



## Pipeline Safety Division Investigation Report

### Investigation regarding: Andrew Silvernail

UPPAC Database Record ID: 4774

Report Date: 8/16/2013

Investigator: Howard Friend

Damage Date: 4/15/2013

Damage Address: 715 Forest Avenue, South Bend, St. Joseph

### The Parties

Excavator: Andrew Silvernail

Address: 1118 Beale Street, South Bend, In 46616

Facility Owner: NIPSCO

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Hand Tools

Type of Work Performed: Fencing

### 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

Indiana 811 Ticket Number: Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

**Synopsis:** Excavator/homeowner struck and damaged an underground natural gas service while performing fencing work.

**Findings:** Reported by Carrie Ludwig (NIPSCO); excavator/homeowner did not respond to initial notice mailed 7/10/2013. The excavator/property owner failed to provide notice of excavation prior to installing the fence post.

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

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



150 West Market Street, Suite 600  
Indianapolis, IN 46204

August 12, 2013

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

Pipeline Safety Division – Case No. 4774  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4774

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: 4/15/2013

Event Location: 715 Forest Avenue

City: Indianapolis

Facility Owner: Nipsco

Excavator: Andrew Silvernail

Other Party: N/A

Pipeline Division Case No. 4774

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](mailto:cearle@nisource.com)

<b>IURC INFORMATION REQUEST</b>	
<b>Pipeline Safety Division Case No. 4774</b>	
Date of Event	4/15/2013
Event Location	715 Forest Avenue
Event City	South Bend
Facility Owner	Nipsco
Excavator	Andrew Silvernail
Date of IURC Information Request	July 12, 2013
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	
RESPONSIBLE PARTY PERSONAL NAME	Andrew Silvernail
TITLE (IF ANY)	
ADDRESS	1118 Beale Street
CITY/ STATE/ZIP	South Bend / IN / 46616
PREFERRED TELEPHONE	574-440-0797
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
<b>FACILITY INFORMATION - OWNER/OPERATOR OF UTILITY LINE:</b>	
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
<b>LOCATOR SERVICE INFORMATION</b>	
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@usinc.com
<b>OTHER (WITNESS, POLICE, FIRE, OTHER) INFORMATION</b>	
PERSONAL CONTACT	
BUSINESS/ORGANIZATION NAME	
TITLE (IF ANY)	

ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
<b>UTILITY LINE IMPACT</b>	
<b>LOCATION OF DAMAGE</b>	
ADDRESS	715 (717) Forest Avenue
CITY/STATE/ZIP	South Bend / IN /
NEAREST INTERSECTION	
<b>PRODUCT TYPE (Select One)</b>	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
<b>FACILITY TYPE (Select One)</b>	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	5/8"
PRESSURE (PSIG/INCHES)	35
INTERRUPTION IN SERVICE (YES/NO)	Yes
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	
REPAIR COST (IF KNOWN) (\$)	
<b>CAUSE OF DAMAGE INFORMATION:</b>	
<b>TYPE OF EQUIPMENT (Select One)</b>	
Auger	
Backhoe/Trackhoe	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	X
Milling Equipment	
Probing Device	

Trencher	
Vacuum Equipment	
Unknown/Other	
<b>TYPE OF WORK PERFORMED (Select One)</b>	
Agriculture	
Cable TV	
Curb/Sidewalk	
Bldg. Construction	
Bldg. Demolition	
Drainage	
Driveway	
Electric	
Engineering/Surveying	
Fencing	X
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)	Yes
IGNITION AND/OR FIRE (YES/NO)	No
EXCAVATOR NOTIFY 811 (YES/NO)	No
<b>LOCATE INFORMATION:</b>	
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
<b>INCIDENT IMPACT INFORMATION</b>	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	Yes
POLICE DEPARTMENT RESPONSE (YES/NO)	N/A
AMBULANCE RESPONSE (YES/NO)	N/A
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
<p>No notification made to the one-call center.  NIPSCO Emergency Repair Ticket Number: 1304153455.</p>	

Fact Based Investigation Report

**Notification ID** 01820130415012  
**Damage Date** 04/15/2013 14:25  
**Notified By** TENNILLE FORD (Facility Owner)  
**Damage Address** 715 FOREST AVE X MANITOU ST JOSEPH/PORTAGE  
SOUTH BEND, IN  
**District** Northern Indiana  
**Notification Date** 04/15/2013 15:40

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**Damaged Customer** NIPSCO

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**Investigation Date From** 04/15/2013 16:45:00 **To** 04/15/2013 17:45:00

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**Excavator Involved** Homeowner

**Type of Excavation** FENCE POST INSTALLABION

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

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**Damage Request #** M84831801 **Start Date** 04/15/2013 00:00

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**Pictures Taken By** B ARENS **Date** 04/15/2013 17:00

**Photography Type** Digital **Frame #**

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**Investigator Emp. #** 113463 **Investigator Name** BRIAN ARENS

**Based on your investigation, is further investigation needed?** No

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**Fact Based Investigation Customer Information**

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

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**Investigation Findings**

No Locate Req. By Contractor

**Other Notes**

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**Investigation Methods**

Investigation Results Verified By Utility Representative  
Visual, Facility Exposed At Time Of Investigation

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**Investigator Statement/Causal Factors**

NO PAINT ONSITE, ONE VERY OLD GAS FLAG FOUND BESIDE FENCE INDICATING THE PRESENCE OF GAS. NO KNOWN LOCATE REQUEST. THIS DAMAGE WAS CALLED IN BY NIPSCO @ 715 FOREST. THE PO OF 717 WAS DIGGING IN THE REAR OF HIS PROPERTY W/O A LOCATE REQUEST, HE STRUCK THE 5/8" PL GAS SERVICE OF THE 715 FOREST HOME. THIS DAMAGED SERVICE WAS STRUCK RIGHT AT THEIR PROPERTY LINE BY EXIXTING FENCE NEAR THE ALLEY AND MAIN.

**Names of Utility Representatives Contacted or on Site and Statement**

Ticket called in after damage 1304153751

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

NO

**Other individuals on site**

NA

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<b>Were any markings visible on the damage site upon arrival?</b>	No
<b>Were any other indicators of facility present in the area?</b>	Yes
<b>Was the excavation within the tolerance zone of marks?</b>	No
<b>Extent of facility damage</b>	CUT
<b>Replacement Footage</b>	1'
<b>Was contractor assistance required? If yes, who?</b>	No NA
<b>What contractor equipment was used?</b>	NA
<b>Is the facility shown on the utility records?</b>	No
<b>If yes, list record numbers</b>	NA

Facility: Distribution Lines; Folder: REGION 2; Assigned To: N/A

NIPSCO 01105 IUPPSa 04/15/2013 16:31:53 1304153455-00A EMER NEW STRT

EMERGENCY EMERGENCY

Ticket : 1304153455 Date: 04/15/2013 Time: 16:28 Oper: DBROOKING Chan:008

State: IN Cnty: ST JOSEPH Twp: PORTAGE  
Cityname: SOUTH BEND Inside: Y Near: N  
Subdivision:

Address : 715  
Street : FOREST AVE  
Cross 1 : MANITOU PL Within 1/4 mile: Y  
Location: LOCATE ENTIRE PROPERTY--CREW IS EN ROUTE--THANK YOU  
:  
Grids : 4141D8615C  
Boundary: n 41.685768 s 41.683656 w -86.258113 e -86.256633

Work type : REPAIR GAS LINE  
Done for : NIPSCO  
Start date: 04/15/2013 Time: 16:29 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 : TENNILLE FORD Phone: (800)322-2806  
Contact : RICH WALGREN - CELL Phone:  
BestTime:  
Mobile : (574)360-9736  
Fax : (219)647-4764

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

Submitted date: 04/15/2013 Time: 16:28  
Members: AEPIN COMCN ID5610 NIPSCO SBCIN SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA S. BEND MAXIMO WO #
OPERATING AREA CONTACT RICH WAHLGREN JOB ORDER # 589586
TRACKING NUMBER 018201304150012 LOCATE REF #
Locate Performed By:

DATE AND TIME OF ACCIDENT 4-15 2013 4:17P M DATE OF REPORT 4-15-13
PLACE OF DAMAGE (INCLUDE CITY) 715 FOREST AVE S. BEND

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) 36 PRESSURE (PSI) 35 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 4:17 P.M. TIME RESTORED 17:40

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 5/8" 1/2"

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

PARTY THAT CAUSED DAMAGES (NAME) ANDREW SILVERNAIL

ADDRESS OF PARTY (INCLUDE CITY) 1118 BEALE ST. S. BEND

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE ANDREW SILVERNAIL 574-440-0797

WITNESS NAME AND ADDRESS NONE

WITNESS REMARKS NONE

AGENCIES NOTIFIED / ONSITE: POLICE ( ) AGENCY REPORT #
FIRE ( ) AGENCY S. BEND F.D. 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

SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

COMMENTS: LANDSCAPER HIT 5/8" PLASTIC

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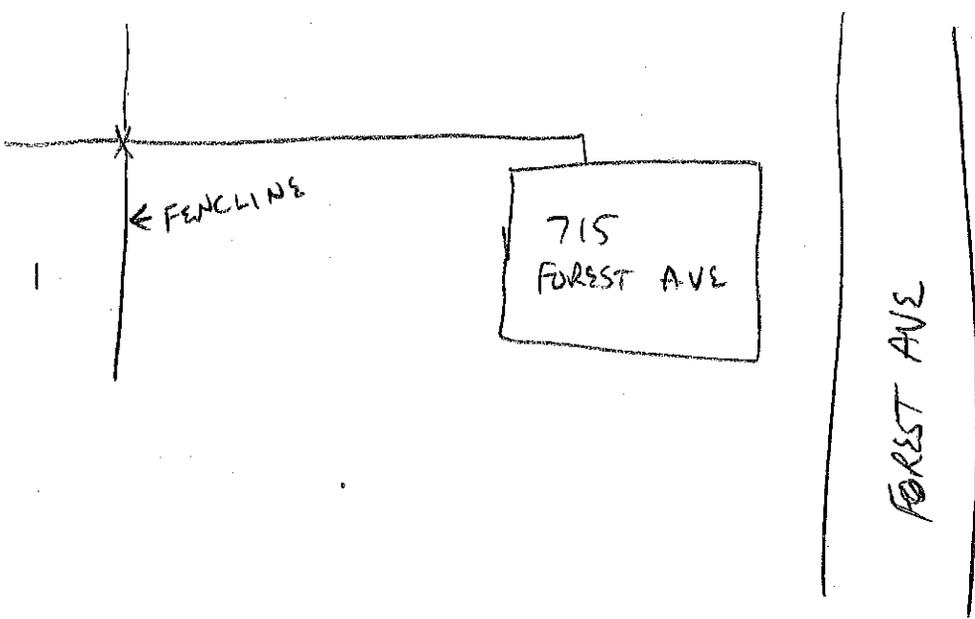
PERSON PREPARING REPORT KURT BRANDON 121722

FIELD SUPERVISOR TONY LOPEZ

FIELD MANAGER GARY DOGGE Gary Dogge

- 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: \_\_\_\_\_



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Apr 26, 2013

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### 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

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### Excavator Information, if known

Full name: Andrew Silvernail

Business address (*number and street*): 1118 Beale Street

City, State, and ZIP code: South Bend, IN 46616

Telephone number (*area code*): (574)440-0797

Fax number (*area code*): \_\_\_\_\_

E-mail address: \_\_\_\_\_

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### Excavation or Demolition Information

Excavator type: Unknown/Other

Excavation or demolition equipment: Hand Tools

Type of work performed: Fencing

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**Date and Location of Damage**

Date of damage (*month, day, year*): Apr 15, 2013

County: St. Joseph

City: South Bend

Street address (*number and street, city, state, and ZIP code*):  
715 Forest Avenue

Nearest intersection: Manitou Place

Right of way where damage occurred: Private - Land Owner

Was there a release of product? Yes

If yes, was there an ignition of product? No

Were evacuations necessary as a result of release? No

If yes, how many evacuated? \_\_\_\_\_

Was there a customer service interruption? Yes

If yes, how many affected? 1

Time to restore service (*in hours*): 13

Enter number of injuries, if applicable and known: \_\_\_\_\_

Enter number of fatalities, if applicable and known: \_\_\_\_\_

Property damage, Estimate \$ \_\_\_\_\_

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**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? 36

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**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? No

Enter Indiana 811 ticket number, if known: \_\_\_\_\_

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

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

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

Were facility marks visible in the area of excavation? No

Were facilities marked correctly? Unknown/Other

Type of markings used: Other

If other, please specify: \_\_\_\_\_

Was site marked by "White Lining"? No

Were special instructions part of the locate request?

Were maps used to complete the locate request? Unknown/Other

Were pipeline company representatives on site during excavation? No

Did the excavator notify the operator in the event of this damage? Yes

Did the excavator notify Indiana 811 in the event of this damage? No

Did the excavator notify 911 in the event of a release of product? Yes

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### **Description of Cause**

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

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### **Additional Comments**

Emergency ticket# 1304153455.