

SOUTH DAKOTA ONE CALL REPLY FORM

1. ACTION REQUESTED BY

COMPLAINT DOCKET NUMBER: *

2009081245

2. RESPONDENT INFORMATION

Reply filed on behalf of (company name): *

Rose Electric

Contact Person: *

Michael Rose

Phone *

605 - 770 - 7673

#####

Ext:

Name or Company Name: *

Rose Electric

Street Address or PO Box *

25805 E enemy creek Lp

Street Address

Mitchell

City

57301

Postal / Zip Code

South Dakota

State / Province / Region

United States


Country

Fax

Email *

mbtbrose@gmail.com

Date *

4 / 9 / 2020 
MM DD YYYY

Were you previously aware of these allegations? *

- Yes
- No
- Not Sure

3. STATUTORY VIOLATION (if known):

Do you believe the statutes listed (if any) by the complainant were violated? *

- Yes
- No

Why or why not?

stated before the start time

4. BASIC FACTS

Do you dispute the alleged violation of SD One Call statute or rule occurred? *

- Yes
- No

Do you dispute the complainant's statements regarding the intentional or unintentional nature of the alleged violation? *

- Yes
- No

5. EXCAVATION / LOCATE INFORMATION: if applicable

Was a locate requested from SD One Call? *

- Yes
- No


If yes, please provide the ticket number and a copy of the locate ticket

If a locate was requested, TICKET NUMBER, DATE, AND TIME ARE MANDATORY.

Locate ticket #

2009081345

Start date on ticket:

/
 /
 

MM DD YYYY

Start time on ticket:

:
 ()

HH MM AM/PM

IMPORTANT: IF A LOCATE TICKET IS TO BE CONSIDERED AS EVIDENCE, A COPY OF THE LOCATE TICKET MUST BE ATTACHED WHEN SUBMITTING THIS FORM.

Did excavation begin before the start date / time on the ticket? *

- Yes
 No
 NA

Was a minimum horizontal clearance of 18 inches maintained between a marked facility and mechanical equipment? *

- Yes
 No
 NA

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

- Yes
 No
 NA

Were facilities marked? *

- Yes
 No
 NA

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

- Yes
 No
 NA

Was the excavation site pre-marked with white paint? *

- Yes No NA

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

- Yes No NA

Was there reasonable care to maintain locate marks for the life of project? *

- Yes No NA

Did the complainant correctly describe the type of facility involved? *

- Yes No

Provide detail: *

6. DAMAGES: (Please provide pictures)

Did the complainant correctly describe the damages that resulted from the alleged violation? *

- Yes No

Provide detail: *

no damages

Was the one-call notification center immediately notified of the damage, dislocation, or disturbance? *

- Yes No

If No, why not?

no damages

Was the operator of the facility immediately notified of the damage, dislocation, or disturbance? *

- Yes No

If No, why not?

no damages

Was there an escape of any flammable, toxic, or corrosive gas or liquid? *

- No
 Yes and 911 was called
 Yes and 911 was not called

Did the complainant correctly describe the damages that resulted from the alleged violation? *

- Yes No

If no, provide detail:

no damages

Were damages on public right of way or private property?

- Public Private

Did complainant correctly describe how operator service was affected? *

- Yes No

Provide detail: *

no damages

Was anyone injured as a result of facility damage? *

- Yes No

Were there fatalities? *

- Yes No

Other information regarding injuries or damages:

no damages

7. FUTURE COMPLIANCE:

Describe your plans and procedures to ensure compliance with SD One Call statutes and rules: *

call in locates ASAP, dont' start before state date and time

8. PAST VIOLATIONS:

Has a complaint been filed against you in the past for SD One Call violations? *

- Yes No Yes, I don't recall the date

9. OTHER INFORMATION:

Please provide any additional information to support your position:

the all clear flag were on site except the city of mitchell, just started enough (stayed 13ft from curb stop and any uityts) so i could finish the rest of job after locates were got before snow storm

LOCATE TICKETS, PHOTOS, WITNESS STATEMENTS AND ANY OTHER DOCUMENTATION TO SUPPORT YOUR ARGUMENT MUST BE ATTACHED WHEN SUBMITTING THIS FORM.

Attachment Information

File names should not include symbols. Example:(\$, &, *, %) etc.

Attachment

Select Files

- **Form must be completed in its entirety for successful submission.**
- **You must click Submit for the Reply to be filed**
- **Upon receipt of your filing, a confirmation notice will be sent to you via email.**
- **If you do not receive this notice within one hour, contact the South Dakota One Call Executive Director by email at exedir@sdonecall.com or by calling 605-339-0529.**

Continue