



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: Robert Henry Corporation

UPPAC Database Record ID: 4539

Report Date: 7/18/2013

Investigator: Mike Orr

Damage Date: 3/6/2013 11:07:46 AM

Damage Address: S 500 W, Valparaiso, Porter

The Parties

Excavator: **Robert Henry Corporation**

Address: 404 South Frances Street, South Bend, In 46617

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Boring

Type of Work Performed: Electric

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 2

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes
2/26/2013

Indiana 811 Ticket Number: 1302220217

Original Start Date:

Locate Instructions: LOCATE THE NORTH EASEMENTS OF WEXFORD RD FOR APPROX 400 FEET---
ADDRESSES 499 497 495 493 AND 491

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Indiana 811; excavator's response to initial notice was received on 4/9/2013. Excavator was boring underneath a street and pot holed the accurately located service on both sides of the street. However, excavator did not hand-expose the line under the street and the bore rod rode up and damaged the service line. Excavator cannot assume the depth and direction of the service line is consistent based on 2 pot holes on each side of the street.

Conclusion: The excavator failed to maintain adequate clearance with mechanized equipment.

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. 4539
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4539

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: 3/6/2013

Event Location: S 500 W

City: Union

Facility Owner: Northern Indiana Public Service Company

Excavator: Robert Henry Corporation

Other Party: N/A

Pipeline Division Case No. 4539

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. 4539	
Date of Event	3/6/2013
Event Location	S 500 W
Event City	Union
Facility Owner	Northern Indiana Public Service Company
Excavator	Robert Henry Corporation
Date of IURC Information Request	3/27/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Robert Henry Corporation
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	404 South Frances Street
CITY/ STATE/ZIP	South Bend / IN / 46617
PREFERRED TELEPHONE	(574)232-2091
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	495 Wexford Court (S 500 W)
CITY/STATE/ZIP	Valparaiso / IN / 46385
NEAREST INTERSECTION	N/A
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)	Y
NUMBER OF CUSTOMERS AFFECTED	2
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	X
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	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)	Y
IGNITION AND/OR FIRE (YES/NO)	N
EXCAVATOR NOTIFY 811 (YES/NO)	Y – 1303060615
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1302220217
LOCATE MARKS VISIBLE (YES/NO)	Y
LOCATE MARKS CORRECT (YES/NO)	Y
EXCAVATOR "WHITE LINED" (YES/NO)	Y
MAPS USED TO MARK FACILITIES (YES/NO)	Y
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	Y
INCIDENT IMPACT INFORMATION	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	N/A
POLICE DEPARTMENT RESPONSE (YES/NO)	N/A
AMBULANCE RESPONSE (YES/NO)	N/A
ADDITIONAL INFORMATION/COMMENTS	
<p>Failure to use hand tools where required.</p> <p>Emergency ticket# 1303060799.</p>	

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

NIPSCO 00056 IUPPSa 02/22/2013 08:48:11 1302220217-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1302220217 Date: 02/22/2013 Time: 08:38 Oper: CLICH Chan:029

State: IN Cnty: PORTER Twp: UNION
Cityname: VALPARAISO Inside: Y Near: N
Subdivision: SHOREWOOD FOREST

Address :

Street : S 500 W

Cross 1 : WEXFORD RD Within 1/4 mile: Y

Location: LOCATE THE NORTH EASEMENTS OF WEXFORD RD FOR APPROX 400
FEET---ADDRESSES 499 497 495 493 AND 491

***Boring Where = UNDER EASEMANT ON CO RD 500 W

:

Grids : 4127A8709A 4127A8709B 4128D8709A 4128D8709B

Boundary: n 41.467473 s 41.465828 w -87.162888 e -87.160227

Work type : UNDERGROUND ELECTRIC

Done for : NIPSCO

Start date: 02/26/2013 Time: 09:00 Hours notice: 96/048 Priority: NORM

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

Duration : 2 WEEKS Depth: 36 INCHES

Company : ROBERT HENRY CORPORATION Type: CONT

Co addr : 404 SOUTH FRANCES STREET

City : SOUTH BEND State: IN Zip: 46617

Caller : MIKE MILLER Phone: (574)232-2091

Contact : MIKE MILLER - CELL Phone:

BestTime:

Mobile : (574)250-7465

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

Will you be white-lining the dig site area? YES

:

Submitted date: 02/22/2013 Time: 08:38

Members: COMCN ID2227 ID4224 ID8000 NIPSCO SM

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

NIPSCO 00129 IUPPSa 03/06/2013 11:07:47 1303060615-00A EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1303060615 Date: 03/06/2013 Time: 11:04 Oper: LSTEVENSON Chan:018

State: IN Cnty: PORTER Twp: UNION
Cityname: VALPARAISO Inside: Y Near: N
Subdivision: SHOREWOOD FOREST

Address :

Street : S 500 W

Cross 1 : WEXFORD RD Within 1/4 mile: Y

Location: LOCATE THE NORTH EASEMENTS OF WEXFORD RD FOR APPROX 400
FEET---ADDRESSES 499 497 495 493 AND 491

***Boring Where = UNDER EASEMANT ON CO RD 500 W

:

Grids : 4127A8709A 4127A8709B 4128D8709A 4128D8709B

Boundary: n 41.467473 s 41.465828 w -87.162888 e -87.160227

Work type : UNDERGROUND ELECTRIC

Done for : NIPSCO

Start date: 03/06/2013 Time: 11:05 Hours notice: 0/000 Priority: EMER

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

Duration : 2 WEEKS Depth: 36 INCHES

Company : ROBERT HENRY CORPORATION Type: CONT

Co addr : 404 SOUTH FRANCES STREET

City : SOUTH BEND State: IN Zip: 46617

Caller : BILL PRATER Phone: (574)232-2091

Contact : MIKE MILLER - CELL Phone:

BestTime:

Mobile : (574)250-7465

Remarks : All tickets are taken and processed on Eastern Daylight Time
NIPSCO GAS LINE WAS HIT IN FRONT OF 495 WEXFORD RD ---IN THE FRONT
EASEMENT---GAS IS BLOWING---CAN BE HEARD AND SMELLED---911 HAS BEEN CALLED---CREW
IS ON SITE---ADVISED TO CALL NIPSCO TO REPORT THE DAMAGE---PREVIOUS TICKET
NUMBER IS 1302220217---THANK YOU

Will you be white-lining the dig site area? YES

:

Submitted date: 03/06/2013 Time: 11:04

Members: COMCN ID2227 ID4224 ID8000 NIPSCO SM

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

NIPSCO 00153 IUPPSa 03/06/2013 12:02:02 1303060799-00A EMER NEW STRT

EMERGENCY SEE REMARKS

Ticket : 1303060799 Date: 03/06/2013 Time: 11:58 Oper: AOWENS Chan:041

State: IN Cnty: PORTER Twp: UNION
Cityname: VALPARAISO Inside: Y Near: N
Subdivision: SHOREWOOD FOREST

Address : 495
Street : WEXFORD RD
Cross 1 : FOX CHAPEL CT Within 1/4 mile: Y
Location: LOCATE ENTIRE PROPERTY
:
Grids : 4127A8709B 4128D8709B
Boundary: n 41.466822 s 41.465572 w -87.161800 e -87.158879

Work type : REPAIR GAS LINE
Done for : NIPSCO
Start date: 03/06/2013 Time: 11:59 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 : JAMILA MARTIN Phone: (800)762-0592
Contact : RICK SMITH - CELL Phone:
BestTime:
Mobile : (219)252-4057

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: 03/06/2013 Time: 11:58
Members: COMCN ID2227 ID4224 ID8000 NIPSCO SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA VALPARAISO MAXIMO WO # C0717447208
 OPERATING AREA CONTACT VALPARAISO JOB ORDER # 50 592767
 TRACKING NUMBER 01820130306003 LOCATE REF # 1302220217
 Locate Performed By: _____

DATE AND TIME OF ACCIDENT 03-06-13 ²⁰¹³, 4 M DATE OF REPORT 3/6/13
 PLACE OF DAMAGE (INCLUDE CITY) 495 WEXFORD VALPARAISO, IN

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) 4' PRESSURE (PSI) 50 Lbs.

RELEASE OF GAS: YES NO () IGNITION OF GAS: YES () NO EVACUATION REQUIRED: YES () # _____ NO
 INTERRUPTION OF SERVICE: YES NO () NUMBER OF CUSTOMERS LOST: 2
 DURATION OF INTERRUPTION: TIME REPORTED 10:25 AM TIME RESTORED gas off @ 3pm
 DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 5/8

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

PARTY THAT CAUSED DAMAGES (NAME) Robert Henry Core 574-332-2091

ADDRESS OF PARTY (INCLUDE CITY) 404 S. FRANCIS South Bend, IN

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE BEAN PRATER FERNAN

WITNESS NAME AND ADDRESS _____
 WITNESS REMARKS _____
 AGENCIES NOTIFIED / ONSITE: POLICE () AGENCY _____ REPORT # _____
 FIRE () AGENCY _____ REPORT # _____
 OTHER () _____ Any injuries? () YES # _____ () NO _____

PHOTOS TAKEN: YES NO () TAKEN BY: LOCATOR (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 checked="" 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 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	

NIPSCO CONTRACTOR
DOING UNDERGROUND
ELC WORK

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 checked="" 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
		<input type="checkbox"/> OTHER

SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

COMMENTS: CONTRACTOR HAD HOLE OPEN, SERVICE EXPOSED PREVIOUS DAY

HOLE FILLED WITH WATER, NOT PUMPED HIT SERV WHILE BORING.

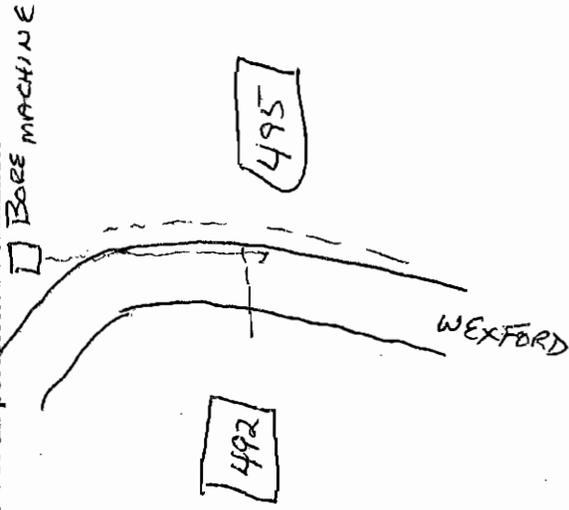
PERSON PREPARING REPORT J JANATIK 081215

FIELD SUPERVISOR Rick Smith

FIELD MANAGER John Todd

- 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 01820130306002
Damage Date 03/06/2013 11:07
Notified By BILL PRATER ()
Damage Address S 500 W
VALPARAISO, IN

District Northern Indiana
Notification Date 03/06/2013 11:10

Damaged Customer NIPSCO

Investigation Date From 03/06/2013 10:30:00 **To** 03/06/2013 12:30:00

Excavator Involved ROBERT HENRY
Type of Excavation UNDERGROUND ELECTRIC INSTALL

Orig. Locate Request 1302220217 **Start Date** 03/06/2013 00:00
Type of Ticket Ongoing Project **Locate Req. Info** N/A

Damage Request # 1303060615 **Start Date** 03/06/2013 11:05

Pictures Taken By PHIL BELEGAL **Date** 03/06/2013 10:30
Photography Type Digital **Frame #**

Investigator Emp. # 117702 **Investigator Name** PHIL BELEGAL
Based on your investigation, is further investigation needed? No

Fact Based Investigation Customer Information

Facility Description Low Profile **Facility ID** service - 5/8"
Locator Name & EMP # Belegal Phil - 117702 **Locator Not Known**

Investigation Findings

Contractor Damaged Exposed Facility
Facility Marked Accurately
Other Notes

Investigation Methods

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

Investigator Statement/Causal Factors

UPON ARRIVAL TO JOB SITE, EXISTING MARKINGS AND FLAGS VISIBLE ON SITE. EXPOSED FACILITY /HOLE COVERED FILLED UP BY WATER.BUBBLING FROM GAS. FACILITY MARKED ACCURATELY //VISIBLE HARD MARKINGS FOLLOW PATH. FACILITY MARKED ACCURATELY.

Names of Utility Representatives Contacted or on Site and Statement

BEAU FROM ROBERT HENRY AND CREW ON SITE STATING THEY HIT GAS SERVICE OF 494 (LONG SIDE) ACROSS FROM 495 WEXFORD. BORE MARKS ALONG CURB IN STREET IS WHERE HE HIT THE GAS SERVICE //HOLE DUG ON OTHER SIDE OF CURB AND HAD GAS SERVICE EXPOSED//POTHOLED EVERYTHING THE DAY BEFORE AND WAS EXPOSED. ACTUAL HIT WAS IN THE STREET BY CURB LINE. FACILITY MARKED ACCURATELY-AS STATED BY CONTRACTOR AND VERIFIED UPON HOOKING

UP TO SERVICE //MARKED EVERYTHING IN BLACK DUE TO DAMAGE INVESTIGATION AND FOR NIPSCO GAS REPAIR.

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

SEE ABOVE...UTILITY REP ON SITE AFTER CALLING IN DAMAGE//I WAS ALREADY ON SITE DOWN THE ROAD LOCATING FOR ONGOING PROJECT FOR ROBERT HENRY ON DIFFERENT TICKET.

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	HIT/BORED THROUGH 5/8"PL GAS SERVICE
Replacement Footage	UNKNOWN
Was contractor assistance required? If yes, who?	No
What contractor equipment was used?	BORING MACHINE
Is the facility shown on the utility records?	No
If yes, list record numbers	

IURC INFORMATION REQUEST	
Pipeline Safety Division Case No. 4539	
Date of Event	3/6/2013
Event Location	S 500 W
Event City	Union
Facility Owner	Northern Indiana Public Service Company
Excavator	Robert Henry Corporation
Date of IURC Information Request	3/27/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Robert Henry Corporation
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	404 South Frances Street
CITY/ STATE/ZIP	South Bend / IN / 46617
PREFERRED TELEPHONE	(574)232-2091
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	495 Wexford Court (S 500 W)
CITY/STATE/ZIP	Valparaiso / IN / 46385
NEAREST INTERSECTION	N/A
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)	Y
NUMBER OF CUSTOMERS AFFECTED	2
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	X
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	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)	Y
IGNITION AND/OR FIRE (YES/NO)	N
EXCAVATOR NOTIFY 811 (YES/NO)	Y – 1303060615
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1302220217
LOCATE MARKS VISIBLE (YES/NO)	Y
LOCATE MARKS CORRECT (YES/NO)	Y
EXCAVATOR "WHITE LINED" (YES/NO)	Y
MAPS USED TO MARK FACILITIES (YES/NO)	Y
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	Y
INCIDENT IMPACT INFORMATION	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	N/A
POLICE DEPARTMENT RESPONSE (YES/NO)	N/A
AMBULANCE RESPONSE (YES/NO)	N/A
ADDITIONAL INFORMATION/COMMENTS	
<p>Failure to use hand tools where required.</p> <p>Emergency ticket# 1303060799.</p>	

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

NIPSCO 00056 IUPPSa 02/22/2013 08:48:11 1302220217-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1302220217 Date: 02/22/2013 Time: 08:38 Oper: CLICH Chan:029

State: IN Cnty: PORTER Twp: UNION
Cityname: VALPARAISO Inside: Y Near: N
Subdivision: SHOREWOOD FOREST

Address :

Street : S 500 W

Cross 1 : WEXFORD RD Within 1/4 mile: Y

Location: LOCATE THE NORTH EASEMENTS OF WEXFORD RD FOR APPROX 400
FEET---ADDRESSES 499 497 495 493 AND 491

***Boring Where = UNDER EASEMANT ON CO RD 500 W

:

Grids : 4127A8709A 4127A8709B 4128D8709A 4128D8709B

Boundary: n 41.467473 s 41.465828 w -87.162888 e -87.160227

Work type : UNDERGROUND ELECTRIC

Done for : NIPSCO

Start date: 02/26/2013 Time: 09:00 Hours notice: 96/048 Priority: NORM

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

Duration : 2 WEEKS Depth: 36 INCHES

Company : ROBERT HENRY CORPORATION Type: CONT

Co addr : 404 SOUTH FRANCES STREET

City : SOUTH BEND State: IN Zip: 46617

Caller : MIKE MILLER Phone: (574)232-2091

Contact : MIKE MILLER - CELL Phone:

BestTime:

Mobile : (574)250-7465

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

Will you be white-lining the dig site area? YES

:

Submitted date: 02/22/2013 Time: 08:38

Members: COMCN ID2227 ID4224 ID8000 NIPSCO SM

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

NIPSCO 00129 IUPPSa 03/06/2013 11:07:47 1303060615-00A EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1303060615 Date: 03/06/2013 Time: 11:04 Oper: LSTEVENSON Chan:018

State: IN Cnty: PORTER Twp: UNION
Cityname: VALPARAISO Inside: Y Near: N
Subdivision: SHOREWOOD FOREST

Address :

Street : S 500 W

Cross 1 : WEXFORD RD Within 1/4 mile: Y

Location: LOCATE THE NORTH EASEMENTS OF WEXFORD RD FOR APPROX 400
FEET---ADDRESSES 499 497 495 493 AND 491

***Boring Where = UNDER EASEMANT ON CO RD 500 W

:

Grids : 4127A8709A 4127A8709B 4128D8709A 4128D8709B

Boundary: n 41.467473 s 41.465828 w -87.162888 e -87.160227

Work type : UNDERGROUND ELECTRIC

Done for : NIPSCO

Start date: 03/06/2013 Time: 11:05 Hours notice: 0/000 Priority: EMER

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

Duration : 2 WEEKS Depth: 36 INCHES

Company : ROBERT HENRY CORPORATION Type: CONT

Co addr : 404 SOUTH FRANCES STREET

City : SOUTH BEND State: IN Zip: 46617

Caller : BILL PRATER Phone: (574)232-2091

Contact : MIKE MILLER - CELL Phone:

BestTime:

Mobile : (574)250-7465

Remarks : All tickets are taken and processed on Eastern Daylight Time
NIPSCO GAS LINE WAS HIT IN FRONT OF 495 WEXFORD RD ---IN THE FRONT
EASEMENT---GAS IS BLOWING---CAN BE HEARD AND SMELLED---911 HAS BEEN CALLED---CREW
IS ON SITE---ADVISED TO CALL NIPSCO TO REPORT THE DAMAGE---PREVIOUS TICKET
NUMBER IS 1302220217---THANK YOU

Will you be white-lining the dig site area? YES

:

Submitted date: 03/06/2013 Time: 11:04

Members: COMCN ID2227 ID4224 ID8000 NIPSCO SM

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

NIPSCO 00153 IUPPSa 03/06/2013 12:02:02 1303060799-00A EMER NEW STRT

EMERGENCY SEE REMARKS

Ticket : 1303060799 Date: 03/06/2013 Time: 11:58 Oper: AOWENS Chan:041

State: IN Cnty: PORTER Twp: UNION
Cityname: VALPARAISO Inside: Y Near: N
Subdivision: SHOREWOOD FOREST

Address : 495
Street : WEXFORD RD
Cross 1 : FOX CHAPEL CT Within 1/4 mile: Y
Location: LOCATE ENTIRE PROPERTY
:
Grids : 4127A8709B 4128D8709B
Boundary: n 41.466822 s 41.465572 w -87.161800 e -87.158879

Work type : REPAIR GAS LINE
Done for : NIPSCO
Start date: 03/06/2013 Time: 11:59 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 : JAMILA MARTIN Phone: (800)762-0592
Contact : RICK SMITH - CELL Phone:
BestTime:
Mobile : (219)252-4057

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: 03/06/2013 Time: 11:58
Members: COMCN ID2227 ID4224 ID8000 NIPSCO SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA VALPARAISO MAXIMO WO # C0717447208
 OPERATING AREA CONTACT VALPARAISO JOB ORDER # 50 592767
 TRACKING NUMBER 01820130306003 LOCATE REF # 1302220217
 Locate Performed By: _____

DATE AND TIME OF ACCIDENT 03-06-13 ²⁰¹³, 4 M DATE OF REPORT 3/6/13
 PLACE OF DAMAGE (INCLUDE CITY) 495 WEXFORD VALPARAISO, IN

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) 4' PRESSURE (PSI) 50 Lbs. _____

RELEASE OF GAS: YES NO () IGNITION OF GAS: YES () NO EVACUATION REQUIRED: YES () # _____ NO
 INTERRUPTION OF SERVICE: YES NO () NUMBER OF CUSTOMERS LOST: 2
 DURATION OF INTERRUPTION: TIME REPORTED 10:25 AM TIME RESTORED gas off @ 3pm
 DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 5/8

LOCATE MARKS ON SITE: YES NO () DISTANCE BETWEEN FACILITY AND LOCATE MARKS _____' _____ NO ()
 HOW LOCATED: PAINT FLAGS BOTH WHITE LINED ()
 PARTY THAT CAUSED DAMAGES (NAME) Robert Henry Core 574-332-2091

ADDRESS OF PARTY (INCLUDE CITY) 404 S. FRANCIS South Bend, IN
 WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE BEAN PRATER FERNAN
 WITNESS NAME AND ADDRESS _____

WITNESS REMARKS _____
 AGENCIES NOTIFIED / ONSITE: POLICE () AGENCY _____ REPORT # _____
 FIRE () AGENCY _____ REPORT # _____
 OTHER () _____ Any injuries? () YES # _____ () NO _____
 (ATTACH PHOTOS TO REPORT)

PHOTOS TAKEN: YES NO () TAKEN BY: LOCATOR
 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 () DRAINS/CULVERTS
 () FENCING () GRADING () IRRIGATION () MOWING
 () LANDSCAPING () PIPELINE () MILLING () OTHER
 () POLE/SIGN POST () ROAD WORK () SEWER
doing UNDERGROUND
doing UNDERGROUND
doing UNDERGROUND
doing UNDERGROUND

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

COMMENTS: CONTRACTOR HAD HOLE OPEN, SERVICE EXPOSED PREVIOUS DAY

HOLE FILLED WITH WATER, NOT PUMPED HIT SERV WHILE BORING.

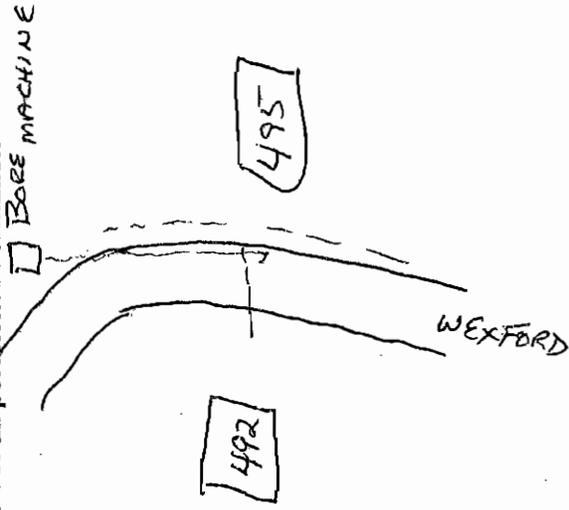
PERSON PREPARING REPORT J JANATIK 081215

FIELD SUPERVISOR Rick Smith

FIELD MANAGER John Todd

- 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 01820130306002
Damage Date 03/06/2013 11:07
Notified By BILL PRATER ()
Damage Address S 500 W
VALPARAISO, IN

District Northern Indiana
Notification Date 03/06/2013 11:10

Damaged Customer NIPSCO

Investigation Date From 03/06/2013 10:30:00 **To** 03/06/2013 12:30:00

Excavator Involved ROBERT HENRY
Type of Excavation UNDERGROUND ELECTRIC INSTALL

Orig. Locate Request 1302220217 **Start Date** 03/06/2013 00:00
Type of Ticket Ongoing Project **Locate Req. Info** N/A

Damage Request # 1303060615 **Start Date** 03/06/2013 11:05

Pictures Taken By PHIL BELEGAL **Date** 03/06/2013 10:30
Photography Type Digital **Frame #**

Investigator Emp. # 117702 **Investigator Name** PHIL BELEGAL
Based on your investigation, is further investigation needed? No

Fact Based Investigation Customer Information

Facility Description Low Profile **Facility ID** service - 5/8"
Locator Name & EMP # Belegal Phil - 117702 **Locator Not Known**

Investigation Findings

Contractor Damaged Exposed Facility
Facility Marked Accurately
Other Notes

Investigation Methods

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

Investigator Statement/Causal Factors

UPON ARRIVAL TO JOB SITE, EXISTING MARKINGS AND FLAGS VISIBLE ON SITE. EXPOSED FACILITY /HOLE COVERED FILLED UP BY WATER.BUBBLING FROM GAS. FACILITY MARKED ACCURATELY //VISIBLE HARD MARKINGS FOLLOW PATH. FACILITY MARKED ACCURATELY.

Names of Utility Representatives Contacted or on Site and Statement

BEAU FROM ROBERT HENRY AND CREW ON SITE STATING THEY HIT GAS SERVICE OF 494 (LONG SIDE) ACROSS FROM 495 WEXFORD. BORE MARKS ALONG CURB IN STREET IS WHERE HE HIT THE GAS SERVICE //HOLE DUG ON OTHER SIDE OF CURB AND HAD GAS SERVICE EXPOSED//POTHOLED EVERYTHING THE DAY BEFORE AND WAS EXPOSED. ACTUAL HIT WAS IN THE STREET BY CURB LINE. FACILITY MARKED ACCURATELY-AS STATED BY CONTRACTOR AND VERIFIED UPON HOOKING

UP TO SERVICE //MARKED EVERYTHING IN BLACK DUE TO DAMAGE INVESTIGATION AND FOR NIPSCO GAS REPAIR.

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

SEE ABOVE...UTILITY REP ON SITE AFTER CALLING IN DAMAGE//I WAS ALREADY ON SITE DOWN THE ROAD LOCATING FOR ONGOING PROJECT FOR ROBERT HENRY ON DIFFERENT TICKET.

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	HIT/BORED THROUGH 5/8"PL GAS SERVICE
Replacement Footage	UNKNOWN
Was contractor assistance required? If yes, who?	No
What contractor equipment was used?	BORING MACHINE
Is the facility shown on the utility records?	No
If yes, list record numbers	



INFORMATION REQUEST

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 4539

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: THE ROBERT HENRY CORPORATION

Responsible Party Personal Name: BEAU PRATER

Title (if any): FOREMAN

Address (number and street): 404 S. FRANCES STREET

City, State and ZIP Code: SOUTH BEND INDIANA 46617

Preferred Telephone Number (area code): (574) 232-2091

Cellular Telephone Number (area code): _____

Email Address: jhenry@roberthenrycorp.com

Facility Information:

Business Name: NIPSCO GAS

Responsible Party Personal Name: _____

Title (if any): _____

Address (number and street): 801 E. 86TH ST.

City, State and ZIP Code: MERRILLVILLE INDIANA 46410

Preferred Telephone Number (area code): (219) 647-4033

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): SHOVEL / DRILL ROD FROM BORING MACHINE

Type of Work Performed (select one): INSTALLING PRIMARY ELECTRIC

Other Information (Witness, Police, Fire, Other):

Personal Contact: _____

Business/Organization Name: THE ROBERT HENRY CORPORATION

Title (if any): _____

Address (number and street): 404 S. FRANCES ST.

City, State and ZIP Code: SOUTH BEND INDIANA 46617

Preferred Telephone Number (area code): (574) 232-2091

Cellular Telephone Number (area code): _____

Email Address: Jhenry@roberthencrycorp.com

Utility Line Impact

Location of Damage:

Address (number and street): 495 WEXFORD RD SHOREWOOD SUBDIVISION

City, State and ZIP Code: VALPARAISO, IN.

Nearest Intersection: _____

Product Type (select one): NATURAL GAS

Facility Type (select one): SERVICE TO HOME

Size (Diameter/etc.): ?

Pressure (PSIG/Inches): ?

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

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: 1302220217

RELOCATE # 1303060615

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

SEE ATTACHED "UTILITY HIT REPORT"
ANY ADDITIONAL QUESTIONS
CALL JOHN HENRY AT (574) 232-2091

