



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: Pokagon State Park

UPPAC Database Record ID: 4525

Report Date: 8/13/2013

Investigator: Mike Orr

Damage Date: 2/13/2013

Damage Address: 4450 N 50w, Fremont, Steuben

The Parties

Excavator: **Pokagon State Park**

Address: 450 Lane 100 Lake James, Angola, In 46703

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Trencher

Type of Work Performed: Telecommunications

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: 1301311285

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Carrie Ludwig (NIPSCO); excavator did not respond to initial notice mailed 3/27/2013. The excavator failed to maintain required clearance from the gas service with the backhoe.

Conclusion: There was a failure to use hand tools where required within the tolerance zone.

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

April 23, 2012

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4525
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4525

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: 2/13/2013

Event Location: 4450 N 50w

City: Fremont

Facility Owner: Northern Indiana Public Service Company

Excavator: Pokagon State Park

Other Party: N/A

Pipeline Division Case No. 4525

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. 4525	
Date of Event	2/13/2013
Event Location	4450 N 50w
Event City	Fremont
Facility Owner	Northern Indiana Public Service Company
Excavator	Pokagon State Park
Date of IURC Information Request	3/27/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Pokagon State Park
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	450 Lane 100 Lake James
CITY/ STATE/ZIP	Angola / IN / 46703
PREFERRED TELEPHONE	(260)833-2012
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	4450 N 50 W
CITY/STATE/ZIP	Angola / IN / 46703
NEAREST INTERSECTION	IN RT 120
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.)	1 1/4"
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	N
IF YES, HOW MANY EVACUATED	
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	
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	X
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)	Y

INDIANA 811 LOCATE TICKET NUMBER	1301311285
LOCATE MARKS VISIBLE (YES/NO)	Y
LOCATE MARKS CORRECT (YES/NO)	Y
EXCAVATOR "WHITE LINED" (YES/NO)	N
MAPS USED TO MARK FACILITIES (YES/NO)	Y
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)	Y
AMBULANCE RESPONSE (YES/NO)	N/A
ADDITIONAL INFORMATION/COMMENTS	
<p>Failure to use hand tools where required.</p> <p>Emergency ticket# 1302131042.</p>	



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Mar 1, 2013

Who is submitting this information?

Name of person providing this information: Carrie Ludwig

Business address (*number and street*): 3511 East 15th 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: Pokagon State Park

Business address (*number and street*): 450 Lane 100 Lake James

City, State, and ZIP code: Angola, IN 46703

Telephone number (*area code*): (260) 833-2012

Fax number (*area code*): _____

E-mail address: mtworm@yahoo.com

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Trencher

Type of work performed: Telecommunications

Date and Location of Damage

Date of damage (*month, day, year*): Feb 13, 2013

County: Steuben

City: Fremont

Street address (*number and street, city, state, and ZIP code*):
4450 N 50W, Angola, IN 46703

Nearest intersection: IN RT 120

Right of way where damage occurred: Public - County Road

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? _____

Was there a customer service interruption? Yes

If yes, how many affected? 1

Time to restore service (*in hours*): 4

Enter number of injuries, if applicable and known: _____

Enter number of fatalities, if applicable and known: _____

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? 19

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1301311285

Was the locate request completed within two working days? Yes

If locates were performed, were they done so by a contractor or pipeline employee? Contract Locator

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

Were facility marks visible in the area of excavation? Yes

Were facilities marked correctly? Yes

Type of markings used: Paint and Flags

If other, please specify: _____

Was site marked by "White Lining"? No

Were special instructions part of the locate request?

Were maps used to complete the locate request? Yes

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? Yes

Description of Cause

Select from the list the most accurate cause for the damage: --Failure to use hand tools where required

Additional Comments

Emergency ticket# 1302131042.

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

NIPSCO 00342 IUPPSa 01/31/2013 14:16:09 1301311285-00A NORM NEW GRID

NORMAL NOTICE SEE REMARKS

Ticket : 1301311285 Date: 01/31/2013 Time: 14:06 Oper: SLUCAS Chan:060

State: IN Cnty: STEUBEN Twp: JAMESTOWN
Cityname: FREMONT Inside: N Near: Y
Subdivision:

Address : 4450
Street : N 50 W
Cross 1 : IN RT 120 Within 1/4 mile: N
Location: LOCATE THE ENTIRE PROPERTY - SEE REMARKS

:
Grids : 4142A8459A 4142A8459B 4142A8459C 4142A8500D 4142B8459A
Grids : 4142B8459B 4142B8459C 4142B8500D 4142C8459A 4142C8459B
Grids : 4142C8459C 4142C8500D 4143D8459A 4143D8459B 4143D8459C
Grids : 4143D8500D
Boundary: n 41.717717 s 41.705469 w -85.004162 e -84.987934

Work type : INSTALLING PHONE LINE
Done for : TRINE STATE RECREATION AREA
Start date: 02/04/2013 Time: 14:15 Hours notice: 96/048 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 5 DAYS Depth: 2 FEET

Company : POKAGON STATE PARK Type: OTHR
Co addr : 450 LANE 100 LAKE JAMES
City : ANGOLA State: IN Zip: 46703
Caller : MIKE WORMAN Phone: (260)833-2012
Contact : MIKE WORMAN - CELL Phone:
BestTime:
Mobile : (260)417-5933
Email : MTWORM@YAHOO.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time
PER MIKE WORMAN - PLEASE CALL MIKE AT 260-417-5933 AS UTILITIES ARRIVE TO OBATIN
MORE PRECISE LOCATE INSTRUCTIONS - THANK YOU
Will you be white-lining the dig site area? NO
:

Submitted date: 01/31/2013 Time: 14:06
Members: ID3015 ID3563 ID4844 ID8000 NIPSCO SM

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

NIPSCO 00299 IUPPSa 02/13/2013 11:56:09 1302131042-00A EMER NEW GRID

EMERGENCY SEE REMARKS

Ticket : 1302131042 Date: 02/13/2013 Time: 11:40 Oper: ALOUIE Chan:015

State: IN Cnty: STEUBEN Twp: PLEASANT
Cityname: ANGOLA Inside: Y Near: N
Subdivision:

Address : 4450
Street : N 50 W
Cross 1 : OLD US RT 27 Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY
:
Grids : 4142A8500C 4142A8500D 4142B8500C 4142B8500D 4142C8500C
Grids : 4142C8500D
Boundary: n 41.715483 s 41.705940 w -85.004811 e -85.002146

Work type : REPAIRING GAS LINE
Done for : NIPSCO
Start date: 02/13/2013 Time: 11:42 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 : MARCIA KING Phone: (800)322-2806
Contact : JASON SPRUNGER---CELL Phone:
EstTime:
Mobile : (260)226-2330
Fax : (219)647-4764

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: 02/13/2013 Time: 11:40

Members: ID3015 ID8000 NIPSCO SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA Angola MAXIMO WO # M 670345
OPERATING AREA CONTACT Menaker JOB ORDER # 571240
TRACKING NUMBER 01820130213005 LOCATE REF # 130 131 1285
Locate Performed By: USIC

DATE AND TIME OF ACCIDENT 2-13 2013 11:17 AM DATE OF REPORT 2-13-13
PLACE OF DAMAGE (INCLUDE CITY) 4450 N. 50 W. Angola 46703

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

OTHER (DESCRIBE) _____

GAS: SERVICE () MAIN () SIZE 1 1/4" MATERIAL: PLASTIC () STEEL () METER () REG STATION () STUB ()
OTHER (DESCRIBE) _____

DEPTH OF FACILITY (Inches) 19" 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: 1

DURATION OF INTERRUPTION: TIME REPORTED 11:17 AM TIME SHUT OFF 11:40 AM TIME RESTORED 3:45

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: slurred 1 1/4"

LOCATE MARKS ON SITE: YES () DISTANCE BETWEEN FACILITY AND LOCATE MARKS right on NO () Bill Address
HOW LOCATED: PAINT () FLAGS () BOTH () WHITE LINED () 450 Ln. 100 LK. Jms. Angola

PARTY THAT CAUSED DAMAGES (NAME) DNR Trine State Rec. Area.
POKAGON STATE PARK, 450 LANE 100 LAKE JAMES, 46703

ADDRESS OF PARTY (INCLUDE CITY) 4450 N. 50 W Angola

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE MIKE WORMAN Phone: (260)833-2012
Gary Christopher

WITNESS NAME AND ADDRESS _____

WITNESS REMARKS _____

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

FIRE () AGENCY Angola & Fremont 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 <u>Phone</u>
() BLDG CONSTRUCTION	() DEMOLITION	() DRAINAGE	() WATER
() DRIVEWAY	() ELECTRIC	() 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 <u>Failure to Expose</u>

COMMENTS: Failure to Hand expose

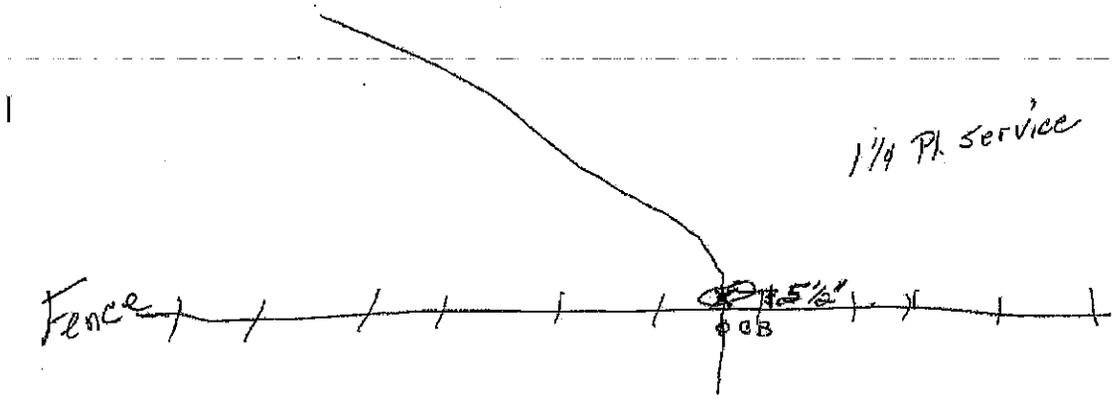
PERSON PREPARING REPORT Marion Combs

FIELD SUPERVISOR Joe Thomas

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: _____

Fact Based Investigation Report

Notification ID 01820130213005
Damage Date 02/13/2013 00:00
Notified By MARCIA KING (Facility Owner)
Damage Address 4450 N 50 W (STEUBEN COUNTY)
ANGOLA, IN
District Northern Indiana
Notification Date 02/13/2013 11:58

Damaged Customer NIPSCO

Investigation Date From 02/13/2013 13:00:00 **To** 02/13/2013 13:20:00

Excavator Involved POKAGON STATE PARK
Type of Excavation PLOW

Orig. Locate Request 1301311285/ PIC28 **Start Date**
Type of Ticket **Locate Req. Info** N/A

Damage Request # 1302131042 **Start Date**

Pictures Taken By MIKEOBERLIN **Date** 02/13/2013 13:00
Photography Type Digital **Frame #** 2842

Investigator Emp. # 113397 **Investigator Name** MIKEOBERLIN
Based on your investigation, is further investigation needed? No

Fact Based Investigation Customer Information

Facility Description Low Profile **Facility ID** Gas Service
Locator Name & EMP # Krauchaar James - 131779 **Locator Not Known**

Investigation Findings

Facility Marked Accurately
Relocate Needed

Other Notes

Investigation Methods

Investigator Verified Existing Marks By Hooking Up
Visual, Facility Exposed At Time Of Investigation

Investigator Statement/Causal Factors

SERVICE MARKED ACCURATELY OLD PAINT AND FLAGS ON SITE NEEDED RELOCATED DID NOT
HAND EXPOSE LINE POST LOCATE PIC SHOW LINE MARKEN IN SNOW.

Names of Utility Representatives Contacted or on Site and Statement

NIPSCO / CONTRACTOR FAILED TO HAND EXPOSE LINE

Names of Excavator's Representatives Contacted or on Site and Statement

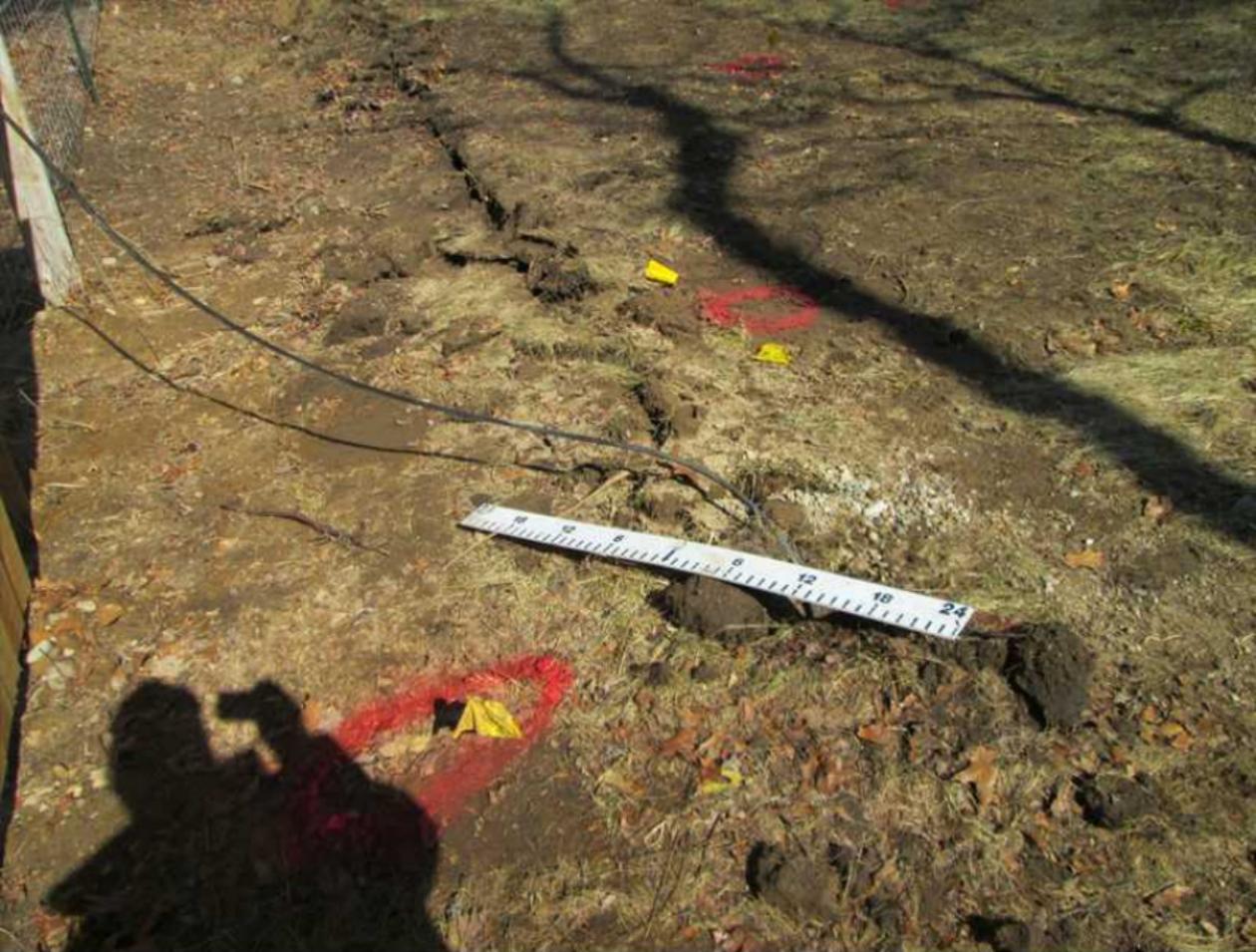
U/K

Other individuals on site

U/K

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	1 1/4 PLASTIC SERVICE
Replacement Footage	3'
Was contractor assistance required? If yes, who?	No
What contractor equipment was used?	
Is the facility shown on the utility records?	No
If yes, list record numbers	



Property of United States Infrastructure Corporation
Photo taken on 2/13/2013 12:51:20 PM



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Mar 1, 2013

Who is submitting this information?

Name of person providing this information: Carrie Ludwig (NIPSCO)

Business address (*number and street*): 3511 East 15th 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: Pokagon State Park

Business address (*number and street*): 450 Lane 100 Lake James

City, State, and ZIP code: Angola, IN 46703

Telephone number (*area code*): (260) 833-2012

Fax number (*area code*): _____

E-mail address: mtworm@yahoo.com

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Trencher

Type of work performed: Telecommunications

Date and Location of Damage

Date of damage (*month, day, year*): Feb 13, 2013 _____

County: Steuben _____

City: Fremont _____

Street address (*number and street, city, state, and ZIP code*):
4450 N 50W _____

Nearest intersection: IN RT 120 _____

Right of way where damage occurred: Public - County Road

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? _____

Was there a customer service interruption? Yes

If yes, how many affected? 1 _____

Time to restore service (*in hours*): 4 _____

Enter number of injuries, if applicable and known: _____

Enter number of fatalities, if applicable and known: _____

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? 19 _____

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1301311285 _____

Was the locate request completed within two working days? Yes

If locates were performed, were they done so by a contractor or pipeline employee? Contract Locator

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

Were facility marks visible in the area of excavation? Yes

Were facilities marked correctly? Yes

Type of markings used: Paint and Flags

If other, please specify: _____

Was site marked by "White Lining"? No

Were special instructions part of the locate request?

Were maps used to complete the locate request? Yes

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? Yes

Description of Cause

Select from the list the most accurate cause for the damage: --Failure to use hand tools where required

Additional Comments

Emergency ticket# 1302131042.