



Public Service Commission
State of North Dakota

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August 16, 2013

Tom Thompson
TOM'S BACKHOE SERVICE, INC
323 Woodland Hills LN
Brainerd, MN 56401-6514

CASE GS-13-712

Re: Third Party Damage Complaint

Dear Mr. Thompson:

Enclosed is a copy of a Third Party Damage Complaint against TOM'S BACKHOE SERVICE, INC (TOM'S) received by the North Dakota Public Service Commission (Commission) on July 26, 2013 from MONTANA DAKOTA UTILITIES (MDU). The location of the damage was at 3500 SW 4th Street in the county of Ward in the city of Minot in North Dakota.

Please respond to the Third Party Complaint by **September 10, 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 TOM's;
- c) TOM's history of prior violations or complaints;
- d) TOM's ability to pay;
- e) Any good faith effort by TOM's in attempting to achieve compliance; and
- f) The effect the penalty may have on TOM's ability to continue in business.

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

Please send or e-mail written response to the Commission at the address above or call me at 701-220-5779.

Best regards,

Aaron A Morman
Pipeline Safety Inspector/Program Manager

C. Mike Schoepp-MDU

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Letter enclosing third-party damage complaint



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 7/26/13		

PART B - WHO ALLEGEDLY VIOLATED THE ONE-CALL REGULATIONS

Name of Excavator Tom's Backhoe		Telephone Number 218-828-4232		
Address 323 Woodland Hills Lane	City Brainerd	State MN	Zip Code 56401	
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 7/26 @ 12:30 pm	Address of the Excavation and/or Damage 3500 SW 4th Street			
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 - 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 1" service line feeding building.				

PART E - DAMAGE (if applicable)

Fatalities none	Injuries none	Length of Hospitalization, If Applicable n/a
Estimated Value of Property Damage: \$ \$500		Number of Customers Affected 1
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 7/23/13
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input 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 checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> N/A

PART H - DESCRIPTION OF EVENT

Description of Event
contractor hit 1" service line, said he thought it was the same depth as the other service down the road.

Description of Event Continued

[Empty box for description of event]

PART I – SIGNATURE

Signature of Person Filing Complaint Mike Schoepp	Date 7/26/13
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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