



Pipeline Safety Division Investigation Report

Investigation regarding: **P M G Landscaping And Irrigation**

UPPAC Database Record ID: 3277

Investigator: Howard Friend

Report Date: 08/24/2012

Damage Date: 06/26/2012 10:19:13 AM

Damage Address: 5104 Bombay Ct

City: Evansville

County: Vanderburgh

The Parties

Excavator: **P M G Landscaping And Irrigation**

Contact: Bobby Golec

Address: P O Box 3003, Evansville, In 47730

Telephone: (812) 424-3950

Facility Owner: Vectren

Contact: Darlene Kulhanek

Address: 1 N Main Street, Evansville, IN 47702

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Investigation regarding: P M G Landscaping And Irrigation

UPPAC Database Record ID: 3277

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$500

Excavator Activities/Cause of damage information:

Excavator request locates: Yes Indiana 811 ticket Number: 1206132659

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Irrigation

Synopsis: A 1/2 inch plastic gas service was damaged during excavation for an irrigation system.

Findings: Reported by Indiana 811; excavator has not responded to initial notice that was mailed out on 07/13/2012. Excavator failed to maintain required clearance from the gas service with the excavator.

Conclusion: Excavator failed to maintain the required clearance with mechanized equipment.

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.



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

July 13, 2012

Ms. Darlene Kulhanek
Vectren
1 N Main Street
Evansville, IN 47702

Subject: Investigation Request for Information

Date of Event: 6/26/2012

Event Location: 5104 Bombay Ct, Evansville

Facility Owner: Vectren

Excavator: P M G Landscaping And Irrigation

Other Party: N/A

Pipeline Division Case No. 3277

Dear Ms. Kulhanek:

Pursuant to Indiana Code 8-1-26, the *Indiana Damage to Underground Facilities Act*, the Pipeline Safety Division of the Indiana Utility Regulatory Commission ("Pipeline Division") is required to investigate reported incidents of alleged statutory violations involving underground pipeline safety. The purpose of this statute is to promote excavation and pipeline safety and to reduce the imminent danger to life, health, property, or loss of service associated with unsafe digging practices. Please note that the investigation does not entail determining criminal liability or a civil determination of fault or damages; however, it does determine whether any statutory violations were committed regarding public safety.

The Pipeline Division received information regarding potential statutory violations regarding the date and location referenced above. You were identified as a person or entity that might have information that would assist the Pipeline Division in its investigation. Therefore, we have contacted you in order to receive the full account of information in order to make a fair determination related to the circumstances of this incident.

We have asked all involved parties, entities and witnesses to provide *written* information within *30 days* in order to meet legal deadlines to conclude our investigation. **Please consider this letter as a formal request to receive any and all information and evidence (including a narrative, documentation, maps, photographs or any other written information) you can access regarding anything you may know about the incident referenced above.**



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: 07-18-2012

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: PMG Landscaping & Irrigation

Business address (*number and street*): PO Box 3003

City, State, and ZIP code: Evansville, IN 47730

Telephone number (*area code*): 812-424-3950

Fax number (*area code*): 812-424-3952

E-mail address: Unknown

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Irrigation

Date and Location of Damage

Date of damage (*month, day, year*): 6-26-2012

County: Vanderburgh

City: Evansville, IN

Street address (*number and street, city, state, and ZIP code*):
5104 Bombay Circle, 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? No

If yes, how many affected? 0

Time to restore service (*in hours*): 0

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$⁵⁰⁰

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? Yes

Enter Indiana 811 ticket number, if known: 1206132659

Was the locate request completed within two working days? Yes

If locates were performed, were they done so by a contractor or pipeline employee? Contract Locator

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? 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

Description of Cause

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

Additional Comments

1/2" plastic service damaged by hoe. Not hand exposed.

Vectren Claim Number: _____

FDS 16465

Task No: 103.0510 Capital / O&M (circle one)

Police Report / MO #: _____

Date of Damage 6/1/2012

Cost Center # 5854

Time Occurred 9:30 (am/pm)

Time Found 9:50 (am/pm)

Latitude _____ Longitude: _____

FACILITIES DAMAGE REPORT

GAS

Vectren Claims Camera:
VE00756
Form 3112 Camera

DAMAGE SITE:
Address 5104 Bombay Cir Lot # _____
County Vand city Evansville State IN Township Centa/Plt

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

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: 6/21
 Visual Observation: Above Ground Below Ground
 Locate Applicable Yes No N/S
 Facilities Properly Marked Yes No N/S
 Marking Methods: Conventional Flags None
 Offset Paint Stakes Whiskers
 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 _____

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: 0

Were Facility Marks Visible Yes No
 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: 12053
FEED TYPE: One-Way Feed Two-Way Feed
EFV Activated: Yes No N/S
 Number of Customers Affected: 0
 Total Hours Service Was Off: 0

Observation by (ID#): Keith Ellis
 Name of Locator: _____
LOCATING ORGANIZATION:
 Contract Locator Unknown / Other USIC
 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 _____

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

Vectren Claim Number: _____

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 _____

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

- 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

DAMAGING PARTY:

Name: PMC
 Address: 9844 Hedden Rd (Box 3003)
 City/ State/ Zip: Evansville IN 47725 47707
 Phone: (812) 424-3950
 Prepared / Investigated By: R Ello Date: 6-26-12

PARTY TO INVOICE:

Name: Same
 Address: _____
 City/ State/ Zip: _____
 Phone: () _____
 Reviewed by Field Supervisor: [Signature] Date: _____

NORMAL NOTICE

Ticket : 1206132659 Date: 06/13/2012 Time: 14:43 Oper: KLEWIS Chan:032

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

Address : 5104
 Street : BOMBAY CT
 Cross 1 : PELICAN POINT Within 1/4 mile: Y
 Location: LOCATE THE ENTIRE PROPERTY

Grids : 3802A8729D 3803D8729D 3803C8729D 3802A8729C 3803D8729C
 Grids : 3803C8729C

Work type : LANDSCAPING AND IRRIGATION
 Done for : JOHN HAAF
 Start date: 06/15/2012 Time: 15:00 Hours notice: 48/048 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
 Duration : 1 WEEK Depth: 3 FEET

Company : P M G LANDSCAPING AND IRRIGATION Type: CONT
 Co addr : P O BOX 3003
 City : EVANSVILLE State: IN Zip: 47730
 Caller : BOBBY GOLEC Phone: (812)424-3950
 Contact : BOBBY GOLEC-OFFICE Phone:
 BestTime:
 Mobile : (812)424-3950
 Fax : (812)424-3952
 Email : RGOLEC@PARRICKMICHAEL.COM

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

Submitted date: 06/13/2012 Time: 14:43
 Members: ID0716 ID0724 ID2470 ID5347 SBCIN SM

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

[View Map](#)

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DAMAGE DAMAGE

Ticket : 1206261184 Date: 06/26/2012 Time: 10:16 Oper: SDOERFLEIN Chan:029

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

Address : 5104
 Street : BOMBAY CT
 Cross 1 : PELICAN POINT Within 1/4 mile: Y
 Location: LOCATE THE ENTIRE PROPERTY
 :
 Grids : 3802A8729D 3803D8729D 3803C8729D 3802A8729C 3803D8729C
 Grids : 3803C8729C

Work type : LANDSCAPING AND IRRIGATION
 Done for : JOHN HAAF
 Start date: 06/26/2012 Time: 10:16 Hours notice: 0/000 Priority: EMER
 Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y
 Duration : 1 WEEK Depth: 3 FEET

Company : P M G LANDSCAPING AND IRRIGATION Type: CONT
 Co addr : P O BOX 3003
 City : EVANSVILLE State: IN Zip: 47730
 Caller : BOBBY GOLEC Phone: (812)424-3950
 Contact : BOBBY GOLEC-OFFICE Phone:
 BestTime:
 Mobile : (812)424-3950
 Fax : (812)424-3952
 Email : RGOLEC@PARRICKMICHAEL.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time
 PER JOHN-CREW HAS DAMAGED A VECTREN GAS LINE IN THE FRONT YARD OF THE
 PROPERTY-IT IS SLOWLY BLOWING-IT IS A YELLOW 1 INCH LINE-CREW IS ON SITE-WILL
 CALL 911-WILL CALL VECTREN-PREVIOUS TICKET 1206132659
 Will you be white-lining the dig site area? NO
 :

Submitted date: 06/26/2012 Time: 10:16
 Members: ID0716 ID0724 ID2470 ID5347 SBCIN SM

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

[View Map](#)

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Service Order Status

Wednesday, July 18, 2012

Enter Service Order Number:

2080640



Clear Form

Refresh Data

Banner Instance: CS03PROD CS01PROD CS02PROD

Order Number: S2080640

Order Type: LEAK

Order Status: Completed

Customer: 300342592 - JDH HOLDINGS LLC

Prem: 1418262 - 5104 BOMBAY CIR

Technician: 0460 - Ellis, Keith

Order Dates and Times

Need Date: 6/26/2012 9:49:00 AM
Time Created: 6/26/2012 9:31:15 AM
Time Dispatched: 6/26/2012 9:31:14 AM
Time In Route: 6/26/2012 9:32:21 AM
Time On-Site: 6/26/2012 9:49:55 AM
Tech Complete: 6/26/2012 10:20:03 AM
Time Closed: 6/26/2012 10:20:03 AM

Events Performed/Completion Code

LKNS - CMP

Meter Information

Current ReadStatus

Old Meter:

New Meter:

Completion Notes

cut new service--no meter yet

Request Notes

PER JOHN VANDIVER/PH 812 305 4794/REPORTING HIT 1 INCH LINE/WAS BLOWING BUTCRIIMPED OFF/HIT BY PMG GROUP/CONT ERIC WAGNER 812 305 4797/XST: PELICAN POINTNO PETS/NEW CONSTRUCT/SOMEONE ON SITE FOR ACCE SS/GAVE PREC. LOC 1206132659

MDSI Event Dates and Times

Event	Date/Time	User
AsnAssignmentManualAck_evt	6/26/2012 9:32:06 AM	Ellis, Keith
AsnAssignmentEnRoute_evt	6/26/2012 9:32:21 AM	Ellis, Keith
AsnAssignmentOnSite_evt	6/26/2012 9:49:55 AM	Ellis, Keith
OrdOrderComplete_evt	6/26/2012 10:20:03 AM	Ellis, Keith

NOTE:The Reporting database replicates in near real-time; it has been approximately 1 minute(s) since the last transaction replicated.