

ONE CALL COMPLAINT FORM

1. ACTION REQUESTED BY

Complaint filed on behalf of or by*:

Contact Person:

Phone: - - Ext:

Street Address or PO Box:

City: State: Zip:

Fax: - -

Email Address:

Date:

***Note if you are filing on behalf of a company, please make sure you have the proper authority to file the complaint**

2. ACTION REQUESTED AGAINST

Name of excavator / facility operator:

Phone: - - Ext:

Street Address Or PO Box:

City: State: Zip:

Fax: - -

Email Address:

Is this party aware of your allegations?

Provide detail including whom you spoke with:

City of Sample utility department was notified by homeowners of Pleasant Acres that water service had been interrupted. Utility crew member investigated and found a representative from Example Excavating at the site. Utility crew member had verbal discussion with Scott Example about incident.

3. BASIC FACTS

Street Address / location of alleged violation:

City: State:

Date of alleged violation: (i.e. 09/03/2012)

Time of alleged violation: (i.e. 7:00) ▾

Describe your allegation:

Do you believe the alleged violation to be intentional? ▾

Why or why not?

4. EXCAVATION / LOCATE INFORMATION: if applicable

Was a locate requested from SD One Call? ▾

If a locate was requested:

Locate ticket #

Start date on ticket: (i.e. 09/03/2012)

Start time on ticket: (i.e. 7:00) ▾

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

▾

If no or not sure, when did excavation begin (date)? (i.e. 09/03/2012)

If no or not sure, when did excavation begin (time)? (i.e. 7:00) ▾

Did the excavator maintain a minimum horizontal clearance of 18 inches between a marked facility and mechanical equipment?

▾

Explain:

No markings were present.

Were buried facilities exposed by hand or non-invasive equipment prior to excavation?

NA

Were facilities marked? No

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

Did the excavator pre-mark with white paint? Yes

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

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

No

Type of facility involved: Water line

Operator of facility (if known): City of Sample

Operator address (Street or PO Box): 123 Any St.

City: Sample **State:** SD **Zip:** 57555

Operator Phone: 605 - 555 - 5555

Depth of Cover: 5' **Pressure:**

Voltage: **# of cable pairs:**

5. DAMAGES: (Please provide pictures)

Was the facility damaged? Yes

If yes, provide detail and an estimate of damage:

Pipe replacement and repairs are estimated at \$5,000.

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):

80 customers of the Pleasant Acres subdivision were without water for a day.

Other information regarding injuries or damages:

6. STATUTORY VIOLATION (if known):

Specific statute(s) or rule(s) you believe were violated:

SDCL 49-7A-8

Other information to support your position:

Excavator did not wait for time on ticket to dig.

