|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Inspection Report** | | | | | | **Inspection Tracking** | | | | | | |
| **Inspector/Submit Date:** | | |  | | | **NC Required?**  **Inspection Tracking # :**  **NC Tracking # :** | |  | | | | |
|  | | |  | | |  | |  | | | | |
|  | | |  | | |  | |  | | | | |
|  | | | | | | | | | | | | |
| **Operator:** | |  | | | | | | | |  | |  |
| **Location:** | |  | | | | | | | |  | |  |
| **Company Rep:** | |  | | | | | | | | | | |
| **Unit Type & Commodity:** | | | | | Natural Gas | | | | | | | |
| **Inspection Type:** | field and records | | | | | | **Inspection Date(s):** | |  | | | |
| **PUC Representative(s):** | | | |  | | | **Field Days:** | | | |  | |
| **Summarize event:** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Findings:** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |

|  |  |  |
| --- | --- | --- |
| **Click on icon to insert picture and resize to fit box horizontally** | | |
|  | |  |
| Date of Damage: | | Time of Damage: |
| Address of Damage: | | |

Type of Facility Damaged:

Size:       Material:       Facility:       Pressure:

Company Response Time:

|  |  |
| --- | --- |
| Time Notified: | Time Dispatched: |
| Responder Arrival Time: | Made Safe Time: |
| 911 Notified:**Y** **N** | Fire Department On-Scene:**Y** **N** |
| Evacuations:**Y** **N** | Number Evacuated: |
| Customers Out of Service:**Y** **N** | Number Out of Service: |
| Method of Gas Shutdown/Made Safe: |  |
| One Call Ticket?**Y** **N N/A** | Ticket Serial Number: |
| Facility Marked:**Y** **N N/A** | Marks Accurate:**Y** **N** **N/A** |
| Legal Dig**:** **Y** **N N/A** | Inspection by Operator:**Y** **N** |
| Operator on-scene during damage?**Y** **N** | Frequency of Inspection |

**Third Party Who Damaged Facility:**

|  |  |
| --- | --- |
| **Company Name/Address:** | |
| **Contact Person:** | **Telephone:** |
| **Type of tool/equipment that caused damage:** | |

**Party at fault**:

**Company  Contractor  Company’ Contractor  Other Specify**

|  |
| --- |
| **Summarize the occurrence in detail:** |
|  |
| **Review copies of One Call Notice, leak report, repair order, inspection records, marking record & pictures** |

| **.605(a)** | **DAMAGE PREVENTION PROGRAM PROCEDURES** | **S** | **U** | **N/A** | **N/C** |
| --- | --- | --- | --- | --- | --- |
| .614(c) Participation in a qualified one-call program, or if available, a company program that complies  with the following: |  | | | |
| (1) Identify persons who engage in excavating |  |  |  |  |
| (2) Provide notification to the public in the One Call area |  |  |  |  |
| (3) Provide means for receiving and recording notifications of pending excavations |  |  |  |  |
| (4) Provide notification of pending excavations to the members |  |  |  |  |
| (5) Provide means of temporary marking for the pipeline in the vicinity of the excavations |  |  |  |  |
| (6) Provides for follow-up inspection of the pipeline where there is reason to believe the  pipeline could be damaged |  |  |  |  |
| (i) Inspection must be done to verify integrity of the pipeline |  |  |  |  |
| (ii) After blasting, a leak survey must be conducted as part of the inspection by the operator |  |  |  |  |

|  | **MISCELLANEOUS REQUIREMENTS** | **S** | **U** | **N/A** | **N/C** |
| --- | --- | --- | --- | --- | --- |
| **59.33** | SAFETY  (a) Responsibility. Each public utility shall at all times use every reasonable effort to properly warn and protect the public from danger, and shall exercise reasonable care to reduce the hazards to which employes, customers and others may be subjected to reason of its equipment and facilities. |  |  |  |  |
| **192.13(c)** | What general requirements apply to pipelines regulated under this part?  (c) Each operator shall maintain, modify as appropriate, and follow the plans, procedures, and programs that it is required to establish under this part. |  |  |  |  |