STATE OF INDIANA

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: Julio Molina

UPPAC Database Record ID: 4707

Report Date: 8/19/2013 Investigator: Mike Orr

Damage Date: 10/22/2012 Damage Address: 3827 Catalpa St, East Chicago, Lake

The Parties

Excavator: **Julio Molina**

Address: 3827 Catalpa St, East Chicago, In 46312

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas Facility Function: Service/Drop

Type of Equipment: Hand Tools Type of Work Performed: Sewer

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: Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

Synopsis: Excavator/occupant struck and damaged an underground natural gas service while performing sewer work.

Findings: Reported by Carrie Ludwig; excavator/occupant did not respond to initial notice mailed 7/10/2013. Excavator/occupant failed to request a locate ticket prior to starting sewer excavation deeper than twelve (12) inches.

Conclusion: There was a failure to provide notice of excavation.

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

150 West Market Street, Suite 600
Indianapolis, IN 46204

August 12, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4707
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4707

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: 10/22/2012

Event Location: 3827 Catalpa St

City: Indianapolis

Facility Owner: Nipsco

Excavator: Julio Molina

Other Party: N/A

Pipeline Division Case No. 4707

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

IURC INFORMATION REQUEST	
Pipeline Safety Division Case No. 4707	
Date of Event	10/22/2012
Event Location	3827 Catalpa St
Event City	East Chicago
Facility Owner	Nipsco
Excavator	Julio Molina
Date of IURC Information Request	July 12, 2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Julio Molina
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	3827 Catalpa St
CITY/ STATE/ZIP	East Chicago / IN / 46312
PREFERRED TELEPHONE	219-413-8554
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
FACILITY INFORMATION - OWNER/OPERATOR OF UTILITY LINE:	
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	LSELKING@NISOURCE.COM
LOCATOR SERVICE INFORMATION	
BUSINESS NAME	USIC
RESPONSIBLE PARTY PERSONAL NAME	Morgan Thompson
TITLE (IF ANY)	Claims Coordinator
ADDRESS	9045 N. River Rd. Suite 300
CITY/ STATE/ZIP	Indianapolis, IN 46240
PREFERRED TELEPHONE	1-317-538-7301
CELL PHONE TELEPHONE	Same
EMAIL ADDRESS	morganthompson@usicinc.com
OTHER (WITNESS, POLICE, FIRE, OTHER) INFORMATION	
PERSONAL CONTACT	
BUSINESS/ORGANIZATION NAME	
TITLE (IF ANY)	

ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
UTILITY LINE IMPACT	
LOCATION OF DAMAGE	
ADDRESS	3827 Catalpa St
CITY/STATE/ZIP	East Chicago / IN /
NEAREST INTERSECTION	
PRODUCT TYPE (Select One)	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
FACILITY TYPE (Select One)	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	5/8"
PRESSURE (PSIG/INCHES)	Click here to enter text.
INTERRUPTION IN SERVICE (YES/NO)	Yes
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	
REPAIR COST (IF KNOWN) ($)	
CAUSE OF DAMAGE INFORMATION:	
TYPE OF EQUIPMENT (Select One)	
Auger	
Backhoe/Trackhoe	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scrapper	
Hand Tools	X
Milling Equipment	
Probing Device	

Trencher	
Vacuum Equipment	
Unknown/Other	
TYPE OF WORK PERFORMED (Select One)	
Agriculture	
Cable TV	
Curb/Sidewalk	
Bldg. Construction	
Bldg. Demolition	
Drainage	
Driveway	
Electric	
Engineering/Surveying	
Fencing	
Grading	
Irrigation	
Landscaping	
Liquid Pipeline	
Milling	
Natural Gas	
Pole	
Public Transit Authority	
Railroad Maintenance	
Road Work	
Sewer (Sanitary/Storm)	X
Site Development	
Steam	
Storm Drain/Culvert	
Street Light	
Telecommunications	
Traffic Signal	
Traffic Sign	
Water	
Waterway Improvement	
Unknown/Other	
RELEASE OF PRODUCT (YES/NO)	Yes
IGNITION AND/OR FIRE (YES/NO)	No
EXCAVATOR NOTIFY 811 (YES/NO)	No
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	No

INDIANA 811 LOCATE TICKET NUMBER	N/A
LOCATE MARKS VISIBLE (YES/NO)	No
LOCATE MARKS CORRECT (YES/NO)	
EXCAVATOR "WHITE LINED" (YES/NO)	No
MAPS USED TO MARK FACILITIES (YES/NO)	No
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	No
INCIDENT IMPACT INFORMATION	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	Yes
POLICE DEPARTMENT RESPONSE (YES/NO	Yes
AMBULANCE RESPONSE (YES/NO)	N/A
ADDITIONAL INFORMATION/COMMENTS	
No notification made to the one-call center. NIPSCO Emergency Repair Ticket Number: 1210221877.	

Fact Based Investigation Report

Notification ID 01820121022006
Damage Date 10/22/2012 11:40
Notified By TANECIA GHOLSTON (Facility Owner)
Damage Address 3827 CATALPA ST. LAKE (NORTH TWP)
EAST CHICAGO, IN
District Northern Indiana
Notification Date 10/22/2012 11:46

Damaged Customer NIPSCO

Investigation Date From 10/22/2012 11:25:00 **To** 10/22/2012 11:45:00

Excavator Involved HOMEOWNER
Type of Excavation Unk

Orig. Locate Request UNK **Start Date**
Type of Ticket **Locate Req. Info N/A** Yes

Damage Request # M68319862 **Start Date** 10/22/2012 12:45

Pictures Taken By Vince Johnson **Date** 10/22/2012 11:40
Photography Type Digital **Frame #** 1

Investigator Emp. # 118013 **Investigator Name** Vince Johnson
Based on your investigation, is further investigation needed? No

Fact Based Investigation Customer Information
Facility Description Low Profile **Facility ID** Gas Service
Locator Name & EMP # - **Locator Not Known** Yes

Investigation Findings
No Locate Req. By Contractor
Other Notes

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

Investigator Statement/Causal Factors
Homeowner was digging on property without a locate ticket. Hit gas service next to meter.
Names of Utility Representatives Contacted or on Site and Statement
Nipsco on site changed meter and made repairs.
Names of Excavator's Representatives Contacted or on Site and Statement
Homeowner
Other individuals on site
N/A

Were any markings visible on the damage site upon arrival? No
Were any other indicators of facility present in the area? Yes
Was the excavation within the tolerence zone of marks? No

Extent of facility damage	Cut plastic gas service
Replacement Footage	N/A
Was contractor assistance required? If yes, who?	No
What contractor equipment was used?	N/A
Is the facility shown on the utility records?	No
If yes, list record numbers	

Facility: Distribution Lines; Folder: N/A; Assigned To: USIC - Company Request

```
NIPSCO 00652 IUPPSa 10/22/2012 12:00:10 1210221877-00A EMER NEW  STRT

EMERGENCY SEE REMARKS

Ticket : 1210221877 Date: 10/22/2012 Time: 11:57 Oper: AGRIGGS Chan:074

State: IN Cnty: LAKE Twp: NORTH
Cityname: EAST CHICAGO  Inside: Y Near: N
Subdivision:

Address : 3827
Street  : CATALPA ST
Cross 1 : E 139TH ST   Within 1/4 mile: Y
Location: LOCATE THE ENTIRE PROPERTY
:
Grids   : 4138B8726C
Boundary: n 41.644855    s 41.641933    w -87.440964    e -87.439438

Work type : REPAIR GAS LINE
Done for  : NIPSCO
Start date: 10/22/2012  Time: 11:58  Hours notice: 0/0  Priority: EMER
Ug/Oh/Both: U  Blasting: N  Boring: N  Railroad: N  Emergency: Y
Duration  : 1 DAY         Depth: 6 FEET

Company : NIPSCO  Type: MEMB
Co addr : 801 EAST 86TH AVENUE
City    : MERRILLVILLE State: IN Zip: 46410
Caller  : LARONDA HATCHETT Phone: (800)322-2806
Contact : TONY SANCHEZ---CELL Phone:
BestTime:
Mobile  : (219)742-5267

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

Submitted date: 10/22/2012 Time: 11:57
Members: COMCN  IB     NIPSCO SM
```

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

** COMPLETE FORM FOR ALL DAMAGES TO NIPSCO FACILITIES **

REPORTING OPERATING AREA HAMMOND LIA MAXIMO WO #

OPERATING AREA CONTACT JOB ORDER # 583067

TRACKING NUMBER 018 2012 1022 006 LOCATE REF #

Locate Performed By:

DATE AND TIME OF ACCIDENT 10-22-12 2012, 10:36AM DATE OF REPORT 10-22-12

PLACE OF DAMAGE (INCLUDE CITY) 3827 CATALPA E.C.

DAMAGE WAS TO:

ELECTRIC - POLE / TRANSFORMER: # SIZE YEAR INSTALLED BROKEN YES ( ) NO ( )

OTHER (DESCRIBE)

GAS: SERVICE (X) MAIN ( ) SIZE 5/8" MATERIAL: PLASTIC (X) STEEL ( ) METER ( ) REG STATION ( ) STUB ( )
OTHER (DESCRIBE)

DEPTH OF FACILITY (inches) 16" PRESSURE (PSI) 45# Lbs.

RELEASE OF GAS: YES (X) NO ( ) IGNITION OF GAS: YES ( ) NO ( ) EVACUATION REQUIRED: YES ( ) # NO ( )

INTERRUPTION OF SERVICE: YES (X) NO ( ) NUMBER OF CUSTOMERS LOST: 1

DURATION OF INTERRUPTION: TIME REPORTED 10:36A TIME RESTORED 12:00p

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: cut in 1/2

LOCATE MARKS ON SITE: YES ( ) DISTANCE BETWEEN FACILITY AND LOCATE MARKS NO (X)
HOW LOCATED: PAINT ( ) FLAGS ( ) BOTH ( ) WHITE LINED ( )

PARTY THAT CAUSED DAMAGES (NAME) JULIO MOLINA (219) 805-9468

ADDRESS OF PARTY (INCLUDE CITY)

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE JULIO

WITNESS NAME AND ADRESS

WITNESS REMARKS JULIO WAS DIGGING FOR SEWER LINE! HIT SERVICE

AGENCIES NOTIFIED / ONSITE: POLICE (X) AGENCY REPORT #

FIRE (X) AGENCY REPORT #

OTHER ( ) Any Injuries? ( ) YES # (X) NO

PHOTOS TAKEN: YES ( ) NO (X) TAKEN BY: (ATTACH PHOTOS TO REPORT)
MEDIA ON SITE YES ( ) NO (X)

WORK IN PROGRESS WHEN FACILITY DAMAGED – CHECK APPROPRIATE CHOICE BELOW

( ) AGRIGULTURE/FARMING	( ) CABLE TV	( ) CURB/SIDEWALK	( ) TELECOMMUNICATIONS
( ) BLDG CONSTRUCTION	( ) DEMOLITION	( ) DRAINAGE	( ) WATER
( ) DRIVEWAY	( ) ELECTRIC	( ) SURVEYING	( ) DRAINS/CULVERTS
( ) FENCING	( ) GRADING	( ) IRRIGATION	( ) MOWING
( ) LANDSCAPING	( ) PIPELINE	( ) MILLING	( ) OTHER
( ) POLE/SIGN POST	( ) ROAD WORK	(X) SEWER	

TYPE OF EQUPMENT USED – CHECK APPROPRIATE CHOICE BELOW

( ) AUGER	(X) HAND TOOLS	( ) BACKHOE/TRACKHOE
( ) MILLING EQUIPMENT	( ) PROBING DEVICE	( ) BORING / DRILLING
( ) EXPLOSIVES	( ) TRENCHER	( ) FARM EQUIPMENT
( ) VACCUUM EQUIPMENT	( ) GRADER	( ) OTHER

REASON DAMAGE OCCURRED– CHECK APPROPRIATE CHOICE BELOW

( ) AUTOMOTIVE ACCIDENT	( ) EXCAVATING BEFORE LOCATES DUE	( ) CARELESS MACHINE OPERATOR
(X) NO NOTIFICATION	( ) MARKS DISTURBED	( ) STUB ( ) OTHER

- **SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM**

COMMENTS : _____

_____

_____

PERSON PREPARING REPORT K. Baimakavich

FIELD SUPERVISOR T. Sanchez

FIELD MANAGER _____

- **ORIGINAL REPORT AND SUPPORTING INFORMATION IS TO BE SENT TO FACILITY DAMAGE RECOVERY**
- **COPY OF REPORT IS TO BE SENT TO DAMAGE PREVENTION**

SKETCH: - Show position of all pertinent information

FOR OFFICE USE ONLY:

- DID EXCAVATION OCCUR BEOFRE LOCATES WERE DUE YES NO
- NO IN 811 LOCATE CALLED IN YES NO
- DAMAGE CAUSED FROM EXCAVATION WITHIN 24" ZONE YES NO
- EXPIRED LOCATE YES NO
- WAS WHITE LINING INDICATED ON LOCATE REQUEST YES NO

COMPLETED BY: _____ DATE: _____

Property of United States Infrastructure Corporation
Photo taken on 10/22/2012 11:38:28 AM

DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Mar 20, 2013

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: Julio Molina

Business address *(number and street)*: 3827 Catalpa St

City, State, and ZIP code: East Chicago, IN 46312

Telephone number *(area code)*: 219 413 8554

Fax number *(area code)*:

E-mail address:

Excavation or Demolition Information

Excavator type: Occupant

Excavation or demolition equipment: Hand Tools

Type of work performed: Sewer (Sanitary/Storm)

Date and Location of Damage

Date of damage (*month, day, year*): Oct 22, 2012

County: Lake

City: East Chicago

Street address (*number and street, city, state, and ZIP code*):
3827 Catalpa St

Nearest intersection: _____

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: _____

Enter number of fatalities, if applicable and known: _____

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? 16

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:

If other, please specify: _____

Was site marked by "White Lining"?

Were special instructions part of the locate request?

Were maps used to complete the locate request?

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? No

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

Nipsco emergency repair ticket #: 1210221877