
From: donotreply@sdonecall.com[SMTP:DONOTREPLY@SDONECALL.COM]

Sent: Friday, September 19, 2014 11:46:09 AM

To: PUC Docket Filings

Subject: New One Call Complaint Form

Auto forwarded by a Rule

1. Action Requested By:

Complaint filed on behalf of or by: Montana-Dakota Utilities Co.

Contact Person: Wade Jutila

Phone: 605-355-4034 Ext:

Street Address or PO Box: PO Box 1060

City: Rapid City

State: SD

Zip: 57709

Fax: 605-355-4036

Email Address: wade.jutila@mdu.com

Date: 9/19/2014

2. Action Requested Against:

Name of excavator / facility operator: Olson Construction Inc.

Phone: 605-381-0484 Ext:

Street Address Or PO Box: 2816 Hoefer Ave

City: Rapid City

State: SD

Zip: 57701

Fax: --

Email Address: olsonconstruction@live.com

Is this party aware of your allegations?: No

Provide detail including whom you spoke with:

3. Basic Facts:

Street Address / location of alleged violation: 824 Farlow St.

City: Rapid City

State: SD

Date of alleged violation: 07/08/2014

Time of alleged violation: 1:00 p.m.

Describe your allegation: Contractor dug through a 1/2" plastic service line with a backhoe.

Do you believe the alleged violation to be intentional?: Yes

Why or why not?: No locates were obtained for property.

4. Excavation / Locate Information:

Was a locate requested from SD One Call?: No

If a locate was requested:

Locate ticket #:

Start date and time on ticket:

Did the excavator wait until the start date / time on the ticket before commencing excavation?:

If no, when did excavation begin (date and time)?:

Did the excavator maintain a minimum horizontal clearance of 18 inches between a marked facility and mechanical equipment?: No

Explain:

Were buried facilities exposed by hand or non-invasive equipment prior to excavation?: No

Were facilities marked?: No

Was the marking complete prior to the start time on the ticket?:

Did the excavator pre-mark with white paint?:

Was the facility marked accurately (within 18 inches)?:

Did the excavator use reasonable care to maintain locate marks for the life of project?:

Type of facility involved: Natural gas service line

Operator of facility (if known): Montana-Dakota Utilities Co.

Operator address (Street or PO Box): PO Box 1060

City: Rapid City

State: SD

Zip: 57709

Phone: 605-355-4034

Depth of Cover: 24 inches

Pressure: 35 psig

Voltage:

of cable pairs:

5. Damages

Was the facility damaged?: Yes

If yes, provide detail and an estimate of damage: Service line was severed, estimated damage of \$300.00.

Were damages on public right of way or private property?: Private

Was anyone injured as a result of facility damage?: No

If yes, provide detail:

Length of hospitalization:

Were there fatalities?: No

If yes, provide detail:

Was operator service affected?: Yes

If yes, provide detail (how many customers for how long): 1 customer for one hour.

Other information regarding injuries or damages:

6. Statutory Violation

Specific statute(s) or rule(s) you believe were violated: Statute 49-7A-5 Notification of proposed excavation.
Other information to support your position: No locates were obtained.