Incident # **Maine Public Utilities Commission** Date of Report:

 **(For Office Use)** **Underground Facility Incident Report**

**Report Submitted By** : [ ]  Excavator; [ ]  Facility Operator; [ ]  Other Party

Date of Incident Time of Incident AM / PM

Date Facility Operator Notified Time Facility Operator Notified AM / PM

Date Made Safe Time Made Safe AM / PM

Dig Safe Notified Yes No Service Fully Restored AM / PM

Dig SafeTicket # GPS Coordinates Long. Lat.

Incident Location / /

 Street Town Tie Descriptions

Type of Facility Telephone Electric Gas CATV Water Sewer Other ( )

Damage To Service Line Distribution Line Transmission Line Other No Damage

Photos Held By Excavator Operator Other Party Excavator Billed for Damage Yes No

Property Ownership Public Right of Way Easement Private

Property Owner/Address / /

 Owner Street Town

Describe Facility(Type, Size, Material, Pressure, etc

Describe the Activity causing damage or safety concern, citing any lack of precaution (if applicable)

Describe Damage (if applicable)

Number of Injuries Number of Fatalities Estimate of Property Damage $

**Excavator Data**

Excavation Company

Address

 Street

 Town Zip

Telephone ( )

Name of Supervisor

Equipment Operator

Equipment Description

**Facility Operator Data**

Facility Operator (Utility)

Address

 Street

 Town Zip

Telephone ( )

Number of Outages

Evacuations

Probable Cause :

[ ] Excavator failed to notify Dig Safe [ ] Operator failed to mark in a timely manner

[ ] Excavator failed to notify Nonmember operator [ ] Operator failed to re-mark in a timely manner

[ ] Excavator failed to premark [ ] Operator’s markings were Incorrect due to:

[ ] Excavator failed to maintain markings locator error incorrect record no record

[ ] Excavator failed to notify of damage to operator

[ ] Excavator failed to observe 18-in. safety zone [ ] Other

[ ] Excavator was reckless and/or negligent

Comments

**I declare that to the best of my knowledge and belief, the information I provided is true, correct, and complete.**

Report Prepared By For

 Print Name Company

Signature Telephone ( )

###### Submit to: Hattie Trask, Safety Programs Coordinator, Maine Public Utilities Commission, 18 State House Station,

 **Augusta, ME 04333 Email** **Hattie.trask@maine.gov** **or fax to (207) 287-1039**

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