (INCLUDE CITY) Access the street from 9510 SHEFFIELD AVE DYER

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

GAS: SERVICE MAIN () SIZE 3" MATERIAL: PLASTIC STEEL () METER () REG STATION () STUB ()
OTHER (DESCRIBE) _____
DEPTH OF FACILITY (inches) 26" PRESSURE (PSI) 45 Lbs.
RELEASE OF GAS: YES NO () IGNITION OF GAS: YES () NO EVACUATION REQUIRED: YES () # NO
INTERRUPTION OF SERVICE: YES () NO NUMBER OF CUSTOMERS LOST: 0
DURATION OF INTERRUPTION: TIME REPORTED _____ TIME SHUT OFF _____ TIME RESTORED _____
DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: Cut off end

LOCATE MARKS ON SITE: YES DISTANCE BETWEEN FACILITY AND LOCATE MARKS _____ NO ()
HOW LOCATED: PAINT () FLAGS () BOTH () WHITE LINED ()
PARTY THAT CAUSED DAMAGES (NAME) NIPSCO

ADDRESS OF PARTY (INCLUDE CITY) 20 S. Joseph ST
WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE Const Lane Crew
WITNESS NAME AND ADDRESS J. Payne

WITNESS REMARKS no locates on stub
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
() AGRICULTURE/FARMING () CABLE TV () CURB/SIDEWALK () TELECOMMUNICATIONS
() BLDG CONSTRUCTION () DEMOLITION () DRAINAGE () WATER ()
() DRIVEWAY () ELECTRIC SURVEYING () SURVEYING () DRAINS/CULVERTS ()
() FENCING () GRADING () IRRIGATION () MOWING ()
() LANDSCAPING () PIPELINE () MILLING () OTHER ()
() POLE/SIGN POST () ROAD WORK () SEWER ()

TYPE OF EQUIPMENT USED -- CHECK APPROPRIATE CHOICE BELOW
() AUGER () HAND TOOLS () BACKHOE/TRACKHOE
() MILLING EQUIPMENT () PROBING DEVICE () BORING / DRILLING ()
() EXPLOSIVES TRENCHER () FARM EQUIPMENT ()
() VACCUUM EQUIPMENT () GRADER () OTHER ()

REASON DAMAGE OCCURRED-- CHECK APPROPRIATE CHOICE BELOW
() AUTOMOTIVE ACCIDENT () EXCAVATING BEFORE LOCATES DUE () CARELESS MACHINE OPERATOR
() NO NOTIFICATION () MARKS DISTURBED () STUB () OTHER ()

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

Mark Schiessle LOA manager for Crown Point stated that USIC is not a fault for this line not being marked. He agreed there was no indicators of its location. NIPSCO actually used this stub to tie in the service they needed to run to the pump station that was being work on. Again, USIC is not at fault.

NAMES OF EXCAVATOR'S REPRESENTATIVES 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? 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 cut in retired stub

REPLACEMENT FOOTAGE n/a

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?

WHAT CONTRACTOR EQUIPMENT WAS USED?

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? No

IF YES, PLEASE LIST RECORD #(S)