



Pipeline Safety Division Investigation Report

Investigation regarding: Hipkind Concrete

UPPAC Database Record ID: 3414

Investigator: Howard Friend

Telephone: (317) 650-9105

Report Date: 9/27/12

The Parties

Excavator: Hipkind Concrete

Contact: Casey Hipkind

Address (City, State): 5502 Mason Drive, Fort Wayne, IN 46809

Telephone: 260-747-1340

Facility Owner Information:

Business Name: NIPSCO

Contact: Luke Selking

Address (City, State): 1501 Hale Avenue, Fort Wayne, IN 46802

Telephone: (260) 439-1290

Utility Line Impact:

Damage Date: 7/26/12

Damage Address: 8301 Lima Valley Drive

City: Fort Wayne

Pipeline Facility

Product Type: Natural Gas

Facility Type/Function: Service

Facility size: 1 1/8"

Service Interruption: Yes

Number of Customers One

Repair Cost (if known): \$407

Excavator Activities/Cause of damage information:

Type of Equipment: Bobcat

Type of work performed: Road Work

Product release: Yes

Ignition: No

Excavator notify 811: Yes

Locate Information:

Excavator request locates: Yes

Indiana 811 ticket Number: 1207241877

Incident Impact Information:

Injuries: None

Fatalities: None

Synopsis: A natural gas service was damaged during excavation for road work.

Findings: The excavator had a valid locate request and the operator provided accurate locate marks.

Conclusion: There was a failure to maintain two (2) feet of clearance.

Violation: IC 8-1-26-20(b): Failure to maintain two (2) feet clearance with mechanized equipment.

NOTE: The excavator has not responded to the information request from the IURC dated 8/16/12. The summary is based on information provided by the operator and the locate contractor.

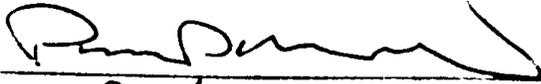


Date: 08/20/2012

MAIL MAIL:

The following is in response to your 08/20/2012 request for delivery information on your Certified Mail(TM)/RRE item number 9214 8901 0661 5400 0002 6827 29. The delivery record shows that this item was delivered on 08/20/2012 at 12:10 PM in FORT WAYNE, IN 46809. The scanned image of the recipient information is provided below.

Signature of Recipient:

Delivery Section	
Signature	
Name	P. Hipkind

Address of Recipient:

Address	5502 Mason
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Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local Post Office or postal representative.

Sincerely,

United States Postal Service

The customer reference info shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

3414
JOE HIPSKIND
HIPSKIND CONCRETE
5502 MASON DR
FORT WAYNE IN 46809-2151



101 West Ohio Street, Suite 1707
Indianapolis, IN 46204

September 17, 2012

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 3414
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3414

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: 5/18/2012

Event Location: 1920 E 250 N, Bluffton

Facility Owner: Northern Indiana Public Service Company

Excavator: Steves Landscaping Lawn & Garden

Other Party: N/A

Pipeline Division Case No. 3414

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. 3414	
Date of Event	7/26/2012
Event Location	Lima Valley Dr, Fort Wayne
Facility Owner	Northern Indiana Public Service Company
Excavator	Hipskind Concrete
Date of IURC Information Request	8/16/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Hipskind Concrete
RESPONSIBLE PARTY PERSONAL NAME	Casey Hipskind
TITLE (IF ANY)	
ADDRESS	5502 Mason Dr
CITY/ STATE/ZIP	Fort Wayne, IN 46809
PREFERRED TELEPHONE	260 747 1340
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 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	
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	8301 Lima Valley Dr
CITY/STATE/ZIP	Fort Wayne, IN 46818
NEAREST INTERSECTION	Lima Road
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.)	1 1/8
PRESSURE (PSIG/INCHES)	45
INTERRUPTION IN SERVICE (YES/NO)	Yes
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	N/A
REPAIR COST (IF KNOWN) (\$)	407.39
CAUSE OF DAMAGE INFORMATION:	
TYPE OF EQUIPMENT (Select One)	
Auger	
Backhoe/Trackhoe	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trencher	
Vacuum Equipment	
Unknown/Other	X Bobcat
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	X
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)	Yes
IGNITION AND/OR FIRE (YES/NO)	No
EXCAVATOR NOTIFY 811 (YES/NO)	Yes 1207260588
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	Yes

INDIANA 811 LOCATE TICKET NUMBER	1207241877
LOCATE MARKS VISIBLE (YES/NO)	Yes
LOCATE MARKS CORRECT (YES/NO)	Yes
EXCAVATOR "WHITE LINED" (YES/NO)	No
MAPS USED TO MARK FACILITIES (YES/NO)	Yes
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)	
POLICE DEPARTMENT RESPONSE (YES/NO)	
AMBULANCE RESPONSE (YES/NO)	
ADDITIONAL INFORMATION/COMMENTS	
<p>Excavator failed to use hand tools where required.</p> <p>Nipsco emergency locate #: 1207260696</p>	

Fact Based Investigation Report

01820120726003
Northern IN
7/26/2012 9:05:33 AM
7/26/2012 9:10:11 AM
JOE HIPSKIND
LIMA VALLEY DR
FORT WAYNE
ST: IN ZIP:

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

NIPSCO

DAMAGED CUSTOMER:

07/26/2012
10:00:00
10:10:00

INVESTIGATION DATE:
FROM:
TO:

HIPSKIND CONCRETE
street demo

EXCAVATOR INVOLVED:
TYPE OF EXCAVATION:

1207241877
7/26/2012 12:45:00 PM
Routine

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

1207260588
7/26/2012 9:20:00 AM

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

rob wermuth
7/26/2012 9:50:00 AM
Digital

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

132169

INVESTIGATOR EMP#:
INVESTIGATOR NAME:

Rob Wermuth
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?

No

Fact Based Investigation Customer Information

01820120726003

NIPSCO

(optional)

NOTIFICATION ID:

SELECT A CUSTOMER:

CUSTOMER #:

LOWPROF

Gas Service

Sedik Stephen - 125397

FACILITY DESCRIPTION:

FACILITY ID:

LOCATOR NAME & EMP #:

LOCATOR NOT KNOWN:

CHECK ALL THAT APPLY TO INVESTIGATION:

Facility Marked Accurately

Other:

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

Visual, Facility Exposed At Time Of Investigation,
Investigator Verified Existing Marks By Hooking Up

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

Marks good, paint and flags line up with damage site

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

WERE ANY MARKINGS VISIBLE ON THE DAMAGE SITE UPON ARRIVAL?

Yes

WERE ANY OTHER INDICATORS OF FACILITY PRESENT IN THE AREA?

Yes

WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS?

Yes

EXTENT OF FACILITY DAMAGE

cut

REPLACEMENT FOOTAGE

spl

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?

No na

WHAT CONTRACTOR EQUIPMENT WAS USED?

na

IS THE FACILITY SHOWN ON THE UTILITY RECORDS?

No

IF YES, PLEASE LIST RECORD #(S)

na

NIPSCO 00181 LUPPSa 07/26/2012 09:05:33 1207260588-00A EMER DAMG STRT

DAMAGE DAMAGE

Case 3414

Ticket : 1207260588 Date: 07/26/2012 Time: 09:03 Oper: LPORTER Chan:046

State: IN Cnty: ALLEN Twp: WASHINGTON
Cityname: FORT WAYNE Inside: Y Near: N
Subdivision: LIMA VALLEY

Address :

Street : LIMA VALLEY DR
Cross 1 : NIRTHBURY DR Within 1/4 mile: Y
Location: ON LIMA VALLEY DRIVE FROM NORTHBURY DRIVE TO 600 FT EAST LOCATE ENTIRE
RIGHT OF WAY

Grids : 4109C8509A 4109D8510D 4109C8510D 4109D8510C 4109C8510C
Boundary: n 41.156071 s 41.153343 w -85.174522 e -85.164680

Work type : REMOVE AND REPLACE CONCRETE STREET
Done for : CITY OF FT. WAYNE
Start date: 07/26/2012 Time: 09:03 Hours notice: 0/0 Priority: EMER
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y
Duration : 3 WEEKS Depth: 2 FEET

Company : HIPSKIND CONCRETE Type: CONT
Co addr : 5502 MASON DRIVE
City : FORT WAYNE State: IN Zip: 46809
Caller : JOE HIPSKIND Phone: (260)747-1340
Contact : PAT HIPSKIND Phone:
BestTime:
Mobile : (260)410-4710
Fax : (260)747-7227
Email : JHIPSKIND@COMCAST.NET

Remarks : All tickets are taken and processed on Eastern Daylight Time
PER JOE HIPSKIND - HIT A NIPSCO THREE QUARTER INCH PLASTIC GAS SERVICE LINE -
GAS IS BLOWING - DIGGING IN FRONT 1808 LIMA VALLEY - CREW STILL ON SITE - JOE
HAS CALLED 911 AND NIPSCO - PREVIOUS TICKET 1207241877
Will you be white-lining the dig site area? NO

Submitted date: 07/26/2012 Time: 09:03
Members: AEPIN CC FW ID7151 ID8000 NIPSCO SM

NIPSCO 00508 IUPPSa 07/24/2012 12:39:16 1207241877-00A NORM NEW STRT

NORMAL NOTICE

Case 3414

Ticket : 1207241877 Date: 07/24/2012 Time: 12:28 Oper: JOE.HIPSKIND Chan:000

State: IN Cnty: ALLEN Twp: WASHINGTON
Cityname: FORT WAYNE Inside: Y Near: N
Subdivision: LIMA VALLEY

Address :

Street : LIMA VALLEY DR

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

Location: ON LIMA VALLEY DRIVE FROM NORTHBURY DRIVE TO 600 FT EAST LOCATE ENTIRE
RIGHT OF WAY

:

Grids : 4109C8509A 4109D8510D 4109C8510D 4109D8510C 4109C8510C

Boundary: n 41.156071 s 41.153343 w -85.174522 e -85.164680

Work type : REMOVE AND REPLACE CONCRETE STREET

Done for : CITY OF FT. WAYNE

Start date: 07/26/2012 Time: 12:45 Hours notice: 48/48 Priority: NORM

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

Duration : 3 WEEKS Depth: 2 FEET

Company : HIPSKIND CONCRETE Type: CONT

Co addr : 5502 MASON DRIVE

City : FORT WAYNE State: IN Zip: 46809

Caller : JOE HIPSKIND Phone: (260)747-1340

Contact : PAT HIPSKIND Phone:

BestTime:

Mobile : (260)410-4710

Fax : (260)747-7227

Email : JHIPSKIND@COMCAST.NET

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

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

:

Submitted date: 07/24/2012 Time: 12:28

Members: AEPIN CC FW ID7151 ID8000 NIPSCO SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA FORT WAYNE MAXIMO WO# M 498337
OPERATING AREA CONTACT JASON OTIS JOB ORDER # 564391
TRACKING NUMBER 01820120629011 LOCATE REF # _____
Locate Performed By: US12 C15386064201

DATE AND TIME OF ACCIDENT JUNE 29 2012, 13:37 M DATE OF REPORT 6-29-12
PLACE OF DAMAGE (INCLUDE CITY) 1808 ? LIMA VALLEY DR Ft Wayne In 46818

DAMAGE WAS TO:

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

OTHER (DESCRIBE) _____

GAS: SERVICE MAIN () SIZE 1 1/8 MATERIAL: PLASTIC STEEL () METER () REG STATION () STUB ()
OTHER (DESCRIBE) _____

DEPTH OF FACILITY (inches) 12" PRESSURE (PSI) 40-50 Lbs.

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

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

DURATION OF INTERRUPTION: TIME REPORTED 13:27 TIME SHUT OFF 15:10 TIME RESTORED 17:30

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: CUT THROUGH 1"

LOCATE MARKS ON SITE: YES () DISTANCE BETWEEN FACILITY AND LOCATE MARKS _____ NO
HOW LOCATED: PAINT () FLAGS () BOTH () WHITE LINED () LOC # 1206250763

PARTY THAT CAUSED DAMAGES (NAME) _____

ADDRESS OF PARTY (INCLUDE CITY) HIPSKIND

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE RICK GARLAND

WITNESS NAME AND ADDRESS _____

WITNESS REMARKS NOT LOCATED

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

FIRE () AGENCY DWFD REPORT # _____

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

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

WORK IN PROGRESS WHEN FACILITY DAMAGED - CHECK APPROPRIATE CHOICE BELOW

- | | | | |
|--|-------------------------------------|--|---|
| <input type="checkbox"/> AGRICULTURE/FARMING | <input type="checkbox"/> CABLE TV | <input type="checkbox"/> CURB/SIDEWALK | <input type="checkbox"/> TELECOMMUNICATIONS |
| <input type="checkbox"/> BLDG CONSTRUCTION | <input type="checkbox"/> DEMOLITION | <input checked="" type="checkbox"/> DRAINAGE | <input type="checkbox"/> WATER |
| <input type="checkbox"/> DRIVEWAY | <input type="checkbox"/> ELECTRIC | <input type="checkbox"/> SURVEYING | <input type="checkbox"/> DRAINS/CULVERTS |
| <input type="checkbox"/> FENCING | <input type="checkbox"/> GRADING | <input type="checkbox"/> IRRIGATION | <input type="checkbox"/> MOWING |
| <input type="checkbox"/> LANDSCAPING | <input type="checkbox"/> PIPELINE | <input type="checkbox"/> MILLING | <input type="checkbox"/> OTHER _____ |
| <input type="checkbox"/> POLE/SIGN POST | <input type="checkbox"/> ROAD WORK | <input type="checkbox"/> SEWER | |

TYPE OF EQUIPMENT USED - CHECK APPROPRIATE CHOICE BELOW

- | | | |
|--|---|--|
| <input type="checkbox"/> AUGER | <input type="checkbox"/> HAND TOOLS | <input checked="" type="checkbox"/> BACKHOE/TRACKHOE |
| <input type="checkbox"/> MILLING EQUIPMENT | <input type="checkbox"/> PROBING DEVICE | <input type="checkbox"/> BORING / DRILLING |
| <input type="checkbox"/> EXPLOSIVES | <input type="checkbox"/> TRENCHER | <input type="checkbox"/> FARM EQUIPMENT |
| <input type="checkbox"/> VACCUUM EQUIPMENT | <input type="checkbox"/> GRADER | <input type="checkbox"/> OTHER _____ |

REASON DAMAGE OCCURRED - CHECK APPROPRIATE CHOICE BELOW

- | | | |
|--|--|---|
| <input type="checkbox"/> AUTOMOTIVE ACCIDENT | <input type="checkbox"/> EXCAVATING BEFORE LOCATES DUE | <input type="checkbox"/> CARELESS MACHINE OPERATOR |
| <input type="checkbox"/> NO NOTIFICATION | <input type="checkbox"/> MARKS DISTURBED | <input type="checkbox"/> STUB |
| | | <input checked="" type="checkbox"/> OTHER <u>NO LOCATED</u> |

SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

FOR GAS SIN #110601 Rev. 6-12

COMMENTS :

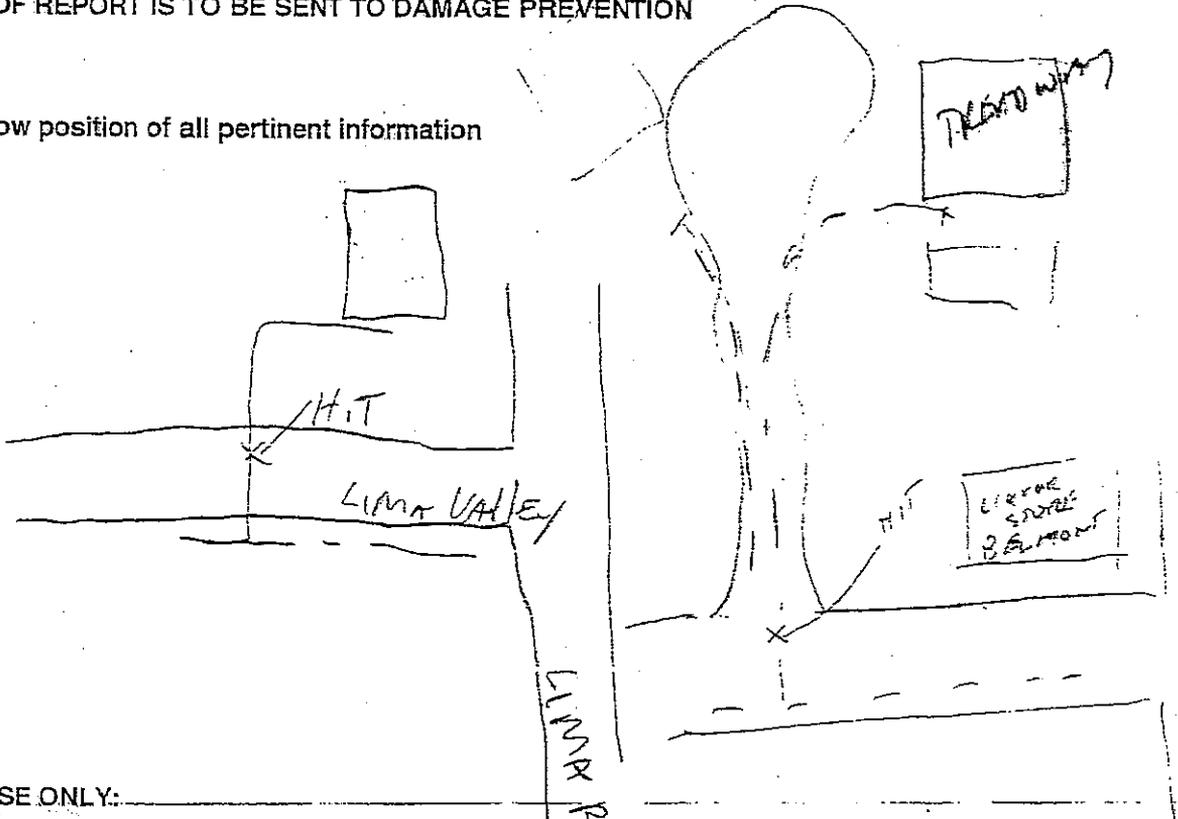
PERSON PREPARING REPORT STEVE WEA CHOCK

FIELD SUPERVISOR Jason O'his

FIELD MANAGER Randy Ann

- 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 BEFORE 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: _____