Texas Damage Reporting Form (TDRF) - Pipeline Operator  Page Three

Notification of Excavation
Was the One Call Center notified prior to excavation?: ☐ Yes  ☐ No
If yes, provide the following information:
Name of One Call Notification Center: ______________________________
‘Notification Center’ choices are: Texas 811 or Lone Star 811
One Call ticket number: ______________________________
Date of Notification: _______________________________
Did the excavator wait 48-hrs prior to excavating?: ☐ Yes  ☐ No  ☐ Unknown
Did the pipeline operator provide a positive response to the first notification?: ☐ Yes  ☐ No  ☐ Unknown
Date of Positive Response: ______________________________
Time of Positive Response: ______ hr ______ mins  AM/PM
Did the excavator make a second call to the One-Call center?: ☐ Yes  ☐ No  ☐ Unknown
Reason for call: ______________________________
Choices are: No positive response to first call; All clear appears questionable; Positive response is unclear or incorrect; Other
If other, explain: ____________________________________________
Second Notice Ticket Number?: ______________________________
Date of Second Notice: _______________________________
Did the pipeline operator provide a positive response to the second notification?: ☐ Yes  ☐ No  ☐ Unknown
Date of the positive response to second notice: ______________________________
Time of positive response to second notice: ______ hr ______ mins  AM/PM

Locating and Marking: (If the notification center was notified then complete this section)
Were Pipeline Facility marks visible in the area of excavation at time of damage?: ☐ Yes  ☐ No  ☐ Unknown
Were Pipeline Facilities marked accurately?: ☐ Yes  ☐ No  ☐ Unknown/Other
If no, reason why?: ______________________________
Choices are: Pipeline was not marked; Portion of Pipeline was not marked; Pipeline was not marked accurately; Improper type of marking; Other
If other, explain: ____________________________________________
Distance of inaccurate marks from pipeline: _____ feet _____ inches
What was type of locator?: ______________________________
‘Type of Locator’ Choices are: Pipeline Operator; Utility Owner; Contract Locator; Data Not Collected; Unknown/Other
If other, explain: ____________________________________________
If contracted, what was the name of the contracted locator?: ______________________________
Method used to locate: ☐ Conductive ☐ Inductive ☐ Other  ☐ Unknown
If other, explain method: ____________________________________________
Was paint a type of marking used?: ☐ Yes  ☐ No  ☐ Unknown
Were flags a type of marking used?: ☐ Yes  ☐ No  ☐ Unknown
Was there another type of marking used?: ☐ Yes  ☐ No  ☐ Unknown
If yes, describe: ______________________________
Did the excavator mark site by “White Lining?”: ☐ Yes  ☐ No  ☐ Unknown
Were special instructions part of the locate ticket?: ☐ Yes  ☐ No  ☐ Unknown
Were maps used during marking?: ☐ Yes  ☐ No  ☐ Unknown
Did locator meet with excavator at time of marking?: ☐ Yes  ☐ No  ☐ Unknown
Were pipeline company representatives on site at the time of excavation?: ☐ Yes  ☐ No  ☐ Unknown
Did the operator follow their Damage Prevention/Locating Procedure? ☐ Yes  ☐ No  ☐ Unknown
Description of Root Cause
Possible Cause: 

<table>
<thead>
<tr>
<th>‘Possible Cause’ choices are:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No notification made to the One-Call Center</td>
<td>Failure to test-hole (pot-hole)</td>
</tr>
<tr>
<td>Notification to one-call center made, but not sufficient</td>
<td>Improper backfilling practices</td>
</tr>
<tr>
<td>Wrong information provided to One Call Center</td>
<td>Failure to maintain clearance</td>
</tr>
<tr>
<td>Facility could not be found or located</td>
<td>Other insufficient excavation practices</td>
</tr>
<tr>
<td>Facility marking or location not sufficient</td>
<td>One-Call Center error</td>
</tr>
<tr>
<td>Facility was not located or marked</td>
<td>Abandoned facility</td>
</tr>
<tr>
<td>Incorrect facility records/maps</td>
<td>Deteriorated facility</td>
</tr>
<tr>
<td>Failure to maintain marks</td>
<td>Previous damage</td>
</tr>
<tr>
<td>Failure to support exposed facilities</td>
<td>Data Not Collected</td>
</tr>
<tr>
<td>Failure to use hand tools where required</td>
<td>Other</td>
</tr>
</tbody>
</table>

Explanation (only if “Other” is selected for Possible Cause):

Additional Comments *(3950 characters maximum) (optional)*

Part II