



## Pipeline Safety Division Investigation Report

### Investigation regarding: All Access Llc

UPPAC Database Record ID: 3169

Investigator: Dan Novak

Report Date: 8/24/2012

Damage Date: 6/11/2012 11:30:02 AM

Damage Address: W 134th Pl

City: Cedar Lake

County: Lake

### The Parties

Excavator: **All Access Llc**

Contact: Abel Paz

Address: 7602 W Lincoln Highway, Crown Point, In 46307

Telephone:

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: All Access Llc**

UPPAC Database Record ID: 3169

**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:

Type of Equipment: Auger

Type of work performed: Fencing

**Synopsis:** A 1-1/8" service line was damaged by the contractor while performing fence work.

**Findings:** Reported by Indiana 811; excavator did not respond to initial notice mailed July 13, 2012. Excavator failed to request locates according to the report filed by the operator.

**Conclusion:** There was a failure to request locates.

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



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. 3169  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3169

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: 6/11/2012

Event Location: W 134th Pl, Cedar Lake

Facility Owner: Northern Indiana Public Service Company

Excavator: All Access

Other Party: N/A

Pipeline Division Case No. 3169

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. 3169</b>	
Date of Event	6/11/2012
Event Location	W 134th Pl, Cedar Lake
Facility Owner	Northern Indiana Public Service Company
Excavator	All Access
Date of IURC Information Request	7/13/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	All Access LLC
RESPONSIBLE PARTY PERSONAL NAME	Abel Paz
TITLE (IF ANY)	
ADDRESS	7602 W. Lincoln Hwy.
CITY/ STATE/ZIP	Crown Point, IN 46307
PREFERRED TELEPHONE	219 322-6150
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	13525 Webster
CITY/STATE/ZIP	Cedar Lake, IN 46303
NEAREST INTERSECTION	134 <sup>th</sup> Place
<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)	45
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	N
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	
<b>CAUSE OF DAMAGE INFORMATION:</b>	
<b>TYPE OF EQUIPMENT (Select One)</b>	
Auger	X
Backhoe/Trackhoe	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
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)	Y
IGNITION AND/OR FIRE (YES/NO)	N
EXCAVATOR NOTIFY 811 (YES/NO)	Y 1206111682
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	No

INDIANA 811 LOCATE TICKET NUMBER	N/A
LOCATE MARKS VISIBLE (YES/NO)	N/A
LOCATE MARKS CORRECT (YES/NO)	N/A
EXCAVATOR "WHITE LINED" (YES/NO)	
MAPS USED TO MARK FACILITIES (YES/NO)	N/A
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	
FIRE DEPARTMENT RESPONSE (YES/NO)	
FPOLICE DEPARTMENT RESPONSE (YES/NO)	
AMBULANCE RESPONSE (YES/NO)	
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
Excavator failed to notify one-call center	

# Fact Based Investigation Report

01820120611011

Northern IN

6/11/2012 11:26:00 AM

6/11/2012 11:35:08 AM

RAY HALL

W 134TH PL

CEDAR LAKE

ST: IN ZIP:

NOTIFICATION ID:

DISTRICT:

DAMAGE DATE:

NOTIFICATION DATE:

NOTIFIED BY:

DAMAGE ADDRESS:

CITY:

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NIPSCO

DAMAGED CUSTOMER:

06/11/2012

INVESTIGATION DATE:

11:00:00

FROM:

11:30:00

TO:

All Access

EXCAVATOR INVOLVED:

fence

TYPE OF EXCAVATION:

Yes

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

1206111682

DIG UP/DAMAGE REQ.:

6/11/2012 11:25:00 AM

START DATE/TIME:

david parks

PICTURES TAKEN BY:

6/11/2012 11:05:00 AM

DATE/TIME:

Digital

PHOTOGRAPHY TYPE:

FRAME #:

130726

INVESTIGATOR EMP#:

david parks

INVESTIGATOR NAME:

**BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?**

No

## Fact Based Investigation Customer Information

01820120611011

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:**

No Locate Req. By Contractor

**Other:**

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

Investigator Verified Existing Marks By Hooking Up

**INVESTIGATOR STATEMENT/CAUSAL FACTORS:**

fence contractor hit gas service to pump station, had no ticket.

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

na

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

na

**LIST ANY OTHER INDIVIDUALS ON SITE:**

na

No

Yes

No

unknown

unknown

No

unknown

No

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

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

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

**EXTENT OF FACILITY DAMAGE**

**REPLACEMENT FOOTAGE**

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

**WHAT CONTRACTOR EQUIPMENT WAS USED?**

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

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

NIPSCO 00617 IUPPSa 06/11/2012 11:30:20 1206111682-00A EMER DAMG GRID

DAMAGE DAMAGE

Ticket : 1206111682 Date: 06/11/2012 Time: 11:26 Oper: DSEGO Chan:087

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

Address :

Street : W 134TH PL

Cross 1 : HILLTOP DR Within 1/4 mile: Y

Location: FROM THE ABOVE INTERSECTION TRAVEL EAST FOR APPROX 400 FEET ON W 134TH  
PL THEN AT THAT POINT---LOCATE THE ENTIRE PROPERTY OF THE PUMP STATION ON THE  
NORTH SIDE OF W 134TH PL

:

Grids : 4122B8724A 4122B8725D 4122B8725C 4122B8725B 4122B8725A

Grids : 4122C8724A 4122C8725D 4122C8725C 4122C8725B 4122C8725A

Boundary: n 41.376053 s 41.373531 w -87.429993 e -87.413895

Work type : INSTALLING A FENCE

Done for : TOWN OF CEDAR LAKE

Start date: 06/11/2012 Time: 11:26 Hours notice: 0/0 Priority: EMER

Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y

Duration : 1 DAY Depth: 3 FEET

Company : ALL ACCESS Type: CONT

Co addr : 7602 W LINCOLN HIGHWAY

City : CROWN POINT State: IN Zip: 46307

Caller : RAY HALL Phone: (219)322-6150

Contact : RAY HALL---CELL Phone:

BestTime:

Mobile : (219)677-6023

Email : RAY@ALLACCESSLLC.NET

Remarks : All tickets are taken and processed on Eastern Daylight Time  
A NIPSCO GAS LINE HAS BEEN DAMAGED ON THE WEST SIDE OF THE PUMP STATION---GAS  
LINE IS BLOWING AND CAN BE HEARD AND SMELLED---CAN NOT DESCRIBE DAMAGED  
LINE---RAY HALL WILL CALL 911 AND NIPSCO TO NOTIFY THEM OF THE DAMAGE---CREW IS  
ON SITE---NO PREVIOUS TICKET NUMBER

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

:

Submitted date: 06/11/2012 Time: 11:26

Members: COMCN IB ID7478 NIPSCO SM

CASE # 3169

NIPSCO 00613 IUPPSa 06/11/2012 11:27:14 1206111663-00A NORM NEW GRID

NORMAL NOTICE

Ticket : 1206111663 Date: 06/11/2012 Time: 11:13 Oper: DSEGO Chan:087

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

Address :

Street : W 134TH PL

Cross 1 : HILLTOP DR Within 1/4 mile: Y

Location: FROM THE ABOVE INTERSECTION TRAVEL EAST FOR APPROX 400 FEET ON W 134TH  
PL THEN AT THAT POINT---LOCATE THE ENTIRE PROPERTY OF THE PUMP STATION ON THE  
NORTH SIDE OF W 134TH PL

:

Grids : 4122B8724A 4122B8725D 4122B8725C 4122B8725B 4122B8725A

Grids : 4122C8724A 4122C8725D 4122C8725C 4122C8725B 4122C8725A

Boundary: n 41.376053 s 41.373531 w -87.429993 e -87.413895

Work type : INSTALLING A FENCE

Done for : TOWN OF CEDAR LAKE

Start date: 06/13/2012 Time: 11:30 Hours notice: 48/48 Priority: NORM

Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N

Duration : 1 DAY Depth: 3 FEET

Company : ALL ACCESS Type: CONT

Co addr : 7602 W LINCOLN HIGHWAY

City : CROWN POINT State: IN Zip: 46307

Caller : RAY HALL Phone: (219)322-6150

Contact : RAY HALL---CELL Phone:

BestTime:

Mobile : (219)677-6023

Email : RAY@ALLACCESSLLC.NET

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

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

:

Submitted date: 06/11/2012 Time: 11:13

Members: COMCN IB ID7478 NIPSCO SM

CASE # 3169



# DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Jul 17, 2012

## 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

## Excavator Information, if known

Full name: All Access  
Business address (number and street): 7602 W Lincoln Hwy  
City, State, and ZIP code: Crown Point, IN 46307  
Telephone number (area code): 219 322 6150  
Fax number (area code): \_\_\_\_\_  
E-mail address: \_\_\_\_\_

## Excavation or Demolition Information

Excavator type: Contractor  
Excavation or demolition equipment: Auger  
Type of work performed: Fencing

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**Date and Location of Damage**Date of damage (*month, day, year*): Jun 11, 2012

County: Lake

City: Cedar Lake

Street address (*number and street, city, state, and ZIP code*):

134th Place &amp; Hilltop

Nearest intersection: 134th Place &amp; Hilltop

Right of way where damage occurred: Public - Other

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

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? Distribution

What was the depth of the facility, in inches? 24

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**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? 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: Stakes

If other, please specify: no locates \_\_\_\_\_

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? Yes

Did the excavator notify Indiana 811 in the event of this damage? Yes

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**

Damage ticket #: 1206111682

JO562774

DAMAGE REQUEST INFORMATION

DATE 6-11-12

CITY Cedar Lake

ADDRESS 13525 WEBSTER - SAME AS 134th PL + HillTOP

CONTRACTOR ALL ACCESS LTD

TYPE OF EQUIPMENT Post hole Digger (hydraulic)

WORK TYPE FENCE

LOCATE # None

LOCATES (YES/NO) NO

ACCURATE LOCATES (YES/NO) N/A

PAINT, FLAGS OR BOTH N/A

RELEASE OF GAS (YES/NO)

DETAILED DESCRIPTION OF EVENT INCLUDING EQUIPMENT USED:

Digging holes for fence, Severed 1 1/2" plastic Service

DEPTH OF LINE 2'

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

SERVICE OR MAIN AND SIZE OF LINE 1 1/2"

PRESSURE (PSI) 45

OUTAGE (YES/NO)

HOW MANY CUSTOMERS LOST 1

TIME TO RESTORE SERVICE 2 hrs

EVACUATION (YES/NO)

HOW MANY EVACUATED 0

DAMAGE OR LEAK

Did not submit  
re-submitted  
7/11/12  
with submit via 800/



# NORTHERN INDIANA PUBLIC SERVICE COMPANY

## PROPERTY DAMAGE REPORT (CLAIMS FOR THE COMPANY)

FORWARD ORIGINAL AND 1 COPY

FAXED JUN 27 2012

ALL DAMAGES TO PROPERTY MUST BE REPORTED TO THE CLAIMS DEPARTMENT

REPORTING OPERATING AREA 030 CLAIM NUMBER 20562774

OPERATING AREA CONTACT MARA SCHISSLER JOB ORDER NUMBER 562774

TRACKING NUMBER 018 2012 0611 014 LOCATE REF NUMBER \_\_\_\_\_

NO LOCATE REQUESTED

1. DATE AND HOUR OF DAMAGE 6/11/12 @ 11am 20 M DATE OF THIS REPORT 6-11-12

2. PLACE OF DAMAGE (INCLUDE CITY) 13525 WEBSTER Cedar Lake 46303

3. DAMAGE WAS TO POLE # \_\_\_\_\_ SIZE \_\_\_\_\_ YEAR INSTALLED \_\_\_\_\_ BROKEN  YES  NO

GAS SERVICE / MAIN - SIZE 1 1/2" OTHER \_\_\_\_\_

4. PARTY RESPONSIBLE FOR DAMAGES (NAME) ALL ACCESS LLC

(ADDRESS, CITY, STATE, ZIP) 7602 W. HINCHMAN HWY 46307 219 322-6150

5. WHO WAS IN CHARGE OF WORK AT PLACE AND TIME OF DAMAGE / CONTRACTORS FOREMAN Abel Paz

6. NAME AND ADDRESS OF WITNESSES Arthur M. Schiessler, J. Cavalete, J. Ryan

7. REMARKS OF WITNESSES no locates called for

8.  POLICE REPORT ATTACHED (# \_\_\_\_\_) (IF NO POLICE REPORT - WHY \_\_\_\_\_)

9. PHOTOS TAKEN  YES  NO (IF YES, PLEASE FORWARD WITH COMPLETED PROPERTY DAMAGE REPORT.)

10. WORK IN PROGRESS WHEN DAMAGE OCCURRED:
- |                                      |  |  |
|--------------------------------------|--|--|
| <input type="checkbox"/> SEWER       | <input type="checkbox"/> ROAD CONSTRUCTION         | <input checked="" type="checkbox"/> FENCE WORK |
| <input type="checkbox"/> WATER       | <input type="checkbox"/> CULVERTS OR DRAINS        | <input type="checkbox"/> DRIVEWAY              |
| <input type="checkbox"/> ELECTRIC    | <input type="checkbox"/> DITCH CLEANING            | <input type="checkbox"/> CURB OR SIDEWALK      |
| <input type="checkbox"/> TELEPHONE   | <input type="checkbox"/> LANDSCAPING               | <input type="checkbox"/> IRRIGATION            |
| <input type="checkbox"/> TV CABLE    | <input type="checkbox"/> POLE OR SIGN INSTALLATION | <input type="checkbox"/> BUILDING CONSTRUCTION |
| <input type="checkbox"/> OTHER _____ |  |  |

11. REASON DAMAGE OCCURRED:
- |   |   |
|---|---|
| <input checked="" type="checkbox"/> NO NOTIFICATION | <input type="checkbox"/> INACCURATE LOCATION            |
| <input type="checkbox"/> CARELESS MACHINE OPERATOR  | <input type="checkbox"/> INSUFFICIENT TIME NOTIFICATION |
| <input type="checkbox"/> DELIBERATE                 | <input type="checkbox"/> AUTOMOTIVE ACCIDENT            |
| <input type="checkbox"/> FAILURE TO HAND EXPOSE     | <input type="checkbox"/> OTHER _____                    |

OPINION AND RECOMMENDATION:  BILL  DO NOT BILL (REASON: \_\_\_\_\_)

No locates requested

PERSON PREPARING REPORT Arthur M. Schiessler 125704

FIELD MANAGER Mara Schiessler

(SKETCH ON OTHER SIDE)

*Submitted  
7/17/12  
entered  
7/13/12*