



## Pipeline Safety Division Investigation Report

### Investigation regarding: **Town and Country Remodeling**

UPPAC Database Record ID: 5056

Report Date: 9/23/2013

Investigator: Mike Orr

Damage Date: 7/8/2013 4:17:59 PM

Damage Address: 639 Briar Ln, Hammond, Lake

### The Parties

Excavator: **Town and Country Remodeling**

Address: 7026 Kennedy Ave, Hammond, In 46323-2248

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: LOCATE--REAR OF PROPERTY

Follow-Up Locate Instructions (if applicable):

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

**Findings:** Reported by Indiana 811; excavator did not respond to initial notice mailed 8/9/2013. Excavator failed to provide notice of excavation to the association (IN811).

**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 26, 2013

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

Pipeline Safety Division – Case No. 5056  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 5056

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: 7/8/2013  
Event Location: 639 BRIAR LN  
City: NORTH  
Facility Owner: NIPSCO  
Excavator: TOWN AND COUNTRY  
Other Party: N/A  
Pipeline Division Case No. 5056

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. 5056</b>	
Date of Event	7/8/2013
Event Location	639 BRIAR LN
Event City	NORTH
Facility Owner	NIPSCO
Excavator	TOWN AND COUNTRY
Date of IURC Information Request	July 26, 2013
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	Town and Country Construction
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	7026 Kennedy
CITY/ STATE/ZIP	Highland / IN / 46322
PREFERRED TELEPHONE	219-7894601
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	639 Briar Lane
CITY/STATE/ZIP	Munster / 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.)	1 1/8"
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) (\$)	
<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)	Yes – 1307084090
<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)	N/A
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.  Emergency ticket number: 1307083650.</p>	

NORTHERN INDIANA PUBLIC SERVICE COMPANY  
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA Hammond MAXIMO WO # M 806795  
OPERATING AREA CONTACT Hammond JOB ORDER # 583522  
TRACKING NUMBER 01820130708007 LOCATE REF # 130708  
Locate Performed By: YSIC

DATE AND TIME OF ACCIDENT 7-8-13 2013 M DATE OF REPORT 7-8-13

PLACE OF DAMAGE (INCLUDE CITY) 645 Briar Lane Munster

DAMAGE WAS TO: \* True damage @ 639 Briar Lane, Munster

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

OTHER (DESCRIBE) \_\_\_\_\_

GAS: SERVICE  MAIN ( ) SIZE 1 1/8" MATERIAL: PLASTIC  STEEL ( ) METER ( ) REG STATION ( ) STUB ( )  
OTHER (DESCRIBE) Digging Poles

DEPTH OF FACILITY (inches) 24" 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: 0/1

DURATION OF INTERRUPTION: TIME REPORTED N/A 1:30 PM TIME RESTORED 17:30

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: slice 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) Town & Country Construction

ADDRESS OF PARTY (INCLUDE CITY) 7026 Kennedy Hammond

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

WITNESS NAME AND ADDRESS Ryan Johnson 219 789-4601

WITNESS REMARKS \_\_\_\_\_

AGENCIES NOTIFIED / ON SITE: POLICE ( ) AGENCY \_\_\_\_\_ REPORT # \_\_\_\_\_

FIRE ( ) AGENCY \_\_\_\_\_ REPORT # \_\_\_\_\_

OTHER ( ) Street for Repair 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
- |  |                                     |  |   |
|--|-------------------------------------|--|---|
| <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 type="checkbox"/> DRAINS/CULVERTS    |
| <input checked="" 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 checked="" type="checkbox"/> HAND TOOLS | <input 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"/> VACCUUM EQUIPMENT | <input type="checkbox"/> GRADER                | <input type="checkbox"/> OTHER _____       |

- REASON DAMAGE OCCURRED - CHECK APPROPRIATE CHOICE BELOW
- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> AUTOMOTIVE ACCIDENT | <input checked="" type="checkbox"/> EXCAVATING BEFORE LOCATES DUE | <input type="checkbox"/> CARELESS MACHINE OPERATOR,      |
| <input checked="" type="checkbox"/> NO NOTIFICATION     | <input type="checkbox"/> MARKS DISTURBED                          | <input type="checkbox"/> STUB                            |
|   |   | <input checked="" type="checkbox"/> OTHER <u>Locates</u> |

COMMENTS: Fence Post Digging Around on inground pipe

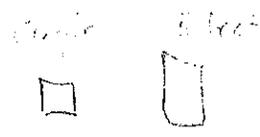
PERSON PREPARING REPORT 122999

FIELD SUPERVISOR Kelly

FIELD MANAGER Rick Smith

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

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

NIPSCO 01334 IUPPSa 07/08/2013 16:18:05 1307084090-00A EMER DAMG STRT

DAMAGE SEE REMARKS

Ticket : 1307084090 Date: 07/08/2013 Time: 16:08 Oper: BMCWHORTER Chan:045

State: IN Cnty: LAKE Twp: NORTH  
Cityname: MUNSTER Inside: Y Near: N  
Subdivision: RUTH ESTATES Lot: 8

Address : 639  
Street : BRIAR LN  
Cross 1 : CALUMET AVE Within 1/4 mile: Y  
Location: LOCATE--REAR OF PROPERTY  
:  
Grids : 4133B8730A 4133B8730B  
Boundary: n 41.559678 s 41.558567 w -87.513622 e -87.510848

Work type : MOVING FENCE POST  
Done for : HOMEOWNER  
Start date: 07/08/2013 Time: 16:15 Hours notice: 0/000 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 3 DAYS Depth: 3 FEET

Company : TOWN AND COUNTRY Type: CONT  
Co addr : 7026 KENNEDY  
City : HIGHLAND State: IN Zip: 46322  
Caller : RYAN JOHNSON Phone: (219)789-4601  
Contact : RYAN JOHNSON--CELL Phone:  
BestTime:  
Mobile : (219)789-4601

Remarks : All tickets are taken and processed on Eastern Daylight Time  
A NIPSCO GAS LINE WAS HIT--GAS LINE IS BLOWING--LINE IS A 5/8TH PLASTIC AND  
UNKNOWN COLOR--LINE WAS HIT IN BACK CORNER OF PROPERTY--NIPSCO IS ON SITE AND  
HAS BEEN NOTIFIED--911 WAS ALREADY NOTIFIED A WELL--NO PREV TICKET NUMBER--THANK  
YOU

Will you be white-lining the dig site area? NO

:

Submitted date: 07/08/2013 Time: 16:08  
Members: COMCN IB ID6978 NIPSCO SM

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

NIPSCO 01182 IUPPSa 07/08/2013 15:24:10 1307083650-00A EMER NEW STRT

EMERGENCY SEE REMARKS

Ticket : 1307083650 Date: 07/08/2013 Time: 15:21 Oper: SFOX Chan:050

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

Address : 639  
Street : BRIAR LN  
Cross 1 : MADISON AVE Within 1/4 mile: Y  
Location: LOCATE THE ENTIRE PROPERTY  
:  
Grids : 4133B8730A 4133B8730B  
Boundary: n 41.559678 s 41.558567 w -87.513622 e -87.510848

Work type : GAS LINE REPAIR  
Done for : NIPSCO  
Start date: 07/08/2013 Time: 15:22 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 : AMBER FERGUSON Phone: (800)322-2806  
Contact : TONY SANCHEZ - CELL Phone:  
BestTime:  
Mobile : (219)742-5267  
Fax : (219)647-4764

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

Will you be white-lining the dig site area? NO

:

Submitted date: 07/08/2013 Time: 15:21  
Members: COMCN IB ID6978 NIPSCO SM

Fact Based Investigation Report

**Notification ID** 01820130708007  
**Damage Date** 07/08/2013 00:00  
**Notified By** AMBER FERGUSON (Facility Owner)  
**Damage Address** 639 BRIAR LN LAKE COUNTY  
MUNSTER , IN  
**District** Northern Indiana  
**Notification Date** 07/08/2013 15:28

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**Damaged Customer** NIPSCO

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**Investigation Date From** 07/08/2013 19:25:00 **To** 07/08/2013 19:35:00

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**Excavator Involved** TOWN AND COUNTRY CONSTRUCTION

**Type of Excavation** Fence installation

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

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**Damage Request #** 1307084090 **Start Date** 07/08/2013 19:25

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**Pictures Taken By** Nathan Wolf **Date** 07/08/2013 19:25

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

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**Investigator Emp. #** 134728 **Investigator Name** Nathan Wolf

**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**

Visual, Facility Exposed At Time Of Investigation

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**Investigator Statement/Causal Factors**

The line was damaged by Town and Country Construction while installing a fence. They did not have a locate ticket for this job.

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

Tommy Buher NIPSCO Field Coordinator

**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?** No

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

**Was the excavation within the tolerance zone of marks?** No

<b>Extent of facility damage</b>	punctured line
<b>Replacement Footage</b>	3'
<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 7/8/2013 6:10:30 PM