

Mail completed form to:

PUBLIC UTILITIES COMMISSION  
500 EAST CAPITOL AVENUE  
PIERRE, SD 57501  
ATTN: SOUTH DAKOTA ONE CALL BOARD

OC03-001

RECEIVED

MAR 11 2003

SOUTH DAKOTA PUBLIC  
UTILITIES COMMISSION

### COMPLAINT

COMPLETE INFORMATION IS REQUIRED - ADDITIONAL PAGES MAY BE USED IF REQUIRED

### ALLEGATION OF PROBABLE VIOLATION(S) OF SOUTH DAKOTA ONE CALL LAWS

#### I. ACTION REQUESTED BY:

COMPLAINT FILED BY INDIVIDUAL \_\_\_ OR BUSINESS\*  PERSON FILING COMPLAINT (Please print): GINNY BECK

COMPANY (If applicable) Crooks Municipal Utilities ADDRESS D.O. Box 785 PHONE NUMBER 605-543-5238

SIGNATURE OF COMPLAINANT: Ginny Beck DATE: 3-10-03 EMAIL ADDRESS: ginnybeck@junu.com  
Utility Superintendent

\*If the complaint is files on behalf of a Company, the person signing this form should have the proper authority to file the complaint.

#### II. ACTION REQUESTED AGAINST:

NAME OF EXCAVATOR/FACILITY OPERATOR: TROY SIMONSEN PHONE NUMBER: 238-5134

ADDRESS: 705 PARK BLVD Hurley SOUTH DAKOTA

WAS A LOCATE REQUESTED FROM SD ONE CALL? YES \_\_\_ NO  LOCATE TICKET #: \_\_\_\_\_ START DATE ON TICKET: \_\_\_\_\_

DID EXCAVATOR WAIT UNTIL THE START DATE/TIME ON THE TICKET BEFORE COMMENCING EXCAVATION? YES \_\_\_ NO

WERE BURIED FACILITIES EXPOSED BY HAND OR WITH NON-INVASIVE EQUIPMENT PRIOR TO EXCAVATION? YES \_\_\_ NO

#### III. FACILITY INVOLVED (IF ANY)

TYPE OF FACILITY INVOLVED: gas OPERATOR OF FACILITY (IF KNOWN): Crooks Municipal Gas

OPERATOR ADDRESS: P.O. Box 785 Crooks SD PHONE NUMBER: 543-5238

DEPTH OF COVER: 2 ft PRESSURE: 48 LBS VOLTAGE: \_\_\_\_\_ NUMBER OF CABLE PAIRS: \_\_\_\_\_

#### IV. MARKING

WERE FACILITIES MARKED? YES \_\_\_ NO  WAS THE MARKING COMPLETE PRIOR TO THE START TIME ON THE TICKET? YES \_\_\_ NO \_\_\_

DID EXCAVATOR PRE-MARK WITH WHITE PAINT? YES \_\_\_ NO

WAS THE FACILITY MARKED ACCURATELY (WITHIN 18 INCHES)? YES \_\_\_ NO \_\_\_

DID EXCAVATOR USE REASONABLE CARE TO MAINTAIN LOCATE MARKS FOR LIFE OF PROJECT? YES \_\_\_ NO

HAVE YOU DISCUSSED THE PREVIOUS STATEMENTS WITH THE OTHER PARTY? YES \_\_\_ NO \_\_\_

IS THERE AGREEMENT? YES \_\_\_ NO \_\_\_ IF NO, PLEASE EXPLAIN: \_\_\_\_\_

#### V. DAMAGE (IF ANY)

FATALITIES: \_\_\_\_\_ INJURIES: \_\_\_\_\_ LENGTH OF HOSPITALIZATION: \_\_\_\_\_  
Nothing Hit, yet

ESTIMATED PROPERTY DAMAGE (\$): \_\_\_\_\_ NUMBER OF CUSTOMERS AFFECTED: \_\_\_\_\_

ADDITIONAL INFORMATION: EXCAVATOR DUG A BASEMENT ON 3-6-03 WITHOUT ANY BUILDING PERMITS AND NO LOCATES BEING CALLED IN.

WORK BEING DONE AT 700 ROYAL AVE. CROOKS. (BLOCK 3, LOT 9, PALMIRA ADDEN)

**VI. PROBABLE VIOLATION**

SPECIFIC STATUE(S) OR RULE(S) THAT WAS VIOLATED:

ADDRESS/LOCATION OF PROBABLE VIOLATION:

700 ROYAL AVE, CROOKS SD 57020

DATE/TIME OF PROBABLE VIOLATION

MORNING : OF 3-6-03

HAVE YOU DISCUSSED THIS PROBABLE VIOLATION WITH THE PARTY THE ACTION IS FILED AGAINST: YES  NO

IF YES, NAME OF THE PARTY WITH WHOM YOU DISCUSSED THE PROBABLE VIOLATION: TROY STANG, JR

DESCRIPTION OF PROBABLE VIOLATION: PROPERTY OWNER.