



Pipeline Safety Division Investigation Report

Investigation regarding: Town of Etna Green

UPPAC Database Record ID: 4716

Report Date: 11/13/13

Investigator: Mike Orr

Damage Date: 4/12/2013

Damage Address: 518 N. Pearl Street, Etna Green, Kosciusko

The Parties

Excavator: **Town of Etna Green**

Address: Po Box 183, Etna Green, In 46524

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Water

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: 1304093728

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

Synopsis: Excavator struck and damaged an underground natural gas main while performing sewer work.

Findings: Reported by Carrie Ludwig (NIPSCO); excavator's response to initial notice was received on 8/1/2013. The excavator had a valid locate request; however, they used mechanized equipment within two (2) feet of the marked facility. They pulled a service tee from the top of the marked gas main. The gas operator reported a representative from the excavator as saying "normal procedure is to scrape the top of the main with the bucket." No other supporting documentation was provided. This is the finding after being remanded back to PSD for further review.

Conclusion: There was a failure to maintain clearance within the tolerance zone 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

August 12, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4716
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4716

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: 4/12/2013

Event Location: 518 N. Pearl Street

City: Indianapolis

Facility Owner: Nipsco

Excavator: Town Of Etna Green

Other Party: N/A

Pipeline Division Case No. 4716

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. 4716	
Date of Event	4/12/2013
Event Location	518 N. Pearl Street
Event City	Etna Green
Facility Owner	Nipsco
Excavator	Town Of Etna Green
Date of IURC Information Request	July 12, 2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Town of ETNA Green
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	PO Box 183
CITY/ STATE/ZIP	Etna Green / IN / 46524
PREFERRED TELEPHONE	574-858-9321
CELL PHONE TELEPHONE	
EMAIL ADDRESS	etnaclerk@gmail.com
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	518 N Pearl Street
CITY/STATE/ZIP	ETNA Green / IN /
NEAREST INTERSECTION	
PRODUCT TYPE (Select One)	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
FACILITY TYPE (Select One)	
DISTRIBUTION	X
GATHERING	
SERVICE/DROP	
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	2"
PRESSURE (PSIG/INCHES)	30
INTERRUPTION IN SERVICE (YES/NO)	Yes
NUMBER OF CUSTOMERS AFFECTED	5
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	

Trencher	
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	
Traffic Signal	
Traffic Sign	
Water	X
Waterway Improvement	
Unknown/Other	
RELEASE OF PRODUCT (YES/NO)	Yes
IGNITION AND/OR FIRE (YES/NO)	No
EXCAVATOR NOTIFY 811 (YES/NO)	No
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	Yes

INDIANA 811 LOCATE TICKET NUMBER	1304093728
LOCATE MARKS VISIBLE (YES/NO)	Yes
LOCATE MARKS CORRECT (YES/NO)	Yes
EXCAVATOR "WHITE LINED" (YES/NO)	No
MAPS USED TO MARK FACILITIES (YES/NO)	Yes
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>Failure to use hand tools where required NIPSCO Emergency Repair Ticket Number: 1304121563.</p>	

Fact Based Investigation Report

Notification ID 01820130412002
Damage Date 04/12/2013 09:20
Notified By ANGEL SHOEHURT (Facility Owner)
Damage Address 518 N PEARL ST X W MORTH STREET (KOSCIUSKO COUNTY)
ETNA GREEN, IN
District Northern Indiana
Notification Date 04/12/2013 11:50

Damaged Customer NIPSCO

Investigation Date From 04/12/2013 10:45:00 **To** 04/12/2013 11:00:00

Excavator Involved TOWN OF ETNA GREEN

Type of Excavation Repairing Waterline

Orig. Locate Request 1304093728 **Start Date** 04/11/2013 17:30
Type of Ticket Routine **Locate Req. Info** N/A

Damage Request # 1304121563 **Start Date** 04/12/2013 10:25

Pictures Taken By Dan Schlemmer **Date** 04/12/2013 10:30

Photography Type Digital **Frame #**

Investigator Emp. # 128296 **Investigator Name** Sean Travis

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 # Bach Brent - 136303 **Locator Not Known**

Investigation Findings

Other

Other Notes

Facility was not marked

Investigation Methods

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

Investigator Statement/Causal Factors

Service line to house accross street was not marked. Contractor hit line at main, which was marked accurately. The contractor did not hand dig facility and scraped the service off of the main, damaging facility.

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

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?	No
Extent of facility damage	pulled from tee
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	n/a

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA PLYMOUTH MAXIMO WO #

OPERATING AREA CONTACT BOB SOMERS JOB ORDER # 588946

TRACKING NUMBER 01800130412002 LOCATE REF # 1304093728

Locate Performed By:

DATE AND TIME OF ACCIDENT 4/12 2013 1022 P DATE OF REPORT 4/12/13

PLACE OF DAMAGE (INCLUDE CITY) 5182523 PEARL ST - ETNA GREEN

DAMAGE WAS TO:

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

OTHER (DESCRIBE)

GAS: SERVICE () MAIN X SIZE 2" MATERIAL: PLASTIC () STEEL X METER () REG STATION () STUB ()

OTHER (DESCRIBE)

DEPTH OF FACILITY (inches) 28" PRESSURE (PSI) 30 Lbs.

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

INTERRUPTION OF SERVICE: YES X NO () NUMBER OF CUSTOMERS LOST: 5

DURATION OF INTERRUPTION: TIME REPORTED 1022 TIME SHUT OFF 1530 TIME RESTORED 1800

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 1/2"

LOCATE MARKS ON SITE: YES X DISTANCE BETWEEN FACILITY AND LOCATE MARKS 3" NO ()

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

PARTY THAT CAUSED DAMAGES (NAME) TOWN OF ETNA GREEN

ADDRESS OF PARTY (INCLUDE CITY)

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

WITNESS NAME AND ADDRESS

WITNESS REMARKS STATES: NORMAL PROCEEDURE TO SCRAPE TOP OF MAIN

AGENCIES NOTIFIED / ONSITE: POLICE () AGENCY REPORT # W/ BUCKET

FIRE () AGENCY REPORT #

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

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

WORK IN PROGRESS WHEN FACILITY DAMAGED - CHECK APPROPRIATE CHOICE BELOW

- () AGRICULTURE/FARMING () CABLE TV () CURB/SIDEWALK () TELECOMMUNICATIONS
() BLDG CONSTRUCTION () DEMOLITION () DRAINAGE X 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 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 X CARELESS MACHINE OPERATOR
() NO NOTIFICATION () MARKS DISTURBED () STUB () OTHER

SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

COMMENTS: TOWN OF ETNA GREEN REPAIR WATER LEAK AT
518 PEARL HIT SVC TEE ON MAIN FOR
523 PEARL ST

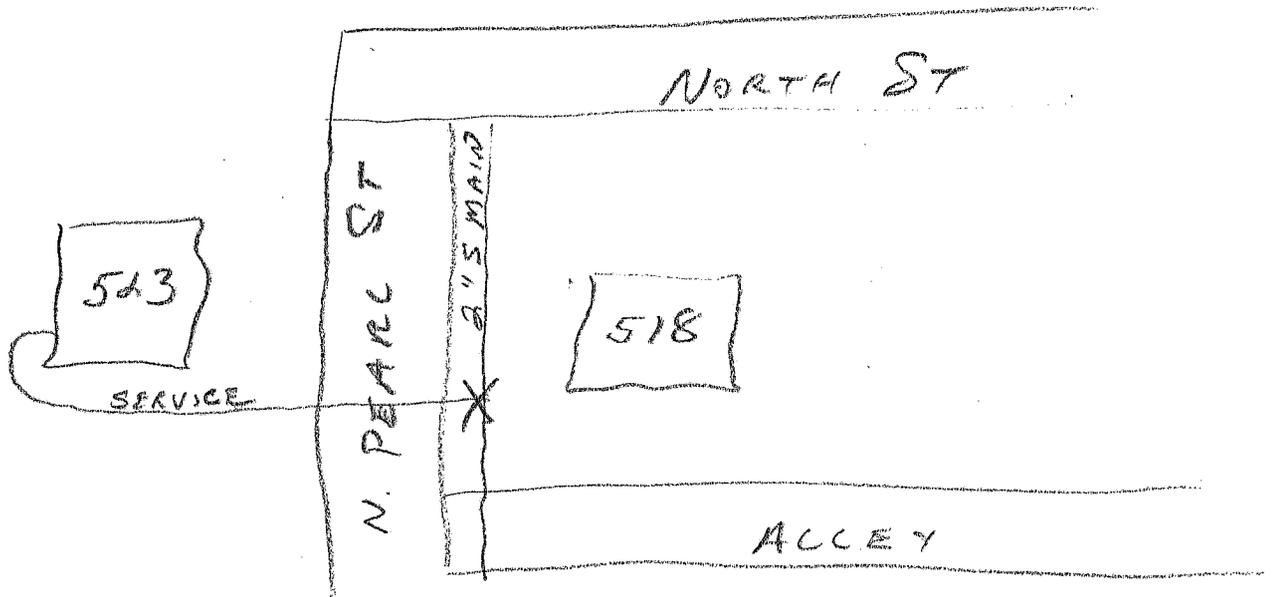
PERSON PREPARING REPORT JAMES GREATHOUSE

FIELD SUPERVISOR BOB SOMERS

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: JAMES GREATHOUSE DATE: 4/12/13

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA PLYMOUTH MAXIMO WO # 60548967200
OPERATING AREA CONTACT BOB SEMERS JOB ORDER # 589024
TRACKING NUMBER 01820130412005 LOCATE REF #
Locate Performed By: USC

DATE AND TIME OF ACCIDENT 4/12 2013, 1221 M DATE OF REPORT 4/12/13
PLACE OF DAMAGE (INCLUDE CITY) 227 GARRO ST. - PLYMOUTH

DAMAGE WAS TO:

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

OTHER (DESCRIBE)

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

DEPTH OF FACILITY (inches) 24" PRESSURE (PSI) 30 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 1230 TIME SHUT OFF 1530 TIME RESTORED RETIRED

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

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) CITY OF PLYMOUTH

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

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 () 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 SVC Not RETIRED

SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

COMMENTS: SERVICE NOT RETIRED BEFORE
DEMO

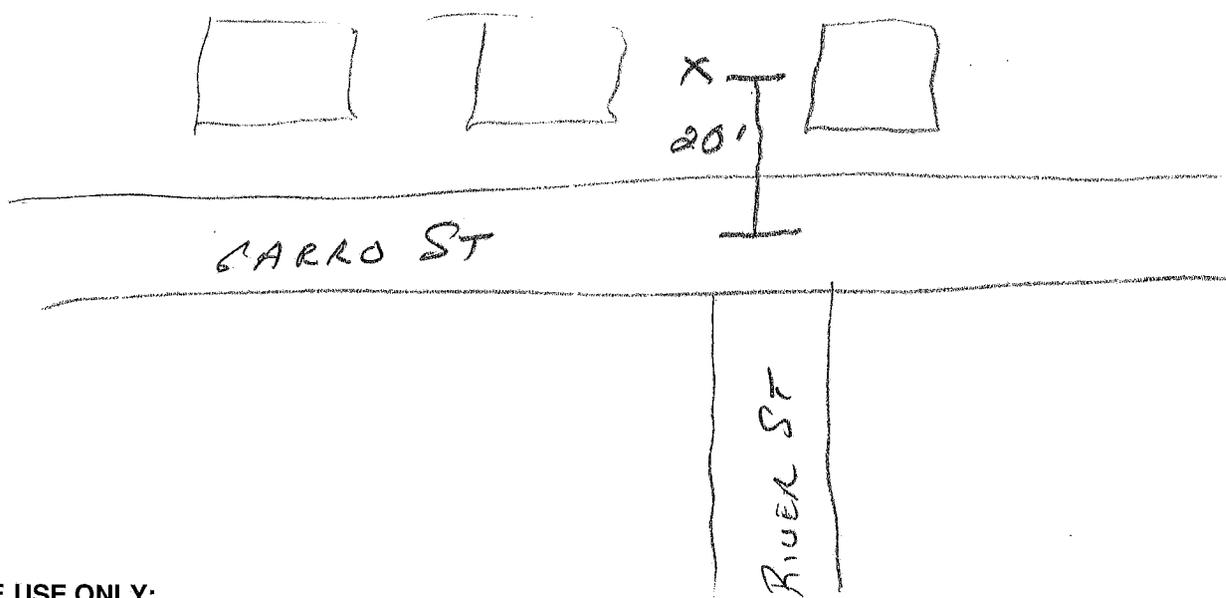
PERSON PREPARING REPORT Kevin Leffert 121457

FIELD SUPERVISOR BOB SOMERS

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: Kevin Leffert DATE: 4/12/13

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

NIPSCO 01220 IUPPSa 04/09/2013 17:22:18 1304093728-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1304093728 Date: 04/09/2013 Time: 17:08 Oper: MMILLER Chan:001

State: IN Cnty: KOSCIUSKO Twp: ETNA
Cityname: ETNA GREEN Inside: Y Near: N
Subdivision:

Address : 518
Street : N PEARL ST
Cross 1 : W NORTH ST Within 1/4 mile: Y
Location: LOCATE THE SOUTHWEST CORNER OF THE PROPERTY
:
Grids : 4116A8602A
Boundary: n 41.281745 s 41.279788 w -86.049123 e -86.047646

Work type : REPAIR WATER MAIN
Done for : PROPERTY OWNER
Start date: 04/11/2013 Time: 17:30 Hours notice: 48/048 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 1 DAY Depth: 4 FEET

Company : TOWN OF ETNA GREEN Type: OTHR
Co addr : P O BOX 183
City : ETNA GREEN State: IN Zip: 46524
Caller : BARRY BAKER Phone: (574)858-9321
Contact : BARRY BAKER- CELL Phone:
BestTime:
Mobile : (574)305-0899
Fax : (574)858-2836
Email : ETNACLERK@GMAIL.COM

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

Submitted date: 04/09/2013 Time: 17:08
Members: COMCN ID8000 ID9321 NIPSCO SM

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

NIPSCO 00563 IUPPSa 04/12/2013 11:43:10 1304121563-00A EMER NEW GRID

EMERGENCY SEE REMARKS

Ticket : 1304121563 Date: 04/12/2013 Time: 11:39 Oper: SHARRIS Chan:017

State: IN Cnty: KOSCIUSKO Twp: ETNA
Cityname: ETNA GREEN Inside: Y Near: N
Subdivision:

Address : 518
Street : N PEARL ST
Cross 1 : W NORTH ST Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY
:
Grids : 4116A8602A 4116B8602A
Boundary: n 41.281734 s 41.278701 w -86.049114 e -86.047594

Work type : REPAIR GAS LINE
Done for : NIPSCO
Start date: 04/12/2013 Time: 11:41 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 : ANGELA SCHUFFERT Phone: (800)322-2806
Contact : BOB SUMMERS--CELL Phone:
BestTime:
Mobile : (574)274-2451
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: 04/12/2013 Time: 11:39
Members: COMCN ID3150 ID3151 ID4752 ID8000 ID9321 NIPSCO SM



Property of United States Infrastructure Corporation
Photo taken on 8/12/2017 1:26:50 PM



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Apr 23, 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: Town of ETNA Green

Business address (*number and street*): PO Box 183

City, State, and ZIP code: Etna Green, IN 46524

Telephone number (*area code*): (574)858-9321

Fax number (*area code*): (574)858-2836

E-mail address: etnaclerk@gmail.com

Excavation or Demolition Information

Excavator type: Municipality

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Water

Date and Location of Damage

Date of damage (*month, day, year*): Apr 12, 2013

County: Kosciusko

City: Etna Green

Street address (*number and street, city, state, and ZIP code*):
518 N. Pearl Street

Nearest intersection: W North Street

Right of way where damage occurred: Unknown/Other

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? _____

Time to restore service (*in hours*): 5

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? Distribution

What was the depth of the facility, in inches? 28

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1304093728

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? Unknown/Other

Description of Cause

Select from the list the most accurate cause for the damage: --Wrong information provided

Additional Comments

Excavator dug outside scope of ticket on adjacent property.

Emergency ticket# 1304121563.



INFORMATION REQUEST

State Form 54909 (R / 3-13)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 4716 _____

Date of Damage (*month, day, year*): April 12, 2013 _____

Location of Damage:

Address (*number and street*): 518 N. Pearl Street _____

City, State and ZIP Code: Etna Green, IN 46524 _____

Nearest Intersection: Pearl & North Street _____

Excavator Information:

Business Name: Town of Etna Green _____

Responsible Party Personal Name: Barry Baker _____

Title (*if any*): Utilities Superintendent _____

Address (*number and street*): PO Box 183 _____

City, State and ZIP Code: Etna Green, IN 46524 _____

Preferred Telephone Number (*area code*): 574-858-9321 _____

Email Address: _____

Utility Information:

Utility Name: NIPSCO _____

Contact Person: _____

Title (*if any*): _____

Cause of Damage Information

Type of Equipment *(select one)*:

Backhoe/Trackhoe

Type of Work Performed *(select one)*:

Water

Repair Cost: \$ _____

Did a leak result from damage: Yes No

Was there ignition: Yes No

Excavator Notify 911 due to leak: Yes No

Excavator Notify 811 upon damage: Yes No

Excavator Notify Utility upon Damage: Yes No

Locate Information

Excavator Request Locate: Yes No

Indiana 811 Locate Ticket Number: _____

Locate Marks Visible: Yes No

Locate Marks Correct: Yes No

Excavator "White Lined": Yes No

Was Locate Provided within Two (2) Working Days: Yes No

Utility Employees On-site during Excavation: Yes No

Incident Information:

Fire Department Response: Yes No

Police Department Response: Yes No

Ambulance Response: Yes No

Additional Information / Comments

See attached statement with supporting photographs sent via email.

Printed Name: Barry Baker

Signature: Barry Baker

Date (month, day, year): 7/29/2013

**If submitting this form electronically, typing your name in the signature box will act as an electronic signature.*

Please return completed form to:

PipelineDamageCase@urc.in.gov

Or mail to:

**Indiana Utility Regulatory Commission
Pipeline Safety Division - Case Number _____
101 West Washington Street, 1500E
Indianapolis, IN 46204**

Or fax to:

317-233-2410