



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: **BMB Inc.**

UPPAC Database Record ID: 5158

Report Date: 11/25/2013

Investigator: Mike Orr

Damage Date: 7/5/2013
Vanderburgh

Damage Address: 3701 Stringtown Rd, Evansville, In, Evansville,

The Parties

Excavator: **BMB Inc.**

Address: 3614 Citadel Circle, Newburgh, In 47630

Facility Owner: **Vectren**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Boring

Type of Work Performed: Water

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$800

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: No

Indiana 811 Ticket Number: 1305073126

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Darlene Kulhanek; excavator's response to initial notice was received on 10/1/2013. The excavator failed to maintain a valid locate ticket having allowed the earlier ticket to expire.

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.



DAMAGE INFORMATION REPORT – PIPELINE SA

State Form 54122 (R2 / 7-11)
INDIANA UTILITY REGULATORY COMMISSION

INITIAL DOCUMENTS -
OPERATOR

Submitted to IURC-Pipeline Safety on: 07/31/2013

Who is submitting this information?

Name of person providing this information: Darlene Kulhanek

Business address (*number and street*): 1 Main Street

City, State, and ZIP code: Evansville, IN 47711

Telephone number (*area code*): 812-491-4227

Fax number (*area code*): 812-491-4504

E-mail address: dkulhanek@vectren.com

Excavator Information, if known

Full name: BMB Inc

Business address (*number and street*): 3614 Citadel Circle

City, State, and ZIP code: Newburgh, IN 47630

Telephone number (*area code*): 812-867-5431

Fax number (*area code*): 812-867-5433

E-mail address: Unknown

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Boring

Type of work performed: Water

Date and Location of Damage

Date of damage (*month, day, year*): 7-5-2013

County: Vanderburgh

City: Evansville

Street address (*number and street, city, state, and ZIP code*):
3701 Stringtown Rd, Evansville, IN

Nearest intersection: Unknown

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? 0

Was there a customer service interruption? Yes

If yes, how many affected? 1

Time to restore service (*in hours*): 2.5

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 800

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? _____

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? No

If locates were performed, were they done so by a contractor or pipeline employee? Data Not Collected

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

Were facility marks visible in the area of excavation? No

Were facilities marked correctly? No

Type of markings used: Other

If other, please specify: None _____

Was site marked by "White Lining"? No

Were special instructions part of the locate request? Unknown/Other

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? No

Did the excavator notify Indiana 811 in the event of this damage? Unknown/Other

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: --No notification made to the one-call center

Additional Comments

1/2" plastic service severed by bore. Did not request locates. USIC notified Vectren of damage.

Vectren Claim Number: _____

FDS 18067

Task No: 103.0510 Capital Q&M (circle one)

Police Report /MO #: _____

Date of Damage 7/15/13

Vectren Claims Camera:

Cost Center # 5864

FACILITIES DAMAGE REPORT

VE00572
Form 3112

Time Occurred 10:08 (am/pm)

Time Found 10:24 am/pm

Latitude 38.01266 Longitude: -87.55617

GAS

DAMAGE SITE:
Address 3701 Stringtown rd Lot # _____

FACILITY TYPE:
 Distribution Propane
 Service Storage
 Transmission: (include supplemental report)

County Ward City Eville State In Township Center (City)

| FACILITIES DAMAGED: | ORIFICE SIZE(S): | (1) | (2) | (3) |
|--|------------------|-------------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> Farm Tap | 0.50 inch | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Heater | 5/8 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Main | 0.75 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Meter (Residential) | 1.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Meter (Industrial / Commercial) | 1.25 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Odorizer | 2.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Regulator Station | 3.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Relief Valve | 4.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Riser | 5.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Service Line | 6.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Valve | 10.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | 12.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | 16.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | 20.00 inch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other _____ | Other | | | |

VISUAL OBSERVATION AT DAMAGE SITE: 7/10/13
 Visual Observation: Above Ground Below Ground
 Locate Applicable Yes No N/S
 Facilities Properly Marked Yes No N/S
 Marking Methods: Conventional Flags None Stakes Whiskers
 Offset Paint Yes No N/S
 Locate Marking Faded: Yes No N/S
 Wrong Address Requested Yes No N/S

TYPE OF MATERIAL: Cast Iron Plastic (HDPE) Plastic (MDPE) Steel
DAMAGE TYPE: Severed Not Cut Severed Size _____ x _____
PRESSURE: 25 PSIG 40 PSIG 50 PSIG 55 PSIG 60 PSIG 6 WC (.2163) 7 WC (252) Other _____
med dist 3.097

Facilities Improperly Located:
 Qualified Locator Could Not Have Accurately Located
 Inaccurate Maps / Cards
 Broken or No Tracer Wire (Plastic)
 Insulation Preventing Accurate Locate
Locator Error:
 Failure to Follow Policy
 Inappropriate Site Markings
 Incomplete Locate
 No Locates Performed
 Qualified Locator Could Have Accurately Located
 Wrong Address Located
 Marking Off By: _____ (Feet / Inches)

PROTECTION IN PLACE: Building Fence None Post Rail Vault N/A Other _____
DURATION OF ESCAPING GAS:
 Minutes: 5

Were Facility Marks Visible Yes No Destroyed
 Was Area White Lined Yes No Destroyed
 Positive Response Yes No Destroyed
 Tolerance Zone Violated Yes No
 Part of Project Yes No
 Company Representative On-Site Yes No

LEAK REPORT NUMBER: _____

Observation by (ID#): 0333 Pat

FEED TYPE: One-Way Feed Two-Way Feed
 Number of Customers Affected: 1
 Total Hours Service Was Off: 2.5

Name of Locator: _____
LOCATING ORGANIZATION:
 Contract Locator
 Unknown / Other
 Utility Owner

SERVICE ORDER NUMBER: _____

DAMAGED BY: Company Crew Contractor County Developer Farmer Municipality Property Owner/ Tenant Railroad State Unknown Utility Vehicle Accident Other _____
TYPE OF CONSTRUCTION: Agriculture Building Construction Building Demolition Cable TV Curbs / Sidewalk Drainage Driveway Electric Engineering / Surveying Fencing Grading Irrigation Landscaping Liquid Pipeline Milling Pole Natural Gas Public Transit Authority Railroad Maintenance Other Water

NOTIFICATIONS AND OTHER DETAILS OF LOCATE:
 Locate Ticket: _____
 Date: _____ Time: _____ am / pm

WORKING FOR: City County Developer State Property Owner Utility

TYPE OF REQUEST: Regular Request Emergency Request
 Locate Company Notified
 Contact Name: _____
 Time Called: _____ am / pm
 Time Locator Arrived at the Site: _____ am / pm

Company Notified of Locate Near Critical Facilities Yes No N/S
 Copy of Mark Out Request Provided Within 2 Working Days Yes No N/S

ONE-CALL CENTER:
 IUPPS
 OUPS
 Unknown

TYPE OF EQUIPMENT:

- Auger
- Backhoe / Track hoe
- Boring
- Drilling
- Explosives
- Farm Equipment
- Grader / Scraper
- Hand Tools
- Milling Equipment
- Plow
- Probing Device
- Trencher
- Vacuum Equipment
- Vehicle

Other _____

ROOT DAMAGING CAUSE:

- Abandoned Facility
- Deteriorated Facility
- Facility Could Not be Found/ Located
- Facility Was Not Located / Marked
- Failure to Maintain Clearance
- Failure to Maintain Marks
- Failure to Support Exposed Facility
- Failure to Use Hand Tools Where Required
- Improper Backfilling
- Incorrect Records / Maps
- Marking or Location Not Sufficient
- No Notification Made to One-Call
- One-Call Notification Error
- Previous Damage
- Wrong Information Provided

Other _____

Did Excavator Notify You

- Yes No

Excavation Required

- Yes No

Media at Site

- Yes No

Was There Ignition of Gas?

- Yes No

INVOICE:

- Yes No N/S

CONTRACTOR REPAIRS:

- Contractor Working for Vectren Made Repairs at Own Expense
 Yes No N/S
- Contractor Repaired Damage
 Yes No N/S

Name of Contractor: _____

of Regular Hours; _____

of Overtime Hours; _____

of Regular Hours; _____

Crew Type: _____

MATERIALS OR ROAD WORK:

- Meter was replaced _____ (Stores Code)
- Regulator Was Replaced _____ (Stores Code)
- Temporary Asphalt Repair: _____ (sq. ft.)
- Permanent Asphalt Repair: _____ (sq. ft.)

RIGHT OF WAY:

- Dedicated Utility Easement
- Federal Utility Easement
- Pipeline
- Power / Transmission Line
- Private - Business
- Private - Easement
- Private - Land Owner
- Public - County Road
- Public - Interstate Highway
- Public - Other
- Public - State Highway
- Public - City Street
- Unknown

DAMAGING PARTY:

Name: Todd Ferguson
 Address: 3614 Citidale Circle
 City/ State/ Zip: NEWBUNCH IN 47630
 Phone: (812) 867-5431

Prepared / Investigated By: _____ Date: _____

PARTY TO INVOICE:

Name: Todd Ferguson
 Address: 3614 Citidale Circle
 City/ State/ Zip: NEWBUNCH IN 47630
 Phone: (812) 867-5431

Reviewed by Field Supervisor: [Signature] Date: 7/11/12

Monday, July 29, 2013

Service Order Status

Enter Service Order Number:

2267105



[Clear Form](#) | [Refresh Data](#)

Banner Instance: CS03PROD CS01PROD CS02PROD

Order Number: S2267105

Order Type: INVE

Order Status: Completed

Customer: 300171197 - DUNVILLE ERIC

Prem: 1170143 - 3701 STRINGTOWN RD UNIT B

Technician: 0333 - Pate, Phil

Order Dates and Times

Need Date: 7/5/2013 10:20:00 AM
Time Created: 7/5/2013 10:09:23 AM
Time Dispatched: 7/5/2013 10:09:23 AM
Time In Route: 7/5/2013 10:10:46 AM
Time On-Site: 7/5/2013 10:34:07 AM
Tech Complete: 7/5/2013 11:06:39 AM
Time Closed: 7/5/2013 11:06:39 AM

Events Performed/Completion Code

IVEG - CMP

Meter Information

Current ReadStatus

Old Meter:

New Meter:

Completion Notes

BMB CUT .5 PL-SERV CREW ON SITE

Request Notes

VECTREN CONST EMP. DONNIE BURNS CALLED TO RPT USIC CALLED HIM TO REPORT ACONTACTOR UNKNOWN BORED THROUGH A GAS SERVICE. USIC ON SITE MTR#S0064172

MDSI Event Dates and Times

| Event | Date/Time | User |
|----------------------------|----------------------|------------|
| AsnAssignmentManualAck_evt | 7/5/2013 10:10:08 AM | Pate, Phil |
| AsnAssignmentEnRoute_evt | 7/5/2013 10:10:46 AM | Pate, Phil |
| AsnAssignmentOnSite_evt | 7/5/2013 10:34:07 AM | Pate, Phil |
| OrdOrderComplete_evt | 7/5/2013 11:06:39 AM | Pate, Phil |

NOTE:The Reporting database replicates in near real-time; it has been approximately 0 minute(s) since the last transaction replicated.



INFORMATION REQUEST

State Form 54909 (R / 3-13)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 5158

Date of Damage (*month, day, year*): 7/5/2013

Location of Damage:

Address (*number and street*): 3701 Stringtown Rd

City, State and ZIP Code: Evansville, IN 47711

Nearest Intersection: Pfeiffer Rd

Excavator Information:

Business Name: BMB Inc

Responsible Party Personal Name: Scott Bowman

Title (*if any*): President

Address (*number and street*): 3614 Citadel Cir

City, State and ZIP Code: Newburgh, IN 47630

Preferred Telephone Number (*area code*): 812-867-5431

Email Address: scott@bmbevansville.com

Utility Information:

Utility Name: Vectren

Contact Person: _____

Title (*if any*): _____

Cause of Damage Information

Type of Equipment (*select one*):

Directional Drilling

Type of Work Performed (*select one*):

Water

Repair Cost: \$ 646.28

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: 1305073126

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

Five locates were requested for the dig site and surrounding area. This property arrangement is a very unique situation and not one that has traditional homes on lots along a street. The property is bound by Stringtown Rd, Pfeiffer Rd and Herrman Rd. with three homes located within this property. Each home has an address off either Hermann Rd or Stringtown Rd with only a private drive to get to the home sites(See attached map). We were installing a new watermain to these properties so they could be properly subdivided. When we called the tickets in for the properties there was some confusion because of the above mentioned arrangement, and there was direct discussion with the facility locator about what the project consisted of to help him with the completion of the locate request. Futhermore the locator had met the crew on site on a couple of occasions to help with the locating of some of the other facilites that we had difficulty exposing. When the above mentioned gas service line was damaged the locator on site indicated that he did not know where the gas line had came from to feed the home and had to take some time to figure this out. It is of my opinion that there was effort and communication put forth to prevent such damage and it certainly was not from a failure to communicate, complete negligence or an irresponsible excavation. This was a unique property arrangement and home orientation that led to the damage of the 3/4" service line to the 3701 Stringtown Rd. home.

Printed Name: Scott Bowman
Signature:  Date (month, day, year): 10/1/2013

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

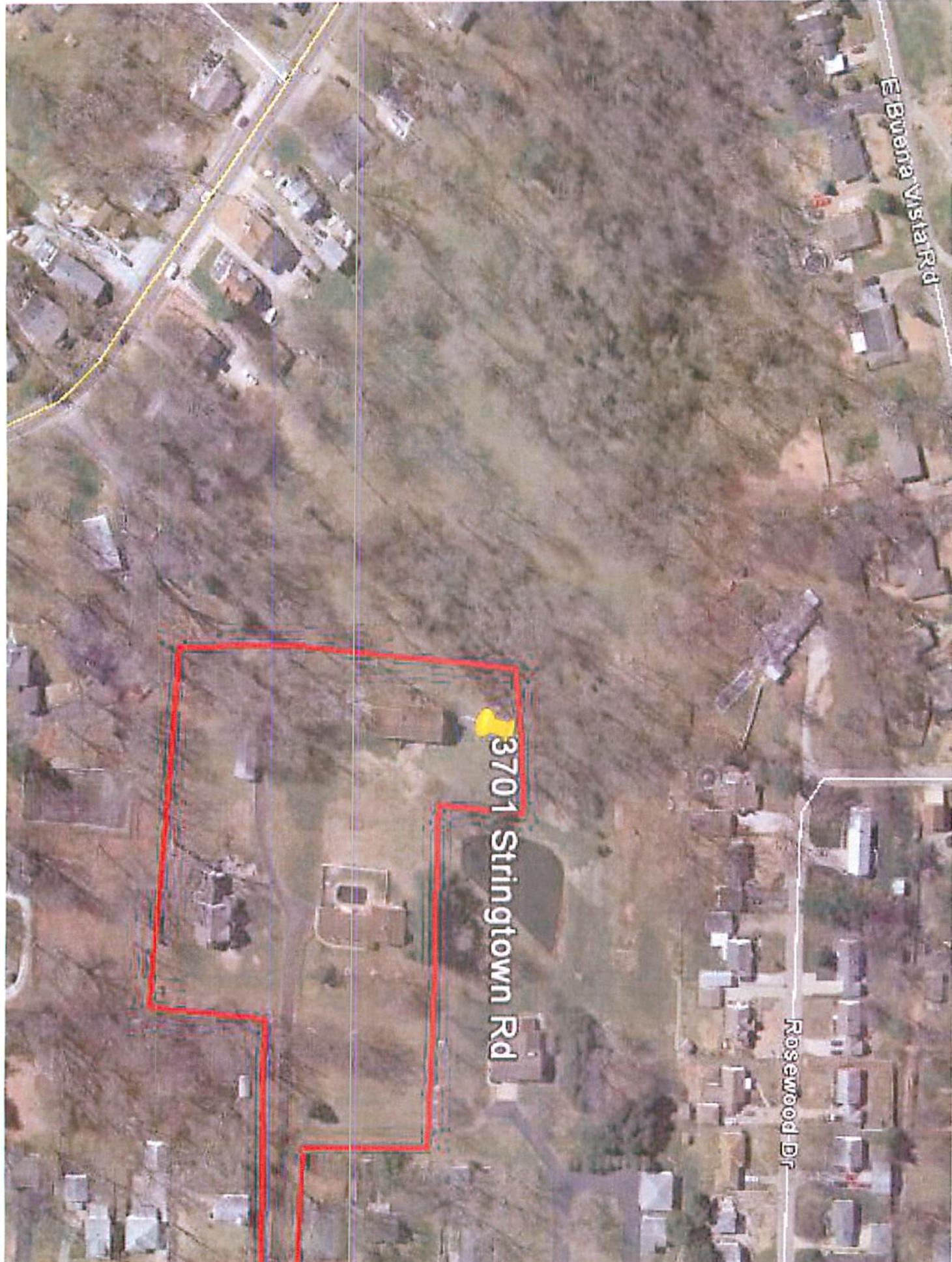
Please return completed form to:

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**



E Buena Vista Rd

3701 Stringtown Rd

Rosewood Dr

If you need to call us back for any reason, your ticket number will assist us in locating this ticket.

NORMAL NOTICE

Ticket : 1305073126 Date: 05/07/2013 Time: 15:38 Oper: SCOTT.BOWMAN.IN Chan:000

State: IN Cnty: VANDERBURGH Twp: CENTER
 Cityname: EVANSVILLE Inside: Y Near: N
 Subdivision:

Address : 3701
 Street : STRINGTOWN RD
 Cross 1 : PFEIFFER RD Within 1/4 mile: Y
 Location: BEHIND THE HOME AND ALONG THE DRIVEWAY
 ***Boring Where = ACROSS ROAD AND ALONG PROPERTY
 :
 Grids : 3800A8733B 3800A8733C 3800B8733B 3800B8733C
 Boundary: n 38.013086 s 38.010609 w -87.559002 e -87.556015

Work type : WATER MAIN
 Done for : PROPERTY OWNER
 Start date: 05/09/2013 Time: 16:00 Hours notice: 48/048 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N
 Duration : 1 WEEK Depth: 4-6 FEET

Company : B M B INCORPORATED Type: CONT
 Co addr : 3614 CITADEL CIRCLE
 City : NEWBURGH State: IN Zip: 47630
 Caller : SCOTT BOWMAN Phone: (812)867-5431
 Contact : TOMMY GRIMM - CELL Phone:
 BestTime:
 Mobile : (812)305-5433
 Fax : (812)867-5433
 Email : SCOTT@BMBEVANSVILLE.COM

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

Submitted date: 05/07/2013 Time: 15:38
 Members: ID0716 ID0723 ID2470 ID5347 SBCIN SM

| Member Name | Facility Types |
|--------------------------------------|----------------|
| AT&T - DISTRIBUTION | COMMUNICATIONS |
| EVANSVILLE WATER & SEWER UTILITY | SEWER & WATER |
| INSIGHT COMMUNICATIONS OF EVANSVILLE | CABLE TV |
| VECTREN - EVANSVILLE | GAS & ELECTRIC |
| WIDE OPEN WEST | CABLE TV |

DUNVILLE WATER

If you need to call us back for any reason, your ticket number will assist us in locating this ticket.

NORMAL NOTICE

Ticket : 1305073073 Date: 05/07/2013 Time: 15:32 Oper: SCOTT.BOWMAN.IN Chan:000

State: IN Cnty: VANDERBURGH Twp: CENTER
 Cityname: EVANSVILLE Inside: Y Near: N
 Subdivision:

Address : 3712
 Street : HERRMANN RD
 Cross 1 : WALDEN LN Within 1/4 mile: Y
 Location: ENTIRE PROPERTY FROM HERMANN LN TO THE WEST END OF THE PROPERTY
 ***Boring Where = ACROSS ROAD AND ALONG PROPERTY

Grids : 3800A8733C 3800A8733D 3800B8733C 3800B8733D
 Boundary: n 38.012900 s 38.010628 w -87.554436 e -87.552995

Work type : WATER MAIN
 Done for : PROPERTY OWNER
 Start date: 05/09/2013 Time: 15:45 Hours notice: 48/048 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N
 Duration : 1 WEEK Depth: 4-6 FEET

Company : B M B INCORPORATED Type: CONT
 Co addr : 3614 CITADEL CIRCLE
 City : NEWBURGH State: IN Zip: 47630
 Caller : SCOTT BOWMAN Phone: (812)867-5431
 Contact : TOMMY GRIMM - CELL Phone:
 BestTime:
 Mobile : (812)305-5433
 Fax : (812)867-5433
 Email : SCOTT@BMBEVANSVILLE.COM

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

Submitted date: 05/07/2013 Time: 15:32
 Members: ID0716 ID0723 ID2470 ID5347 SBCIN SM

| Member Name | Facility Types |
|--------------------------------------|----------------|
| AT&T - DISTRIBUTION | COMMUNICATIONS |
| EVANSVILLE WATER & SEWER UTILITY | SEWER & WATER |
| INSIGHT COMMUNICATIONS OF EVANSVILLE | CABLE TV |
| VECTREN - EVANSVILLE | GAS & ELECTRIC |
| WIDE OPEN WEST | CABLE TV |

If you need to call us back for any reason, your ticket number will assist us in locating this ticket.

NORMAL NOTICE

Ticket : 1305073102 Date: 05/07/2013 Time: 15:36 Oper: SCOTT.BOWMAN.IN Chan:000

State: IN Cnty: VANDERBURGH Twp: CENTER
 Cityname: EVANSVILLE Inside: Y Near: N
 Subdivision:

Address : 3718
 Street : HERRMANN RD
 Cross 1 : WALDEN LN Within 1/4 mile: Y
 Location: ENTIRE SOUTH SIDE OF THE PROPERTY
 ***Boring Where = ACROSS ROAD AND ALONG PROPERTY
 :
 Grids : 3800A8733C 3800A8733D 3800B8733C 3800B8733D
 Boundary: n 38.012900 s 38.010628 w -87.554436 e -87.552995

Work type : WATER MAIN
 Done for : PROPERTY OWNER
 Start date: 05/09/2013 Time: 15:45 Hours notice: 48/048 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N
 Duration : 1 WEEK Depth: 4-6 FEET

Company : B M B INCORPORATED Type: CONT
 Co addr : 3614 CITADEL CIRCLE
 City : NEWBURGH State: IN Zip: 47630
 Caller : SCOTT BOWMAN Phone: (812)867-5431
 Contact : TOMMY GRIMM - CELL Phone:
 BestTime:
 Mobile : (812)305-5433
 Fax : (812)867-5433
 Email : SCOTT@BMBEVANSVILLE.COM

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

Submitted date: 05/07/2013 Time: 15:36
 Members: ID0716 ID0723 ID2470 ID5347 SBCIN SM

| Member Name | Facility Types |
|--------------------------------------|----------------|
| AT&T - DISTRIBUTION | COMMUNICATIONS |
| EVANSVILLE WATER & SEWER UTILITY | SEWER & WATER |
| INSIGHT COMMUNICATIONS OF EVANSVILLE | CABLE TV |
| VECTREN - EVANSVILLE | GAS & ELECTRIC |
| WIDE OPEN WEST | CABLE TV |

If you need to call us back for any reason, your ticket number will assist us in locating this ticket.

NORMAL NOTICE

Ticket : 1305073110 Date: 05/07/2013 Time: 15:37 Oper: SCOTT.BOWMAN.IN Chan:000

State: IN Cnty: VANDERBURGH Twp: CENTER
 Cityname: EVANSVILLE Inside: Y Near: N
 Subdivision:

Address : 520
 Street : MADALYN LN
 Cross 1 : HERMANN RD Within 1/4 mile: Y
 Location: ENTIRE PROPERTY
 ***Boring Where = ACROSS ROAD AND ALONG PROPERTY
 :
 Grids : 3800A8733C 3800A8733D 3800B8733C 3800B8733D
 Boundary: n 38.013764 s 38.012268 w -87.556300 e -87.553828

Work type : WATER MAIN
 Done for : PROPERTY OWNER
 Start date: 05/09/2013 Time: 15:45 Hours notice: 48/048 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N
 Duration : 1 WEEK Depth: 4-6 FEET

Company : B M B INCORPORATED Type: CONT
 Co addr : 3614 CITADEL CIRCLE
 City : NEWBURGH State: IN Zip: 47630
 Caller : SCOTT BOWMAN Phone: (812)867-5431
 Contact : TOMMY GRIMM - CELL Phone:
 BestTime:
 Mobile : (812)305-5433
 Fax : (812)867-5433
 Email : SCOTT@BMBEVANSVILLE.COM

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

Submitted date: 05/07/2013 Time: 15:37
 Members: ID0716 ID0723 ID2470 ID5347 SBCIN SM

| Member Name | Facility Types |
|--------------------------------------|----------------|
| AT&T - DISTRIBUTION | COMMUNICATIONS |
| EVANSVILLE WATER & SEWER UTILITY | SEWER & WATER |
| INSIGHT COMMUNICATIONS OF EVANSVILLE | CABLE TV |
| VECTREN - EVANSVILLE | GAS & ELECTRIC |
| WIDE OPEN WEST | CABLE TV |

If you need to call us back for any reason, your ticket number will assist us in locating this ticket.

NORMAL NOTICE

Ticket : 1305073090 Date: 05/07/2013 Time: 15:35 Oper: SCOTT.BOWMAN.IN Chan:000

State: IN Cnty: VANDERBURGH Twp: CENTER
 Cityname: EVANSVILLE Inside: Y Near: N
 Subdivision:

Address : 3710
 Street : HERRMANN RD
 Cross 1 : WALDEN LN Within 1/4 mile: Y
 Location: ENTIRE NORTH SIDE OF THE PROPERTY
 ***Boring Where = ACROSS ROAD AND ALONG PROPERTY
 :
 Grids : 3800A8733C 3800A8733D 3800B8733C 3800B8733D
 Boundary: n 38.012900 s 38.010628 w -87.554436 e -87.552995

Work type : WATER MAIN
 Done for : PROPERTY OWNER
 Start date: 05/09/2013 Time: 15:45 Hours notice: 48/048 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N
 Duration : 1 WEEK Depth: 4-6 FEET

Company : B M B INCORPORATED Type: CONT
 Co addr : 3614 CITADEL CIRCLE
 City : NEWBURGH State: IN Zip: 47630
 Caller : SCOTT BOWMAN Phone: (812)867-5431
 Contact : TOMMY GRIMM - CELL Phone:
 BestTime:
 Mobile : (812)305-5433
 Fax : (812)867-5433
 Email : SCOTT@BMBEVANSVILLE.COM

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

Submitted date: 05/07/2013 Time: 15:35
 Members: ID0716 ID0723 ID2470 ID5347 SBCIN SM

| Member Name | Facility Types |
|--------------------------------------|----------------|
| AT&T - DISTRIBUTION | COMMUNICATIONS |
| EVANSVILLE WATER & SEWER UTILITY | SEWER & WATER |
| INSIGHT COMMUNICATIONS OF EVANSVILLE | CABLE TV |
| VECTREN - EVANSVILLE | GAS & ELECTRIC |
| WIDE OPEN WEST | CABLE TV |