

LOUISIANA STATE POLICE

UNDERGROUND UTILITIES COMPLAINT FORM

The purpose of this complaint form is for State Police to review for possible violations only to the UNDERGROUND UTILITY/FACILITY DAMAGE PREVENTION LAW. Underground utility complaints should be reported to the Louisiana State Police Hotline # 225-925-6113 and **COMPLAINT FORM MUST BE COMPLETELY FILLED OUT AND FAXED BACK TO LA. STATE POLICE AT 225-925-4048** Hours 08:00 - 4:30

Provide the following information as completely as possible.

PART A – WHO IS SUBMITTING THIS INFORMATION

Who is providing this information? <input type="checkbox"/> Excavator <input type="checkbox"/> Locator <input type="checkbox"/> Facility owner <input type="checkbox"/> Property Owner <input type="checkbox"/> Other	Name of person providing information: _____ Daytime phone number: _____
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PART B – DATE AND LOCATION OF THE EVENT

Location of the excavation and/or damage (include city and parish): _____	Date the damage or downtime occurred: _____
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PART C – AFFECTED UTILITY/FACILITY INFORMATION

What type of utility/facility operation was affected? <input type="checkbox"/> Telephone <input type="checkbox"/> Water <input type="checkbox"/> Petroleum Pipeline <input type="checkbox"/> Gas <input type="checkbox"/> Sewer <input type="checkbox"/> Cable TV <input type="checkbox"/> Electric <input type="checkbox"/> Other _____ Is the utility owner a member of one-call? <input type="checkbox"/> yes <input type="checkbox"/> no

PART D – EXCAVATION INFORMATION

Type of Excavator: <input type="checkbox"/> Contractor <input type="checkbox"/> Municipality <input type="checkbox"/> Railroad <input type="checkbox"/> Developer <input type="checkbox"/> Parish <input type="checkbox"/> Occupant <input type="checkbox"/> Utility <input type="checkbox"/> State <input type="checkbox"/> Farmer <input type="checkbox"/> Unknown / Other _____

PART E – NOTIFICATION

Did the excavator notify the one-call notification center? <input type="checkbox"/> yes <input type="checkbox"/> no	IF YES, PROVIDE THE ONE-CALL NOTIFICATION TICKET NUMBER: _____
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PART F – LOCATING AND MARKING

Were utility/facility marks visible in the area of excavation? <input type="checkbox"/> yes <input type="checkbox"/> no	Were the utility/facilities marked correctly? <input type="checkbox"/> yes <input type="checkbox"/> no
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PART G – DESCRIPTION OF DAMAGE

Was there damage to a utility/facility? <input type="checkbox"/> yes <input type="checkbox"/> no	If yes, duration of the outage: _____ Approximately how many customers were affected? _____ Number of people injured: _____ Number of fatalities: _____
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PART H – DESCRIPTION OF THE ROOT CAUSE

What was the root cause of the damage, downtime, or near-miss? This information is meant to be a guide and does not cover the law in its entirety. Examples of violations are not all inclusive.	
<input type="checkbox"/> Facility was not located or marked	<input type="checkbox"/> Notification to the one-call center made but not sufficient
<input type="checkbox"/> Digging later than the 10 day expiration	<input type="checkbox"/> Digging outside of the physical area of the requested locate
<input type="checkbox"/> Digging prior to the mark by time	<input type="checkbox"/> Not reporting damage of the underground utilities/facilities
<input type="checkbox"/> No notification made to the one-call center-Not calling before digging	<input type="checkbox"/> Other

PART I - EXCAVATOR INFORMATION

Name of excavator performing work: _____	
Address: _____	City: _____ State: _____ ZIP: _____
Phone: _____	Fax: _____ E-Mail: _____
Was Citation Issued? <input type="checkbox"/> Yes <input type="checkbox"/> No	Citation number _____