



## Pipeline Safety Division Investigation Report

### Investigation regarding: **Rieth-riley**

UPPAC Database Record ID: 3065

Investigator: Howard Friend

Report Date: 9/10/2012

Damage Date: 6/12/2012

Damage Address: 8474 N Pennsylvania St

City: Indianapolis

County: Marion

### The Parties

Excavator: **Rieth-riley**

Contact: Kim Beard, Risk Manager

Address: 1751 W Minnesota St P.o. Box 276, Indianapolis, In 46206

Telephone:

Facility Owner: Citizens Gas

Contact: Tony Chan

Address: 2150 Dr. Martin Luther King Jr. Street, Indianapolis, IN 46202

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

**Investigation regarding: Rieth-riley**

UPPAC Database Record ID: 3065

**Damage Impact**

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$0

**Excavator Activities/Cause of damage information:**

Excavator request locates: Yes Indiana 811 ticket Number: 1205251835

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Sewer (Sanitary/Storm)

**Synopsis:** A natural gas service was damaged during excavation for a sewer line.

**Findings:** Reported by Tony Chan (Citizens Gas); excavator's response to initial notice was received on 8/10/2012. The excavator had a valid locate request and the operator provided accurate locate markings. The excavator was removing concrete and the gas line was under the concrete.

**Conclusion:** There was a failure to maintain two (2) feet of clearance with mechanized equipment. There was a failure to notify the association and the local fire department upon discovery of the damage.

**Violation: IC 8-1-26-20(b): Failure to plan excavation to avoid damage or interference with underground facilities; Failure to maintain two (2) feet clearance with mechanized equipment.**



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Jun 26, 2012

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### Who is submitting this information?

Name of person providing this information: Tony Chan (Citizens Gas)

Business address (*number and street*): 2150 Dr. M.L. King Jr. St.

City, State, and ZIP code: Indianapolis, IN 46202

Telephone number (*area code*): (317) 927-4619

Fax number (*area code*): (317) 927-4619

E-mail address: AChan@CitizensEnergyGroup.com

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### Excavator Information, if known

Full name: REITH & RILEY

Business address (*number and street*): 1751 W MINNESOTA ST P.O. BOX 276

City, State, and ZIP code: Indianapolis, IN 46206

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

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

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

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### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Sewer (Sanitary/Storm)

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## Date and Location of Damage

Date of damage (*month, day, year*): Jun 12, 2012

County: Marion

City: Indianapolis

Street address (*number and street, city, state, and ZIP code*):  
8474 N PENNSYLVANIA ST

Nearest intersection: E 84TH ST

Right of way where damage occurred: Public - City Street

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*): 4

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 0

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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? Yes

Enter Indiana 811 ticket number, if known: 1205251835

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? Contractor

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? No

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? No

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? No

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### **Description of Cause**

Select from the list the most accurate cause for the damage: --Failure to use hand tools where required

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### **Additional Comments**

# INITIAL DOCUMENTS – EXCAVATOR



## INFORMATION REQUEST

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 3065

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*The Pipeline Safety Division of the Indiana Utility Regulatory Commission requests any and all information you can provide regarding the following criteria.*

*Upon completion of answers select email button for submission.*

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### The Parties

#### Excavator Information:

Business Name: Rieth-Riley Construction Co., Inc.

Responsible Party Personal Name: Kim Beard

Title (if any): Risk Manager

Address (number and street): P.O. Box 477

City, State and ZIP Code: Goshen, IN 46527

Preferred Telephone Number (area code): (574) 875-5183 ext. 20214

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: kbeard@rieth-riley.com

#### Facility Information:

Business Name: \_\_\_\_\_

Responsible Party Personal Name: \_\_\_\_\_

Title (if any): \_\_\_\_\_

Address (number and street): \_\_\_\_\_

City, State and ZIP Code: \_\_\_\_\_

Preferred Telephone Number (area code): \_\_\_\_\_

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

**Locator Service Information:**

Business Name: \_\_\_\_\_

Responsible Party Personal Name: \_\_\_\_\_

Title (*if any*): \_\_\_\_\_

Address (*number and street*): \_\_\_\_\_

City, State and ZIP Code: \_\_\_\_\_

Preferred Telephone Number (area code): \_\_\_\_\_

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

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**Cause of Damage Information**

**Type of Equipment (*select one*):** Backhoe/Trackhoe

**Type of Work Performed (*select one*):** Sewer (Sanitary/Storm)

**Other Information (Witness, Police, Fire, Other):**

Personal Contact: \_\_\_\_\_

Business/Organization Name: \_\_\_\_\_

Title (*if any*): \_\_\_\_\_

Address (*number and street*): \_\_\_\_\_

City, State and ZIP Code: \_\_\_\_\_

Preferred Telephone Number (area code): \_\_\_\_\_

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

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### Utility Line Impact

#### Location of Damage:

Address (*number and street*): 8474 N. Pennsylvania Avenue \_\_\_\_\_

City, State and ZIP Code: Indianapolis, IN \_\_\_\_\_

Nearest Intersection: E. 82nd Street \_\_\_\_\_

Product Type (*select one*): Natural Gas

Facility Type (*select one*): Service/Drop

Size (Diameter/etc.): 2" \_\_\_\_\_

Pressure (PSIG/Inches): \_\_\_\_\_

Interruption in Service:  Yes  No Number of Customers Affected: \_\_\_\_\_

Evacuation:  Yes  No If yes, How Many Evacuated? \_\_\_\_\_

Repair Cost (if known): \$ \_\_\_\_\_

Release of Product:  Yes  No

Ignition and/or Fire:  Yes  No

Excavator Notify 811:  Yes  No

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### Locate Information

Excavator Request Locate:  Yes  No

Indiana 811 Locate Ticket Number: 1205251820 \_\_\_\_\_

**Locate Marks Visible:**  Yes  No

**Locate Marks Correct:**  Yes  No

**Excavator "White Lined":**  Yes  No

**Maps Used to Mark Facilities:**  Yes  No

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

**Operator Employees On-site during Excavation:**  Yes  No

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### Incident Impact Information

**Number of Outpatient Treated:** none

**Number of Inpatient Treated:** none

**Number of Fatalities:** none

**Fire Department Response:**  Yes  No

**Police Department Response:**  Yes  No

**Ambulance Response:**  Yes  No

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### Additional Information / Comments

\* concrete being removed was approx. 9" thick  
\* gas line depth at both shoulders was approx. 18" deep  
\* where line was hit, it came up to a depth of 4-5" from the bottom of the concrete  
\* Rieth-Riley foreman spoke with Jim Clark, representative of Citizens who responded, who stated he would note in his report that the line was close to the bottom of the concrete which made it difficult not to hit

**NARRATIVE STATEMENT**

Your Pipeline Safety Division Case Number: 3065

Your Full Name: Kim Beard

Full Name of Business / Entity (if applicable): Rieth-Riley Construction Co., Inc.

Your Business Title (if applicable): Risk Manager

Address (number and street): P.O. Box 477

City: Goshen State: IN ZIP Code: 46527

Your E-mail Address: kbeard@rieth-riley.com

Today's Date (month, day, year): 8-10-12

Your Signature: Kim Beard Title (if any) Risk Manager

Please return your Narrative Statement to:

**Pipeline Safety Division – Case Number 3065**  
**Indiana Utility Regulatory Commission**  
**101 West Washington Street, 1500E**  
**Indianapolis, IN 46204**

Or scan the statement and Email to:

**[PipelineDamageCase@urc.in.gov](mailto:PipelineDamageCase@urc.in.gov)**

Ticket ID:                   Version: 00           Notice ID: IUPPS2012052501865  
Taken Time: 05/25/2012 13:17  
NoticeType: Normal Notice

NORMAL NOTICE

Ticket : 1205251820 Date: 05/25/2012 Time: 13:17 Oper: JSMITH Chan:088

State: IN Cnty: MARION Twp: WASHINGTON  
Cityname: INDIANAPOLIS Inside: Y Near: N  
Subdivision: MERIDIAN HILLS

Address :

Street : N PENNSYLVANIA ST  
Cross 1 : E 82ND ST   Within 1/4 mile: Y  
Location: FROM THE ABOVE INTERSECTION LOCATE GOING SOUTH ON BOTH SIDES OF NORTH  
PENNSYLVANIA STREET FOR APPROX 600 FEET FROM CENTER LINE RIGHT OF WAY TO RIGHT  
OF WAY

:  
Grids : 3954D8609C   3954C8609C

Work type : INSTALLING SEWER  
Done for : INDPLS DEPT OF PUBLIC WORKS  
Start date: 05/30/2012 Time: 13:30 Hours notice: 120/048 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 9 MONTHS           Depth: 16 FEET

Company : RIETH RILEY Type: CONT  
Co addr : 1751 WEST MINNESOTA STREET  
City : INDIANAPOLIS State: IN Zip: 46206  
Caller : TIM BOYD Phone: (317)634-5561  
Contact : TIM BOYD--CELL Phone:  
BestTime:  
Mobile : (317)710-5753  
Fax : (317)631-6423  
Email : TBOYD@RIETH-RILEY.COM

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

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Submitted date: 05/25/2012 Time: 13:17  
Members: CTG   CV   ID1501 ID3639 ID4636 ID5555 SBCIN SM