STATE OF INDIANA

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: D&r Excavating

UPPAC Database Record ID: 4406

Report Date: 8/9/2013 Investigator: Mike Orr

Damage Date: 12/7/2012 Damage Address: 3521 Main Street, East Chicago, Lake

The Parties

Excavator: **D&r Excavating**

Address: 1015 E 149th Street, East Chicago, In 46312

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe Type of Work Performed: Demolition

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: No Indiana 811 Ticket Number: Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Carrie Ludwig (NIPSCo); excavator did not respond to initial notice mailed 2/14/2013. The excavator failed to request a locate be performed prior to starting demolition work and failed to call the association to report the damage.

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

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

150 West Market Street, Suite 600
Indianapolis, IN 46204

March 13, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov
Pipeline Safety Division – Case No. 4406
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4406

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: 12/7/2012

Event Location: 3521 Main Street

City: East Chicago

Facility Owner: Northern Indiana Public Service Company

Excavator: D&r Excavating

Other Party: N/A

Pipeline Division Case No. 4406

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. 4406	
Date of Event	12/7/2012
Event Location	3521 Main Street
Event City	East Chicago
Facility Owner	Northern Indiana Public Service Company
Excavator	D&R Excavating
Date of IURC Information Request	2/13/2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	D&R Excavating
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	1015 E 149th Street
CITY/ STATE/ZIP	East Chicago / IN / 46312
PREFERRED TELEPHONE	(219) 944-4999
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	3521 Main Street
CITY/STATE/ZIP	East Chicago / IN / 46312
NEAREST INTERSECTION	E 136th Street
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.)	¾”
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	N
NUMBER OF CUSTOMERS AFFECTED	0
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/Scrapper	
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	X
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)	N
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)	N/A
MAPS USED TO MARK FACILITIES (YES/NO)	N/A
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)	Y
POLICE DEPARTMENT RESPONSE (YES/NO	N/A
AMBULANCE RESPONSE (YES/NO)	N/A
ADDITIONAL INFORMATION/COMMENTS	
No notification made to the one-call center (no locate requested). Emergency Ticket# 1212071853.	

Fact Based Investigation Report

NOTIFICATION ID: 01820121207002 **DISTRICT:** Northern IN
DAMAGE DATE: 12/7/2012 3:30:00 PM **NOTIFICATION DATE:** 12/7/2012 4:11:08 PM
NOTIFIED BY: SHERRY MINKEMA Other
DAMAGE ADDRESS: 3521 MAIN ST. X 136TH
CITY: EAST CHICAGO **ST:** IN **ZIP:**

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 12/08/2012
FROM: 08:30:00 **TO:** 08:45:00

EXCAVATOR INVOLVED: UNKNOWN
TYPE OF EXCAVATION: Demo of Building

ORIG. LOCATE REQ.: **START DATE/TIME:**
TYPE OF TICKET: **LOCATE REQ. INFO N/A:** Yes

DIG UP/DAMAGE REQ.: M73126474 **START DATE/TIME:** 12/7/2012 5:10:00 PM

PICTURES TAKEN BY: Vince Johnson **DATE/TIME:** 12/8/2012 8:35:00 AM
PHOTOGRAPHY TYPE: Digital **FRAME #:** 1

INVESTIGATOR EMP#: 118013 **INVESTIGATOR NAME:** Vince Johnson
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01820121207002
SELECT A CUSTOMER: NIPSCO
CUSTOMER #: *(optional)*

FACILITY DESCRIPTION: LOWPROF **FACILITY ID:** Gas Service
LOCATOR NAME & EMP #:
LOCATOR NOT KNOWN: Yes

CHECK ALL THAT APPLY TO INVESTIGATION:
No Locate Req. By Contractor

Other:

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

INVESTIGATOR STATEMENT/CAUSAL FACTORS:
This building was a demo and Nipsco had not retired the gas service before it was torn down. There was no meter and no locate request for this property.

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:
None

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 TOLERENCE ZONE OF MARKS?	No
EXTENT OF FACILITY DAMAGE	hit steel gas service
REPLACEMENT FOOTAGE	None/Retired
WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?	No
WHAT CONTRACTOR EQUIPMENT WAS USED?	Backhoes
IS THE FACILITY SHOWN ON THE UTILITY RECORDS?	No
IF YES, PLEASE LIST RECORD #(S)	

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA Hammond MAXIMO WO #

OPERATING AREA CONTACT Nick Verci JOB ORDER # 583511

TRACKING NUMBER 0182012120700 2 LOCATE REF #

Locate Performed By:

DATE AND TIME OF ACCIDENT 12-7-12 20 , M DATE OF REPORT 12-7-12

PLACE OF DAMAGE (INCLUDE CITY) 3521 MAIN ST EAST Chicago

DAMAGE WAS TO:

ELECTRIC - POLE / TRANSFORMER: # SIZE YEAR INSTALLED BROKEN YES ( ) NO ( )

OTHER (DESCRIBE)

GAS: SERVICE (X) MAIN ( ) SIZE 3/4" MATERIAL: PLASTIC ( ) STEEL (X) METER ( ) REG STATION ( ) STUB ( )

OTHER (DESCRIBE)

DEPTH OF FACILITY (inches) 40" PRESSURE (PSI) 45 Lbs.

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

INTERRUPTION OF SERVICE: YES ( ) NO (X) NUMBER OF CUSTOMERS LOST: 0

DURATION OF INTERRUPTION: TIME REPORTED — TIME RESTORED —

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: slit 25% of pipe diameter

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

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

PARTY THAT CAUSED DAMAGES (NAME) D&R - Excavator Al Richardson 219-944-4999

ADDRESS OF PARTY (INCLUDE CITY) www.drsite services.com

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE AL Richardson

WITNESS NAME AND ADRESS J. Velez

WITNESS REMARKS Excavator hit it demolishing building - said NIPSCO said it was OFF

AGENCIES NOTIFIED / ONSITE: POLICE ( ) AGENCY REPORT #

FIRE (X) AGENCY East Chicago REPORT #

OTHER ( ) Any Injuries? ( ) YES # (X) NO

PHOTOS TAKEN: YES (X) NO ( ) TAKEN BY: J. Velez (ATTACH PHOTOS TO REPORT)

MEDIA ON SITE YES ( ) NO ( )

WORK IN PROGRESS WHEN FACILITY DAMAGED – CHECK APPROPRIATE CHOICE BELOW

( ) AGRIGULTURE/FARMING	( ) CABLE TV	( ) CURB/SIDEWALK	( ) TELECOMMUNICATIONS
( ) BLDG CONSTRUCTION	(X) DEMOLITION	( ) DRAINAGE	( ) WATER
( ) DRIVEWAY	( ) ELECTRIC	( ) SURVEYING	( ) DRAINS/CULVERTS
( ) FENCING	( ) GRADING	( ) IRRIGATION	( ) MOWING
( ) LANDSCAPING	( ) PIPELINE	( ) MILLING	( ) OTHER
( ) POLE/SIGN POST	( ) ROAD WORK	( ) SEWER	

TYPE OF EQUPMENT USED – CHECK APPROPRIATE CHOICE BELOW

( ) AUGER	( ) HAND TOOLS	(X) 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 (X) OTHER - thought it was off

- **SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM**

COMMENTS : D + R COMPANY WAS DEMOLISHING Building

Hit service (AL Richardson)

→ Order to retire service was cancelled on 9-11-09.

PERSON PREPARING REPORT J Velez 219 457 2898

FIELD SUPERVISOR Nick VESCL

FIELD MANAGER ~~None~~ Karima Hasan Bey

- **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 BEOFRE 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: _____

DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Jan 24, 2013

Who is submitting this information?

Name of person providing this information: Carrie Ludwig

Business address *(number and street)*: 3511 E 5th Avenue

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: D&R Excavating

Business address *(number and street)*: 1015 E 149th Street

City, State, and ZIP code: East Chicago, IN 46312

Telephone number *(area code)*: 219-944-4999

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. Demolition

Date and Location of Damage

Date of damage (*month, day, year*): Dec 7, 2012

County: Lake

City: East Chicago

Street address (*number and street, city, state, and ZIP code*):
3521 Main Street, East Chicago, IN, 46312

Nearest intersection: E 136th St

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? No

If yes, how many affected? 0

Time to restore service (*in hours*): _____

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? 40

Notification, Locating, Marking

Did excavator request locates prior to commencing work? No

Enter Indiana 811 ticket number, if known: _____

Was the locate request completed within two working days? Unknown/Other

If locates were performed, were they done so by a contractor or pipeline employee? Unknown/Other

If a contractor locator, enter the company name, if known: _____

Were facility marks visible in the area of excavation? No

Were facilities marked correctly? Unknown/Other

Type of markings used: Other

If other, please specify: no locates

Was site marked by "White Lining"? No

Were special instructions part of the locate request? No

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? No

Description of Cause

Select from the list the most accurate cause for the damage: --No notification made to the one-call center

Additional Comments

NIPSCO emergency repair ticket 1212071853

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

```
NIPSCO 00553 IUPPSa 12/07/2012 16:07:58 1212071853-00A EMER NEW  STRT

EMERGENCY SEE REMARKS

Ticket : 1212071853 Date: 12/07/2012 Time: 16:04 Oper: AOWENS Chan:041

State: IN Cnty: LAKE Twp: NORTH
Cityname: EAST CHICAGO  Inside: Y Near: N
Subdivision:

Address : 3521
Street  : MAIN ST
Cross 1 : E 136TH ST   Within 1/4 mile: Y
Location: AT BUILDING TAVERN--LOCATE ENTIRE PROPERTY
:
Grids   : 4138A8726B
Boundary: n 41.649714    s 41.647195    w -87.445788    e -87.444285

Work type : REPAIR GAS LINE
Done for  : NIPSCO
Start date: 12/07/2012  Time: 16:06  Hours notice: 0/000  Priority: EMER
Ug/Oh/Both: U  Blasting: N  Boring: N  Railroad: N  Emergency: Y
Duration  : 1 DAY         Depth: 8 FEET

Company : NIPSCO  Type: MEMB
Co addr : 801 EAST 86TH AVENUE
City    : MERRILLVILLE State: IN Zip: 46410
Caller  : SHERI MINKEMA Phone: (800)322-2806
Contact : MATT GRAY - CELL Phone:
BestTime:
Mobile  : (219)314-2967

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: 12/07/2012 Time: 16:04
Members: COMCN  IB     NIPSCO SM
```

Property of United States Infrastructure Corporation
Photo taken on 12/8/2012 8:35:16 AM

DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Jan 24, 2013

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E-mail address:

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Bldg. Demolition

Date and Location of Damage

Date of damage (*month, day, year*): Dec 7, 2012

County: Lake

City: East Chicago

Street address (*number and street, city, state, and ZIP code*):
3521 Main Street

Nearest intersection: E 136th St

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? No

If yes, how many affected? 0

Time to restore service (*in hours*): _____

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate $_____

Affected Facility Information

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If other, please specify: no locates

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Did the excavator notify 911 in the event of a release of product? No

Description of Cause

Select from the list the most accurate cause for the damage: --No notification made to the one-call center

Additional Comments

NIPSCO emergency repair ticket 1212071853