



## Pipeline Safety Division Investigation Report

### Investigation regarding: **Ziese & Sons Excavating Inc**

UPPAC Database Record ID: 3094

Investigator: Howard Friend

Report Date: 8/16/2012

Damage Date: 5/17/2012

Damage Address: 1509 W 124th Pl

City: Crown Point

County: Lake

### The Parties

Excavator: **Ziese & Sons Excavating Inc**

Contact:

Address: 6929 West 109th Avenue, Crown Point, In 46307

Telephone: 219.663.2625

Facility Owner: NIPSCO

Contact: Kit Earle

Address: 101 West Ohio Street, Indianapolis, IN 46204

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

**Investigation regarding: Ziese & Sons Excavating Inc**

UPPAC Database Record ID: 3094

**Damage Impact**

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$343

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

Excavator request locates: No    Indiana 811 ticket Number: No locate requested

Type of Equipment: Grader/Scraper

Type of work performed: Landscaping

**Synopsis:** Damage to a natural gas service occurred during excavation for landscaping.

**Findings:** Reported by Carrie Ludwig (NIPSCo); excavator did not respond to initial notice mailed on 7/13/2012. Gas operator reports excavator reports failed to provide notice of excavation.

**Conclusion:** Excavator failed to provide notice of excavation.

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

**Ziese & Sons Excavating Inc** currently has no other report of damage in the record.



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Jun 27, 2012

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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 Ave

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: Ziese & Sons Excavating Inc

Business address (*number and street*): 6929 West 109th Avenue

City, State, and ZIP code: Crown Point, IN 46307

Telephone number (*area code*): 219.663.2625

Fax number (*area code*): 219.663.1620

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

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### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Grader/Scraper

Type of work performed: Grading

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## Date and Location of Damage

Date of damage (*month, day, year*): May 17, 2012

County: Lake

City: Crown Point

Street address (*number and street, city, state, and ZIP code*):  
1509 W 124th Pl Crown Point IN 46307

Nearest intersection: S Indiana Ave

Right of way where damage occurred: Private - Land Owner

Was there a release of product? Yes

If yes, was there an ignition of product?

Were evacuations necessary as a result of release? No

If yes, how many evacuated? 0

Was there a customer service interruption? No

If yes, how many affected? 0

Time to restore service (*in hours*): \_\_\_\_\_

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

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? 8

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## Notification, Locating, Marking

Did excavator request locates prior to commencing work? Unknown/Other

Enter Indiana 811 ticket number, if known: No locate requested

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: no locates \_\_\_\_\_

Was site marked by "White Lining"?

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? Yes

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

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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**

Nipsco emergency repair ticket #: 1205171838



101 West Ohio Street, Suite 1707  
Indianapolis, IN 46204

August 13, 2012

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

Pipeline Safety Division – Case No. 3094  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3094

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: 5/17/2012

Event Location: 1509 W 124th Pl, Crown Point

Facility Owner: Northern Indiana Public Service Company

Excavator: Ziese & Sons Excavating Inc.

Other Party: N/A

Pipeline Division Case No. 3094

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. 3094</b>	
Date of Event	5/17/2012
Event Location	1509 W 124th Pl, Crown Point
Facility Owner	Northern Indiana Public Service Company
Excavator	Ziese & Sons Excavating Inc.
Date of IURC Information Request	7/13/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	Ziese & Sons Excavating
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	6919 W. 109 <sup>th</sup> Avenue
CITY/ STATE/ZIP	Crown Point, IN 46307
PREFERRED TELEPHONE	
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	<a href="mailto:LSELKING@NISOURCE.COM">LSELKING@NISOURCE.COM</a>
<b>LOCATOR SERVICE INFORMATION</b>	
BUSINESS NAME	USIC Locating Service
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	9045 North River Road, Suite 300
CITY/ STATE/ZIP	Indianapolis, IN 46240
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
<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	1509 W. 124 <sup>th</sup> Place
CITY/STATE/ZIP	Crown Point, IN 46307
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)	
INTERRUPTION IN SERVICE (YES/NO)	No
NUMBER OF CUSTOMERS AFFECTED	0
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	
REPAIR COST (IF KNOWN) (\$)	342.54
<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	X - Bulldozer
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	X
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)	Y
IGNITION AND/OR FIRE (YES/NO)	
EXCAVATOR NOTIFY 811 (YES/NO)	No
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	No

INDIANA 811 LOCATE TICKET NUMBER	
LOCATE MARKS VISIBLE (YES/NO)	No
LOCATE MARKS CORRECT (YES/NO)	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 FACILITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	
FPOLICE DEPARTMENT RESPONSE (YES/NO)	
AMBULANCE RESPONSE (YES/NO)	
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
Facility damaged was a stub that could not be located.	

# Fact Based Investigation Report

01820120517004  
Northern IN  
5/17/2012 12:55:00 PM  
5/17/2012 11:59:07 AM  
LAURA Facility Owner  
1509 W 124TH PL. X S INDIANA AVE  
CROWN POINT  
ST: IN ZIP:

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NOTIFICATION ID:  
DISTRICT:  
DAMAGE DATE:  
NOTIFICATION DATE:  
NOTIFIED BY:  
DAMAGE ADDRESS:  
CITY:

NIPSCO

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DAMAGED CUSTOMER:

05/17/2012  
11:30:00  
12:00:00

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INVESTIGATION DATE:  
FROM:  
TO:

UNKNOWN  
unknown

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EXCAVATOR INVOLVED:  
TYPE OF EXCAVATION:

Yes

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ORIG. LOCATE REQ.:  
START DATE/TIME:  
TYPE OF TICKET:  
LOCATE REQ. INFO N/A:

M50208958  
5/17/2012 1:10:00 PM

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DIG UP/DAMAGE REQ.:  
START DATE/TIME:

reggie flemings  
5/17/2012 11:40:00 AM  
Digital

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PICTURES TAKEN BY:  
DATE/TIME:  
PHOTOGRAPHY TYPE:  
FRAME #:

129675  
reggie flemings  
**BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?**  
No

INVESTIGATOR EMP#:  
INVESTIGATOR NAME:

## Fact Based Investigation Customer Information

01820120517004

NIPSCO

(optional)

**NOTIFICATION ID:**

**SELECT A CUSTOMER:**

**CUSTOMER #:**

LOWPROF

Gas Service

Yes

**FACILITY DESCRIPTION:**

**FACILITY ID:**

**LOCATOR NAME & EMP #:**

**LOCATOR NOT KNOWN:**

**CHECK ALL THAT APPLY TO INVESTIGATION:**

Abandoned Facility,  
No Locate Req. By Contractor

**Other:**

**CHECK ALL THAT APPLY TO METHOD OF INVESTIGATION (at least one must be checked):**

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

**INVESTIGATOR STATEMENT/CAUSAL FACTORS:**

Unknown contractor doing grading work on the property hit an abandoned buried gas stub that was still active to the main. No ticket could be found for grading work at this property. USIC not at fault.

**NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:**

Mark Scheissle-stated that stub was supposed to be abandoned

**NAMES OF EXCAVATOR'S REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:**

na

**LIST ANY OTHER INDIVIDUALS ON SITE:**

na

**WERE ANY MARKINGS VISIBLE ON THE DAMAGE SITE UPON ARRIVAL?**

No

**WERE ANY OTHER INDICATORS OF FACILITY PRESENT IN THE AREA?**

No

**WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS?**

No

**EXTENT OF FACILITY DAMAGE**

hit service

**REPLACEMENT FOOTAGE**

none

**WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?**

No

**WHAT CONTRACTOR EQUIPMENT WAS USED?**

unknown

**IS THE FACILITY SHOWN ON THE UTILITY RECORDS?**

No

**IF YES, PLEASE LIST RECORD #(S)**



DAMAGE REQUEST INFORMATION

DATE 5/17/12

CITY Crown Point

ADDRESS 1509 W. 124TH PL

CONTRACTOR ZIESE & SONS - 219 663-2625

TYPE OF EQUIPMENT ~~GRADING~~ BULLDOZER

WORK TYPE GRADING YARD

LOCATE # N/A

LOCATES (YES/NO)

ACCURATE LOCATES (YES/NO)

PAINT, FLAGS OR BOTH N/A

RELEASE OF GAS (YES/NO)

DETAILED DESCRIPTION OF EVENT INCLUDING EQUIPMENT USED: EQUIPMENT HIT RETIRED 3/8" SERVICE - should have been retired @ road

DEPTH OF LINE 8"

WERE LOCATES PERFORMED IN 2 WORKING DAYS (YES/NO)

SERVICE OR MAIN AND SIZE OF LINE 3/8"

PRESSURE (PSI) 45

OUTAGE (YES/NO)

HOW MANY CUSTOMERS LOST 0

TIME TO RESTORE SERVICE N/A

EVACUATION (YES/NO)

HOW MANY EVACUATED

DAMAGE OR LEAK

installed in 6-13-79 no depth on card

entered & submitted 6/27/12



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Jun 27, 2012

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### Who is submitting this information?

Name of person providing this information: Carrie Ludwig

Business address (*number and street*): 3511 East 15th Ave

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: Ziese & Sons Excavating Inc

Business address (*number and street*): 6929 West 109th Avenue

City, State, and ZIP code: Crown Point, IN 46307

Telephone number (*area code*): 219.663.2625

Fax number (*area code*): 219.663.1620

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

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### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Grader/Scraper

Type of work performed: Grading

**Date and Location of Damage**

Date of damage (month, day, year): May 17, 2012

County: Lake

City: Crown Point

Street address (number and street, city, state, and ZIP code):  
1509 W 124th Pl Crown Point IN 46307

Nearest intersection: S Indiana Ave

Right of way where damage occurred: Private - Land Owner

Was there a release of product? Yes

If yes, was there an ignition of product?

Were evacuations necessary as a result of release? No

If yes, how many evacuated? 0

Was there a customer service interruption? No

If yes, how many affected? 0

Time to restore service (in hours): \_\_\_\_\_

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

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

**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? 8

**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? Unknown/Other

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: no locates \_\_\_\_\_

Was site marked by "White Lining"?

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? Yes

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

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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**

Nipsco emergency repair ticket #: 1205171838