

Formstack Submission For: [South Dakota One Call Complaint Form](#)

Submitted at 06/09/22 11:23 AM

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|-----------------------------------------------|------------------------------------------------------------------|
| Complaint filed on behalf of or by: | City of Crooks |
| Contact Person: | Jason Penning |
| Phone Number: | (605) 543-5238 |
| Ext: | |
| Name or Company Name: | City of Crooks |
| Street Address or PO Box: | 701 South West Ave PO BOX 755 Crooks, SD 57020 |
| Fax: | (605) 543-6438 |
| Email: | jpenning@crookssd.org |
| Date: | Jun 09, 2022 |
| Name of excavator / facility operator: | Brooks Construction |
| Phone: | (605) 368-5447 |
| Ext: | |
| Name or Company Name: | Brooks Construction |
| Street Address or PO Box: | 27081 Sundowner Ave Sioux Falls, SD 57106 |

Fax:

Email:

info@brooksconstructionservices.com

Is this party aware of your allegations?:

No

The South Dakota One Call Board expects communication to occur between both parties before filing complaints. Please provide details of who you spoke with, including the date and time, and what was discussed.:

Spoke with Jon at Brooks Construction and advised him to call in another ticket, this time with the correct address. I told him that he would have to wait 48 hours prior to digging but he said he wasn't going to do that.

Statutory Violations:

49-7A

Other information to support your position:

This contractor kept calling in a series of tickets but referenced the incorrect address (25757 475th Renner). Obviously, they ended up hitting a line of sorts since nothing was marked. Even the damage ticket called in referenced the incorrect address! I found the excavator at the correct address (25797 475th) and advised him to call in the correct address and and that he would have to wait 48 hours prior to digging. He said he wasn't going to wait to dig.

Street Address / location of alleged violation:

25797 475
Renner, SD

Date of alleged violation:

Jun 01, 2022

Time of alleged violation:

11:00 AM

Describe your allegation:

Excavating prior to ticket being valid

Do you believe the alleged violation to be intentional?:

Yes

| | |
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| Why or why not?: | Contractor said he wasn't going to wait until the ticket is good |
| Was a locate requested from SD One Call?: | Yes |
| Locate ticket #: | 2214399537 |
| Start Date on Ticket: | May 25, 2022 |
| Start time on ticket: | 09:00 AM |
| Did the excavator wait until the start date / time on the ticket before commencing excavation?: | No |
| If no or not sure, when did excavation begin (date)?: | Jun 01, 2022 |
| If no or not sure, when did excavation begin (time)?: | |
| Did the excavator maintain a minimum horizontal clearance of 18 inches between a marked facility and mechanical equipment?: | N/A |
| Explain: | |
| Were buried facilities exposed by hand or non-invasive equipment prior to excavation?: | N/A |
| Were facilities marked?: | No |

Was the marking complete prior to the start time on the ticket?: No

Did the excavator pre-mark with white paint?: No

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

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

Type of facility involved: natural gas

Operator of facility (if known): Crooks Municipal Utilities

Operator address (Street or PO Box): p o box 785
Crooks, SD 57020

Operator Phone: (605) 543-5238

Depth of Cover (If unsure put N/A): N/A

Pressure (If none, write none): NONE

Voltage (If none, write none): NONE

of cable pairs (If none, write none): ON

Was the facility damaged?: No

If yes, provide detail and an estimate of damage.:

Were damages on public right of way or private property?: N/A

Was anyone injured as a result of facility damage?: N/A

If yes, provide detail.:

Length of hospitalization:

Were there fatalities?: No

If yes, provide detail.:

Was operator service affected? : No

If yes, provide detail (how many customers for how long).:

Was the one-call notification center immediately notified of the damage, dislocation, or disturbance?: Yes

If No, why not?:

Was the operator of the facility immediately notified of the damage, dislocation, or disturbance?: Yes

If No, why not?:

Was there an escape of any flammable, toxic, or corrosive gas or liquid?:

No

If Yes, but if 911 was not called, or if you don't know, explain why.:

Please provide a Fire Department or Emergency Services incident report, if available :

Not Available

Attachment:

Attachment Information:
File names should not include symbols. Example:(\$, &, *, %.) etc. If submitting multiple files, please zip all files into one folder.:

[View File](#)