

# REPORT OF DAMAGE TO COMPANY-OWNED PROPERTY

(NOTE: Please refer to the bottom of this form before proceeding with completion.)

## Part A

Owner of Property: MDU District: BISMARCK Town: Bismarck, ND  
Time of Damage: 3:30 PM Date: 5/28/2014  
Name of Location Where Damage Occurred: 3500 Apple Creek Rd  
Location of Damaged Property: west approx 700'  
Rural Location: \_\_\_\_\_  
Estimated Amount of Loss: \$500 in material First Responder Order No. (If applicable): \_\_\_\_\_  
CC&B Account # (If Applicable): \_\_\_\_\_ MDU Service Order No. (If applicable): \_\_\_\_\_  
If damaged meter, meter number: \_\_\_\_\_ Additional Work Order (If applicable): \_\_\_\_\_  
Type of meter: \_\_\_\_\_

### Description and Cause of Loss or Damage

Northern Excavating Company dug into 3 phase 4/0 URD primary. Cable had major damage but no outage occurred. Outage was required later to switch out damaged section of cable. Another after hours outage will be required to switch back to normal. Rob w/ Northern is denying cable strike. He is saying it's possibly another contractor from before. Concentric is clean and shiny and cable is clean under the jacket. Appears to be fresh damage.

## Part B

Did Loss or Damage Originate on our Premises? (If no, Explain): N

If an Explosion, did a Fire Ensur? N (How was Fire Extinguished?)

### If Electrical Property is Involved, Fill in the Following Supplemental Data:

Type of Equipment Involved: underground primary cable  
Damage caused by Electrical Arcing, Short Circuit or Other Failure, Give Approximate Cause

If Electrical, Did a Fire Ensur? N

## Part C

If damage was caused by excavation, was location of our facilities requested prior to digging? Y  
Location requested by: Northern Excavating Co. Inc. Time: \_\_\_\_\_ Date: 5/15/2014  
Line Locate Number: 14048562  
Company property located on: \_\_\_\_\_  
Damage notification by: \_\_\_\_\_ Time: \_\_\_\_\_ Date: \_\_\_\_\_  
Was damager a subcontractor: \_\_\_\_\_ If yes, for whom: \_\_\_\_\_

### Who to bill for damages:

Name of who to Bill: Northern Excavating Co. Inc. Name of Equipment Operator: Rob Lindberg  
Address of who to Bill: 3420 82nd Ave SE Type of equipment: excavator  
Jamestown, ND 58401 Operator's Address: \_\_\_\_\_  
Phone # of who to Bill: 701-252-5967 Operator's Phone #: \_\_\_\_\_

Name of Insurer: \_\_\_\_\_

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Public Service Commission

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Insurance Policy #: \_\_\_\_\_

Was a Police Report made: \_\_\_\_\_ If yes, please attach report

## REPORT OF DAMAGE TO COMPANY-OWNED PROPERTY

**Others involved in Property Damage:**

<u>Names of Persons Involved</u>	<u>Address</u>	<u>Phone Number</u>

**Witnesses to Property Damage:**

<u>Names of Witnesses</u>	<u>Address</u>	<u>Phone Number</u>

**In case of line break, complete the following:**

		<u>Time</u>	<u>Date</u>
Decatherms of gas to bill:	Size of hole(in):	Time line blew:	

**Part D**

<u>Names of Persons Injured</u>	<u>Address</u>	<u>Extent of Injury</u>

Person Filling Out Form: Cordell Wiest

Date: 5/29/2014

Approved By: \_\_\_\_\_

Date: \_\_\_\_\_

**Instructions**

Email this completed form to MDURA - Accounts Receivable: [MDURA.AccountsReceivable@mdu.com](mailto:MDURA.AccountsReceivable@mdu.com)

Use this form to make an immediate preliminary report of all damage to or loss of company-owned property:

**If damage is caused by any of the following, complete Parts A, B, & D, if applicable.**

- 1) Fire, lightning, inherent explosion, implosion, windstorm, tornado, flood, electrical arcing, short circuit, hail, riot and civil commotion, vandalism, malicious mischief, aircraft, or smoke damage.
- 2) An accident to boilers and/or machinery (an accident being a sudden and accidental breakdown of an object or part of an object).
- 3) Loss of or damage to property during the physical process of installation, movement or dismantling including while awaiting installation.

**If damage was caused by others, complete Parts A, C & D, if applicable.**

Name	Employee #	Hours	Unit #	Hours/Miles