



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 Neises Construction Corporation

UPPAC Database Record ID: 5011

Report Date: 9/26/2013

Investigator: Mike Orr

Damage Date: 6/21/2013 10:53:58 AM

Damage Address: 12790 Ellsworth Pl, Center, Lake

### The Parties

Excavator: **Robert Neises Construction Corporation**

Address: Po Box 268, Crown Point, In 46308

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  
6/17/2013

Indiana 811 Ticket Number: 1306131969

Original Start Date:

Locate Instructions: LOCATE THE ENTIRE PROPERTY AND THE EASEMENTS

Follow-Up Locate Instructions (if applicable):

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

**Findings:** Reported by Indiana 811; excavator's response to initial notice was received on 8/29/2013. Excavator failed to maintain required clearance from the gas service with the mini-trackhoe.

**Conclusion:** There was a failure to use hand 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

August 26, 2013

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

Pipeline Safety Division – Case No. 5011  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 5011

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: 6/21/2013  
Event Location: 12790 ELLSWORTH PL  
City: CENTER  
Facility Owner: NIPSCO  
Excavator: ROBERT NEISES CONSTRUCTION  
CORPORATION  
Other Party: N/A  
Pipeline Division Case No. 5011

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. 5011</b>	
Date of Event	6/21/2013
Event Location	2713 MOCKINGBIRD DR
Event City	ST JOHN
Facility Owner	NIPSCO
Excavator	AMERI DREAM FENCE
Date of IURC Information Request	July 26, 2013
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	
RESPONSIBLE PARTY PERSONAL NAME	Robert Neises Construction Corporation
TITLE (IF ANY)	
ADDRESS	PO BOX 268
CITY/ STATE/ZIP	Crown Point, IN 46308
PREFERRED TELEPHONE	219 663 3434
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@usicinc.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	12790 Ellsworth Place Lot 122
CITY/STATE/ZIP	Crown Point, IN, 46308
NEAREST INTERSECTION	Marshall St
<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)	
INTERRUPTION IN SERVICE (YES/NO)	No
NUMBER OF CUSTOMERS AFFECTED	0
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	X
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trancher	
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	
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)	Yes 1306211330
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	Yes

INDIANA 811 LOCATE TICKET NUMBER	1306131969
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
<b>INCIDENT IMPACT INFORMATION</b>	
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
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
<p>Failure to use hand tools where required  NIPSCO Emergency Repair Ticket Number: 1306211384</p>	

NORTHERN INDIANA PUBLIC SERVICE COMPANY  
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA 030 MAXIMO WO # 583998  
OPERATING AREA CONTACT MARK A. SANDS JOB ORDER # 1306131969  
TRACKING NUMBER 01120130621003 LOCATE REF # \_\_\_\_\_

DATE AND TIME OF ACCIDENT 6-21-13 9:46AM M 20 DATE OF REPORT 6-21-13  
PLACE OF DAMAGE (INCLUDE CITY) 12790 Elsworth PL Lot 122 Crown Point

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) 2ft PRESSURE (PSI) 40 Lbs. \_\_\_\_\_

RELEASE OF GAS: YES  NO ( ) IGNITION OF GAS: YES ( ) NO  EVACUATION REQUIRED: YES ( ) # \_\_\_\_\_ NO   
INTERRUPTION OF SERVICE: YES ( ) NO  NUMBER OF CUSTOMERS LOST: \_\_\_\_\_  
DURATION OF INTERRUPTION: TIME REPORTED 0946 TIME SHUT OFF 11:00 TIME RESTORED 11:30  
DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 5/8

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

PARTY THAT CAUSED DAMAGES (NAME) Neises Construction  
ADDRESS OF PARTY (INCLUDE CITY) 712-898-8032

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE Brandon  
WITNESS NAME AND ADDRESS Shawn Donchur  
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: \_\_\_\_\_  
MEDIA ON SITE YES ( ) NO

WORK IN PROGRESS WHEN FACILITY DAMAGED - CHECK APPROPRIATE CHOICE BELOW  
 AGRICULTURE/FARMING  CABLE TV  CURB/SIDEWALK  
 BLDG CONSTRUCTION  DEMOLITION  DRAINAGE  
 DRIVEWAY  ELECTRIC  SURVEYING  
 FENCING  GRADING  IRRIGATION  
 LANDSCAPING  PIPELINE  MILLING  
 POLE/SIGN POST  ROAD WORK  SEWER  
 TELECOMMUNICATIONS  
 WATER  
 DRAINS/CULVERTS  
 MOWING  
 OTHER \_\_\_\_\_

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 :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PERSON PREPARING REPORT

122052

FIELD SUPERVISOR

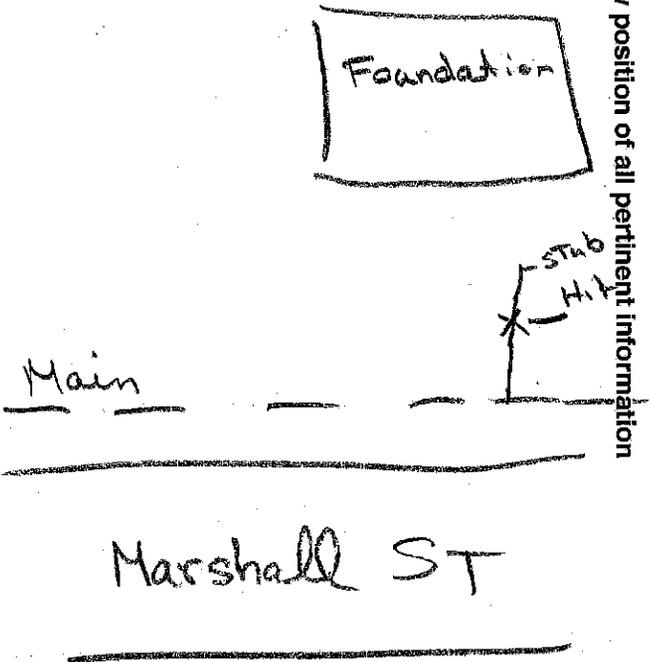
M. Schirsk

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 <sup>th</sup> ZONE | YES | NO |
| • EXPIRED LOCATE   | YES | NO |
| • WAS WHITE LINING INDICATED ON LOCATE REQUEST               | YES | NO |

COMPLETED BY:

\_\_\_\_\_

DATE:

\_\_\_\_\_

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

NIPSCO 00612 IUPPSa 06/13/2013 12:06:43 1306131969-00A NORM NEW GRID

NORMAL NOTICE REMARK SEE REMARKS

Ticket : 1306131969 Date: 06/13/2013 Time: 12:03 Oper: SFOX Chan:050  
Old Tkt: 1306104091 Date: 06/10/2013 Time: 17:02 Oper: ALYKINS Rev: 00A

State: IN Cnty: LAKE Twp: CENTER  
Cityname: CROWN POINT Inside: Y Near: N  
Subdivision: THE REGENCY Lot: 123

Address : 12790  
Street : ELLSWORTH PL  
Cross 1 : MARSHALL ST Within 1/4 mile: Y  
Location: LOCATE THE ENTIRE PROPERTY AND THE EASEMENTS  
:  
Grids : 4123C8721A 4123C8722D 4123D8721A 4123D8722D  
Boundary: n 41.388267 s 41.385109 w -87.369915 e -87.363323

Work type : SEWER AND WATER INSTALL  
Done for : PROVIDENCE HOMES  
Start date: 06/17/2013 Time: 12:15 Hours notice: 96/048 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 1 WEEK Depth: 8 FEET

Company : ROBERT NEISES CONSTRUCTION CORPORATION Type: CONT  
Co addr : PO BOX 268  
City : CROWN POINT State: IN Zip: 46308  
Caller : SHEREE BEES Phone: (219)663-3434  
Contact : SHEREE BEES - OFFICE Phone:  
BestTime:  
Mobile : (219)663-3434  
Fax : (219)663-3456

Remarks : All tickets are taken and processed on Eastern Daylight Time  
PER CHERLY ZIENIN - REMARK DUE TO WEATHER  
Will you be white-lining the dig site area? NO  
:

Submitted date: 06/13/2013 Time: 12:03  
Members: COMCN IB ID2287 NIPSCO SM

Facility: Transmission Lines; Folder: GM & T tickets; Assigned To: N/A

NIPSCO 00410 IUPPSa 06/21/2013 11:08:46 1306211384-00A EMER NEW PLCE

EMERGENCY SEE REMARKS

Ticket : 1306211384 Date: 06/21/2013 Time: 10:50 Oper: TSONS Chan:015

State: IN Cnty: LAKE Twp: CENTER  
Cityname: CROWN POINT Inside: Y Near: N  
Subdivision:

Address : 12790  
Street : ELLSWORTH PL  
Cross 1 : 127TH PL Within 1/4 mile: Y  
Location: LOCATE THE ENTIRE PROPERTY  
:  
Grids :  
Boundary: n 41.435280 s 41.347703 w -87.431282 e -87.294915

Work type : REPAIR GAS LINE  
Done for : NIPSCO  
Start date: 06/21/2013 Time: 10:52 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: CONT  
Co addr : 801 E 86TH AVE  
City : MERRILLVILLE State: IN Zip: 46410  
Caller : MARCIA KING Phone: (800)322-2806  
Contact : MIKE COAPSTICK--CELL Phone:  
BestTime:  
Mobile : (219)314-0384  
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: 06/21/2013 Time: 10:50  
Members: AN BE COMCN IB ID2227 ID2245 ID2287 ID2665 ID3133 ID4636  
ID4655 ID4866 ID5845 ID6784 ID7053 ID7478 ID7805 ID8240 ID8910 NIPSCO SM

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

NIPSCO 00392 IUPPSa 06/21/2013 10:53:59 1306211330-00A EMER DAMG GRID

DAMAGE SEE REMARKS

Ticket : 1306211330 Date: 06/21/2013 Time: 10:51 Oper: BLIEVERTZ Chan:058

State: IN Cnty: LAKE Twp: CENTER  
Cityname: CROWN POINT Inside: Y Near: N  
Subdivision: THE REGENCY Lot: 123

Address : 12790  
Street : ELLSWORTH PL  
Cross 1 : MARSHALL ST Within 1/4 mile: Y  
Location: LOCATE THE ENTIRE PROPERTY AND THE EASEMENTS  
:  
Grids : 4123C8721A 4123C8722D 4123D8721A 4123D8722D  
Boundary: n 41.388267 s 41.385109 w -87.369915 e -87.363323

Work type : SEWER AND WATER INSTALL  
Done for : PROVIDENCE HOMES  
Start date: 06/21/2013 Time: 10:52 Hours notice: 0/000 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 1 WEEK Depth: 8 FEET

Company : ROBERT NEISES CONSTRUCTION CORPORATION Type: CONT  
Co addr : PO BOX 268  
City : CROWN POINT State: IN Zip: 46308  
Caller : SHEREE BEES Phone: (219)663-3434  
Contact : SHEREE BEES - OFFICE Phone:  
BestTime:  
Mobile : (219)663-3434  
Fax : (219)663-3456

Remarks : All tickets are taken and processed on Eastern Daylight Time  
A NIPSCO GAS LINE WAS HIT IN THE WEST YARD OF THE PROPERTY AT 12790 ELLSWORTH PL  
- GAS LINE IS BLOWING - UNKNOWN IF THEY CAN HEAR OF SMELL IT - UNKNOWN  
SIZE/COLOR/MATERIAL - CALLER HAS CALLED 911 - CALLER HAS CALLED NIPSCO -  
PREVIOUS TICKET NUMBER IS 1306131969  
Will you be white-lining the dig site area? NO  
:

Submitted date: 06/21/2013 Time: 10:51  
Members: COMCN IB ID2287 NIPSCO SM

Fact Based Investigation Report

**Notification ID** 01820130621002  
**Damage Date** 06/21/2013 10:53  
**Notified By** SHEREE BEES ()  
**Damage Address** 12790 ELLSWORTH PL  
CROWN POINT, IN  
**District** Northern Indiana  
**Notification Date** 06/21/2013 11:00

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**Damaged Customer** NIPSCO

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**Investigation Date From** 06/21/2013 11:30:00 **To** 06/21/2013 12:10:00

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**Excavator Involved** ROBERT NEISES CONSTRUCTION  
**Type of Excavation** water and sewer install

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**Orig. Locate Request** 1306131969 **Start Date** 06/17/2013 10:10  
**Type of Ticket** Routine **Locate Req. Info** N/A

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**Damage Request #** 1306211330 **Start Date** 06/21/2013 11:30

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**Pictures Taken By** Reginald Flemings **Date** 06/21/2013 11:55  
**Photography Type** Digital **Frame #**

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**Investigator Emp. #** 134728 **Investigator Name** Reginald Flemings  
**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 #** Flemings Reginald - 129675 **Locator Not Known**

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**Investigation Findings**

Facility Marked Accurately

**Other Notes**

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**Investigation Methods**

Visual, Facility Exposed At Time Of Investigation

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**Investigator Statement/Causal Factors**

While installing sewer lines the contractor dug on the gas marks. The area where the marks were at was all disturbed due to construction practices. The line was marked see the post locates. The investigation photos are on ticket 1306211384.

**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

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**Were any markings visible on the damage site upon arrival?** Yes

**Were any other indicators of facility present in the area?** Yes

<b>Was the excavation within the tolerance zone of marks?</b>	Yes
<b>Extent of facility damage</b>	cut service stub
<b>Replacement Footage</b>	2'
<b>Was contractor assistance required? If yes, who?</b>	No
<b>What contractor equipment was used?</b>	
<b>Is the facility shown on the utility records?</b>	No
<b>If yes, list record numbers</b>	



Property of United States Infrastructure Corporation

Photo taken on 6/21/2013 11:34:18 AM

"CASE # 5011"  
"INITIAL DOCUMENTS - EXCAVATOR"



**INFORMATION REQUEST**

State Form 64809 (R/3-13)

INDIANA UTILITY REGULATORY COMMISSION - PIPELINE SAFETY DIVISION

RECEIVED

AUG 29 2013

INDIANA UTILITY REGULATORY COMMISSION

Case Number: 5011

Date of Damage (month, day, year): 6/21/2013

**Location of Damage:**

Address (number and street): 12790 ELLSWORTH PLACE

City, State and ZIP Code: CROWN POINT, IND 46307

Nearest Intersection: MARSHALL ST.

**Excavator Information:**

Business Name: ROBERT NEISES CONSTRUCTION Corp.

Responsible Party Personal Name: BRIAN NEISES

Title (if any): CO-OWNER

Address (number and street): P.O. Box 268

City, State and ZIP Code: CROWN POINT, IND. 46308

Preferred Telephone Number (area code): 219-663-3434

Email Address: NEISES CONST @ SBCGLOBAL.NET

**Utility Information:**

Utility Name: NIPSCO

**Cause of Damage Information**

Type of Equipment (select one): MINI EXCAVATOR

Type of Work Performed (select one): SEWER + 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: 1306131969

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

**Additional Information / Comments**

Printed Name: Brian M. Neises

Signature: 

Date (month, day, year): 8-27-13

*\*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](mailto: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**