



Public Service Commission  
State of North Dakota

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COMMISSIONERS

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July 12, 2013

Matt Rodenbough  
RODENBOUGH TRUCKING AND EXCAVATING, INC.  
P.O. Box 339  
Surrey, ND 58785-0339

Re: Third Party Damage Complaint

Dear Mr. Rodenbough:

Enclosed is a copy of a Third Party Damage Complaint against RODENBOUGH TRUCKING AND EXCAVATING, INC. (Rodenbough) received by the North Dakota Public Service Commission (Commission) on June 20, 2013 from MONTANA DAKOTA UTILITIES (MDU). The location of the damage was at 1707 22<sup>nd</sup> Ave. SW in the city of Minot in the county of Ward in North Dakota.

Please respond to the Commission by **August 5, 2013**, with your written account of the event. Your response, the complaint, and other available information will be reviewed to determine whether Commission staff will file a formal complaint.

Your response should also address the following criteria used to determine the amount of civil penalty, if any, to be recommended by Commission staff as part of a formal complaint:

- a) The nature, circumstances, and severity of the complaint;
- b) The degree of suspected fault on the part of Rodenbough;
- c) Rodenbough's history of prior violations or complaints;
- d) Rodenbough's ability to pay;
- e) Any good faith effort by Rodenbough in attempting to achieve compliance; and
- f) The effect the penalty may have on Rodenbough's ability to continue in business.

North Dakota Century Code section 49-07-01.1 provides for a civil penalty not to exceed five thousand dollars for violations of the One Call law.

If you have any questions, please call or e-mail me at 701-220-5779 or [aarmorman@nd.gov](mailto:aarmorman@nd.gov).

Best regards,

Aaron A Morman  
Pipeline Safety Inspector/Program Manager



**THIRD PARTY DAMAGE COMPLAINT**  
 Public Service Commission  
 SFN 59067 (11-12)

**PART A – WHO IS SUBMITTING THIS COMPLAINT**

Information Being Submitted By <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Company*	Company/Organization Montana Dakota Utilities	Person Filing Information Mike Schoepp	Position Region Gas Superintendent	
Address of Person Filing Information PO Box 1457	City Bismarck		State ND	Zip Code 58502
Telephone Number 701-224-5814	Email Address micheal.schoepp@mdu.com		Date 7/11/13	

**PART B – WHO ALLEGEDLY VIOLATED THE ONE-CALL REGULATIONS**

Name of Excavator Rodenbough Trucking and Excavating		Telephone Number 701-580-6812		
Address PO Box 339	City Surrey	State ND	Zip Code 58785	
Name of Entity for Which Excavation Was Performed city of minot		Telephone Number		
Address	City	State	Zip Code	

**PART C – TIME AND LOCATION OF THE EVENT**

Date and Time of Event 7/8/13 3:55 pm	Address of the Excavation and/or Damage 1707 22nd Ave SW			
County Ward	City Minot	State ND	Zip Code 58701	

**PART D – FACILITY INVOLVED**

Type of Facility Involved natural gas line	Operator of Facility and Contact Person (if known) MDU and Mike Schoepp			
Address PO Box 1457	City Bismarck	State ND	Zip Code 58502	
Telephone Number 701-224-5814	Email Address (if known) micheal.schoepp@mdu.com			
Brief Description of Facility Involved 2" gas main, second time the contract had damaged our line.				

**PART E – DAMAGE (if applicable)**

Fatalities none	Injuries none	Length of Hospitalization, If Applicable
Estimated Value of Property Damage: \$ \$1,000		Number of Customers Affected none
Damaged Within <input checked="" type="checkbox"/> Public Property <input type="checkbox"/> Private Property		Photos of Damaged Facility <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, please include copies)

**PART F – EXCAVATION**

Was a locate requested from North Dakota One-Call? <input checked="" type="checkbox"/> Yes    Locate Ticket Number <input type="checkbox"/> No <input type="checkbox"/> Unknown	Start Date on Ticket <b>6/27/13</b>
Did excavator wait until the start date/time on the ticket before commencing excavation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> N/A	
Were buried facilities exposed by hand or non-invasive equipment prior to excavation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> N/A	

**PART G – MARKING**

Were facilities marked?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> N/A
Were utility/facility marks visible in the area of excavation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> N/A
Were the utility/facilities marked correctly?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> N/A
Was the marking complete prior to the start time on the ticket?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown	<input type="checkbox"/> N/A
Did the excavator pre-mark with white paint?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> N/A
Was the facility marked accurately within 24 inches horizontally?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unknown	<input type="checkbox"/> N/A
Did the excavator use reasonable care to maintain locate marks for the life of project?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> N/A

**PART H – DESCRIPTION OF EVENT**

Description of Event  contractor had expired locate ticket and hit natural gas line. This incident is the second time they hit our line in the same area.
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Description of Event Continued

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**PART I - SIGNATURE**

Signature of Person Filing Complaint

Michael Schoepf

Date

7/11/13

Please include additional documents and photos, if applicable.

"If you are filing on behalf of a company, please provide information supporting your authority to file this complaint."

Send Completed, Original Complaint To:  
Public Service Commission  
600 E Boulevard Ave Dept 408  
Bismarck ND 58505-0480  
Telephone: (701) 328-2400

**Email to the Commission**