



Pipeline Safety Division Investigation Report

Investigation regarding: Rex Construction

UPPAC Database Record ID: 4678

Report Date: 8/19/2013

Investigator: Mike Orr

Damage Date: 5/1/2013 9:19:19 AM

Damage Address: N Ohio St, Hobart, Lake

The Parties

Excavator: **Rex Construction**

Address: 700 Schiller Avenue, Schererville, In 46375

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Drainage

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: No
4/8/2013

Indiana 811 Ticket Number: 1304041477

Original Start Date:

Locate Instructions: STARTING AT THE INTERSECTION----LOCATE HEADING SOUTH ON BOTH SIDES OF N OHIO ST FOR APPROX 450 FEET

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Indiana 811; excavator did not respond to initial notice mailed 7/10/2013. Excavator failed to maintain a current locate ticket; therefore, there was no locate ticket when damage occurred.

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

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



150 West Market Street, Suite 600
Indianapolis, IN 46204

August 12, 2013

[Via Electronic Transmission – PipelineDamageCase@urc.in.gov](mailto:PipelineDamageCase@urc.in.gov)

Pipeline Safety Division – Case No. 4678
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4678

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: 5/1/2013

Event Location: N Ohio St

City: Indianapolis

Facility Owner: Nipsco

Excavator: Rex Construction

Other Party: N/A

Pipeline Division Case No. 4678

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. 4678	
Date of Event	5/1/2013
Event Location	N Ohio St
Event City	Hobart
Facility Owner	Nipsco
Excavator	Rex Construction
Date of IURC Information Request	July 12, 2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	
RESPONSIBLE PARTY PERSONAL NAME	Rex Construction (Hammond LOA)
TITLE (IF ANY)	
ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
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	423 N Ohio Street
CITY/STATE/ZIP	Hobart, IN,
NEAREST INTERSECTION	
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.)	3/4"
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	Yes
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	
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/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trancher	
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)	X
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 1305010780
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	No

INDIANA 811 LOCATE TICKET NUMBER	N/A
LOCATE MARKS VISIBLE (YES/NO)	No
LOCATE MARKS CORRECT (YES/NO)	
EXCAVATOR "WHITE LINED" (YES/NO)	No
MAPS USED TO MARK FACILITIES (YES/NO)	No
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	No
INCIDENT IMPACT INFORMATION	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	N/A
POLICE DEPARTMENT RESPONSE (YES/NO)	N/A
AMBULANCE RESPONSE (YES/NO)	N/A
ADDITIONAL INFORMATION/COMMENTS	
<p>No notification made to the one-call center NIPSCO Emergency Repair Ticket Number: 1305011072</p>	

Fact Based Investigation Report

Notification ID 01820130501007
Damage Date 05/01/2013 08:30
Notified By ANISA BAILEY (Facility Owner)
Damage Address 423 N OHIO ST E 40TH ST (LAKE CTY)
HOBART (HOBART TWP) , IN
District Northern Indiana
Notification Date 05/01/2013 10:21

Damaged Customer NIPSCO

Investigation Date From 05/01/2013 08:40:00 **To** 05/01/2013 10:40:00

Excavator Involved REX CONSTRUCTION

Type of Excavation Storm & Sewer

Orig. Locate Request 1304041477 **Start Date** 04/08/2013 11:45
Type of Ticket Ongoing Project **Locate Req. Info** N/A

Damage Request # 1305010780 **Start Date** 05/01/2013 09:15

Pictures Taken By Scott Day **Date** 05/01/2013 08:40

Photography Type Digital **Frame #** 1

Investigator Emp. # 131986 **Investigator Name** Scott Day

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 # Day Scott - 131986 **Locator Not Known**

Investigation Findings

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

Contractor is still working on the storm & sewer project in area and while working on Ohio st in front of this address, the backhoe operator accidentally caught the steel gas service with the bucket and pulled it out of sleeve at curb box. Service did still have flags visible and paint was almost gone. Marked accurately.

Names of Utility Representatives Contacted or on Site and Statement

Nipsco crew from Gary LOA made necessary repairs

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

Jeff Rex stated that they caught it with a tooth on the bucket.

Other individuals on site

Tommy Buher from Nipsco Damage Prevention also verified investigation findings as accurate. Stated that the contractor is working on an expired ticket.

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	damage to steel gas service
Replacement Footage	N/A
Was contractor assistance required? If yes, who?	No
What contractor equipment was used?	Backhoe
Is the facility shown on the utility records?	No
If yes, list record numbers	

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

NIPSCO 00185 IUPPSa 05/01/2013 09:19:27 1305010780-00A EMER DAMG GRID

DAMAGE DAMAGE

Ticket : 1305010780 Date: 05/01/2013 Time: 09:18 Oper: STURNER Chan:055

State: IN Cnty: LAKE Twp: HOBART
Cityname: HOBART Inside: Y Near: N
Subdivision:

Address :

Street : N OHIO ST

Cross 1 : E 40TH AVE Within 1/4 mile: Y

Location: STARTING AT THE INTERSECTION----LOCATE HEADING SOUTH ON BOTH SIDES OF
N OHIO ST FOR APPROX 450 FEET

:

Grids : 4132A8714B 4132B8714A 4132B8714B

Boundary: n 41.545865 s 41.543192 w -87.246150 e -87.244654

Work type : STORM/SANITARY SEWER INSTALL

Done for : CITY OF HOBART

Start date: 05/01/2013 Time: 09:18 Hours notice: 0/000 Priority: EMER

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

Duration : 2 WEEKS Depth: 15 FEET

Company : REX CONSTRUCTION Type: CONT

Co addr : 700 SCHILLER AVENUE

City : SCHERERVILLE State: IN Zip: 46375

Caller : NORMA MUNOZ Phone: (219)322-8090

Contact : ERIC REX-CELL Phone:

BestTime:

Mobile : (312)209-1007

Fax : (219)322-0031

Remarks : All tickets are taken and processed on Eastern Daylight Time
PER ERIC: NIPSCO A GAS SERVICE LINE WAS DAMAGED AT 423 OHIO ST SOUTH OF
INTERSECTION -- UNKNOWN SIZE AND UNKNOWN COLOR -GAS IS NOT BLOWING - CREW IS
ONSITE -- PREVIOUS TICKET 1304041477

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

:

Submitted date: 05/01/2013 Time: 09:18

Members: COMCN ID2227 ID6121 ID8000 NIPSCO SM

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

NIPSCO 00277 IUPPSa 05/01/2013 10:04:06 1305011072-00A EMER NEW STRT

EMERGENCY SEE REMARKS

Ticket : 1305011072 Date: 05/01/2013 Time: 10:00 Oper: SLUCAS Chan:060

State: IN Cnty: LAKE Twp: HOBART
Cityname: HOBART Inside: Y Near: N
Subdivision:

Address : 423
Street : N OHIO ST
Cross 1 : E 40TH AVE Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY
:
Grids : 4132B8714A 4132B8714B
Boundary: n 41.545825 s 41.542919 w -87.246142 e -87.244640

Work type : REPAIRING GAS LINE
Done for : NIPSCO
Start date: 05/01/2013 Time: 10:02 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 : ANNISA BAILEY Phone: (800)322-2806
Contact : MATT GRAY - CELL Phone:
BestTime:
Mobile : (219)314-2967
Fax : (219)647-4764

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

Submitted date: 05/01/2013 Time: 10:00
Members: COMCN ID2227 ID6121 ID8000 NIPSCO SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA 150 MAXIMO WO # _____

OPERATING AREA CONTACT _____ JOB ORDER # 9443162032 477240

TRACKING NUMBER _____ LOCATE REF # _____

Locate Performed By: _____

DATE AND TIME OF ACCIDENT 5-1-13 2013 8⁰⁰ M DATE OF REPORT 5-1-13

PLACE OF DAMAGE (INCLUDE CITY) 425 N. 26th St.

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) 21 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 8:25 AM TIME RESTORED 10:45

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 3/4"

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

PARTY THAT CAUSED DAMAGES (NAME) REN CONSTRUCTION

ADDRESS OF PARTY (INCLUDE CITY) _____

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE _____

WITNESS NAME AND ADDRESS _____

WITNESS REMARKS _____

AGENCIES NOTIFIED / ONSITE: POLICE () AGENCY _____ REPORT # _____
FIRE () AGENCY _____ REPORT # _____
OTHER () _____ Any Injuries? () YES # _____ () NO NO

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

WORK IN PROGRESS WHEN FACILITY DAMAGED - CHECK APPROPRIATE CHOICE BELOW

<input type="checkbox"/> AGRICULTURE/FARMING	<input type="checkbox"/> CABLE TV	<input type="checkbox"/> CURB/SIDEWALK	<input type="checkbox"/> TELECOMMUNICATIONS
<input type="checkbox"/> BLDG CONSTRUCTION	<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> DRAINAGE	<input type="checkbox"/> WATER
<input type="checkbox"/> DRIVEWAY	<input type="checkbox"/> ELECTRIC	<input type="checkbox"/> SURVEYING	<input checked="" 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	

TYPE OF EQUIPMENT USED - CHECK APPROPRIATE CHOICE BELOW

<input type="checkbox"/> AUGER	<input type="checkbox"/> HAND TOOLS	<input checked="" type="checkbox"/> BACKHOE/TRACKHOE
<input type="checkbox"/> MILLING EQUIPMENT	<input type="checkbox"/> PROBING DEVICE	<input type="checkbox"/> BORING / DRILLING
<input type="checkbox"/> EXPLOSIVES	<input type="checkbox"/> TRENCHER	<input type="checkbox"/> FARM EQUIPMENT
<input type="checkbox"/> VACUUM 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"/> NO NOTIFICATION	<input type="checkbox"/> MARKS DISTURBED	<input type="checkbox"/> OTHER _____



05/01/2013 08:49

Property of United States Infrastructure Corporation
Photo taken on 5/1/2013 8:49:50 AM