**Utility Incident Report**

*Please complete this form when a utility is damaged by filling in the shaded areas. If available, include a couple of pictures (see Page 2). When completing the form electronically, use the Tab key to move to a new cell within a Table, don’t hit the return key. Cells will expand as needed. Use the mouse, or the down/up arrow key, to move to another table; hitting the Tab key will add another row to the table you are working in.*

|  |  |  |  |
| --- | --- | --- | --- |
| **GENERAL INFORMATION** | | | |
| Date & Time of Damage |  | | |
| Location |  | | |
| Name of Utility Damaged |  | | |
| Foreman’s Name |  | | |
| Operator’s Name |  | | |
| Witness |  | | |
| Reason for Damage  (check all that apply) | Line not located properly *(if applicable, attach picture showing location)* | | |
| Insufficient depth | | How deep was line buried? \_\_\_\_\_\_\_ ft.  *(if applicable, attach picture showing depth)* |
| Construction limits too close to line | | |
| Attempted to work around line so relocate would not be required | | |
| Cleaning Ditch with:  Backhoe  Grader | | |
| Installing Culvert:  Entrance  Crossroad | | |
| Other (describe): | | |
| **Location of Utility** | | | |
| Private Property  Public Right-of-Way | | | |
| Buried  Overhead  Ground Level | | | |
| Size of Line (if known) |  | | |
| Depth or Height |  | | |
| **DIG SAFE** | | | |
| Was DIG SAFE called to locate lines? | | Yes  No | |
| If YES, Indicate Confirmation Number | |  | |
| Was line located as marked? | | Yes  No | |

|  |
| --- |
| **Describe Incident**: |
|  |

|  |  |
| --- | --- |
| *Name:*  *Signature:* | *Date:* |

Insert Photo by placing cursor after the X in this box, selecting **Insert Tab** above and then selecting Pictures. You can add a description by highlighting and replacing this text.

X

Insert Photo by placing cursor after the X in this box, selecting **Insert Tab** above and then selecting Pictures. You can add a description by highlighting and replacing this text.

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