The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC UTILITIES

PIPELINE ENGINEERING AND SAFETY DIVISION

INCIDENT REPORT

390 Fall River Avenue, Seekonk, Massachusetts
June 24, 2012

PIPELINE ENGINEERING AND SAFETY DIVISION

390 Fall River Avenue, Seekonk Massachusetts

June 24, 2012

Bay State Gas Company d/b/a Columbia Gas of Massachusetts

*Estimated Property Damage: $315,000

Injuries: None

Report Issued – March 25, 2014

* Estimated by Columbia Gas of Massachusetts

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I. INTRODUCTION

A. Scope of the Investigation

The Massachusetts Department of Public Utilities ("Department"), Pipeline Engineering and Safety Division ("Division"), pursuant to G.L. c. 164, § 105A and a Federal Certification Agreement as provided for in 49 U.S.C. § 60105, has investigated a natural gas ("gas") release at 390 Fall River Avenue, Seekonk, Massachusetts, on June 24, 2012 ("Incident").[1] The release of gas contributed to a fire and over $315,000 in property damage to the dwelling, as estimated by Columbia Gas of Massachusetts (Exh.1). The operator of the natural gas facilities at the Incident is Columbia Gas of Massachusetts ("CMA" or "Operator"). There were no injuries as a result of the gas release.

As part of the Department's annual certification process by the United States Department of Transportation ("U.S. DOT"), the Department must report to the U.S. DOT each accident or incident . . . involving a fatality, personal injury requiring hospitalization, or

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[1] "Incident" means any of the following events:

(1) An event that involves a release of gas from a pipeline, or of liquefied natural gas, liquefied petroleum gas, refrigerant gas, or gas from an LNG facility, and that results in one or more of the following consequences: (i) A death, or personal injury necessitating in-patient hospitalization; (ii) Estimated property damage of $50,000 or more, including loss to the operator and others, or both, but excluding cost of gas lost; (iii) Unintentional estimated gas loss of three million cubic feet or more;

(2) An event that results in an emergency shutdown of an LNG facility. Activation of an emergency shutdown system for reasons other than an actual emergency does not constitute an incident.

(3) An event that is significant in the judgment of the operator, even though it did not meet the criteria of paragraphs (1) or (2) of this definition.

property damage or loss of more than an amount the Secretary establishes... and any other accident the [Department] considers significant, and a summary of the investigation by the [Department] of the cause and circumstances surrounding the accident or incident.

49 U.S.C. § 60105(c).

The purpose of this report is to inform the U.S. DOT as to the cause and circumstances surrounding the Incident. The Department has established procedures for determining the nature and extent of violations of codes and regulations pertaining to safety of pipeline facilities and the transportation of gas, including but not limited to, 220 C.M.R. §§ 101.00 through 113.00. See 220 C.M.R.§ 69.00 et seq. The Division also enforces the U.S. DOT safety standards for gas pipeline systems as set forth in 49 C.F.R. Part 192 ("Part 192").

G.L. c. 164, § 105A.

B. Overview of Incident

CMA stated that, on June 24, 2012, an 18 wheel tractor with a trailer went off the roadway and struck a restaurant located at 390 Fall River Avenue, Seekonk (Exhs. 2, 5(a), 5(b), and 5(d)). The accident caused a release of gas into the atmosphere which ignited. (Exh. 2). The restaurant suffered extensive fire damage (Exh. 5(a)).

II. THE DIVISION'S INVESTIGATION

A. Description of the Site and Gas facilities

The building at 390 Fall River Avenue is a restaurant named The Old Grist Mill Tavern (Exhs. 2, 5(d)). CMA records indicate that the service line was replaced in 2009 (Exh. 3). The service was a two (2) inch diameter plastic service pipe approximately eight and one half (8½) feet in length (Exh. 3). The service was tied to an eight (8) inch gas main operating at 76 psig that was installed on the short side of the street (Exh. 3). The service riser and meter

were located outside of the building, facing Fall River Avenue (Exh. 3). A wood picket fence on the property and a concrete berm on the street separated the service riser and meter from the street (Exhs. 4, 5(d)). There was also a utility pole in the same area (Exhs. 4, 5(d)).

B. Description of the Incident Scene

On June 24, 2012, at approximately 5:46 a.m., the Seekonk Fire Department was dispatched to 390 Fall River Avenue Seekonk (Exhs. 2). At the site, the police reported a heavy exterior fire, and that a tractor trailer had overturned on its right side, adjacent to the restaurant at 390 Fall River Avenue (Exhs. 5(b), 6).

CMA reported that the trailer truck struck the CMA gas meter and riser after traveling over the concrete berm and through the wood picket fence (Exh. 2). The Company stated that the truck severed the service pipe at ground level, causing the release of gas from the CMA gas service (Exh. 2). The Company also noted that the trailer truck knocked over a utility pole, and dropped live wires to the ground that ignited the escaping gas and set fire to the building (Exh. 2). The Police reported that they observed fuel leaking from the passenger side of the fuel tank (Exh. 6). As a result the building at 390 Fall River Avenue suffered substantial fire damage (Exhs. 3, 4).

C. Columbia Gas of Massachusetts

1. CMA's Action

CMA stated that service technician arrived at 6:21 a.m. (Exh. 2). The technician determined that he could not access the service valve to 390 Fall River Avenue due to the valve's proximity to the fire, and the overturned truck (Exh. 2). At 6:25 a.m., the technician began to locate the gas main valves (Exh. 2). At 6:40 a.m., CMA closed one of the valves, and at 6:50 a.m. CMA closed the second valve (Exh. 2). However, CMA reports that this did

not completely shut off the flow of gas (Exh. 2). CMA identified a third valve and shut it off at 7:58 a.m. (Exh. 2) that shut off the flow of gas. Thirty eight customers lost service due to the closure of the valves (Exh. 2). CMA reported that it completed restoring service to all customers by 6 p.m. (Exh. 2).

D. The Tractor Trailer

The driver of the tractor trailer truck informed the Seekonk police that he was assigned to take the tractor trailer to Chelsea Massachusetts (Exh. 6). The driver stated that he did his pre-trip inspection and did not find any safety issues (Exh. 6). The driver asserted that he was unable to check the load in the trailer because of the security seal that was installed on the trailer doors (Exh. 6).

The driver reported that he was traveling north on Fall River Avenue, and when he reached the curve at The Old Grist Mill Tavern (390 Fall River Avenue), he slowed his vehicle to about 25 mph (Exh. 6). He reported to the police that as he entered the turn and halfway through the turn, that he looked into the driver side mirror and noticed that the tandem wheels on the trailer were off the ground (Exh. 6). The driver alleged to the police that, before he could do anything to correct the issue, the tractor and trailer overturned onto its right side (Exh. 6).

The Seekonk police reported that the Massachusetts State Police issued a citation to the owner of the tractor trailer for failing to prevent cargo shifting (Exh. 6). The citation noted that there were no spacers between the pallets and the wall (Exh. 6).

III. FINDINGS AND CONCLUSIONS

A. Findings

1. The building located at 390 Fall River Avenue, Seekonk was a restaurant.

2. The restaurant had a gas meter and service riser located outside on the Fall River Avenue side of the building.

3. In 2009, the operator replaced the existing gas service to 390 Fall River Avenue with a 2-inch diameter plastic gas service.

4. A wood picket fence and a concrete berm separated the meter and service riser at 390 Fall River Avenue from the vehicular traffic on Fall River Avenue.

5. On June 24, 2013, a tractor trailer overturned adjacent to 390 Fall River Avenue.

6. The Seekonk police observed gasoline leaking from the passenger's side of the fuel tank.

7. The truck severed the gas service pipe to 390 Fall River Avenue, and released gas into the atmosphere.

8. The truck knocked over a utility pole.

9. The ignition source may have been a live wire that fell from the utility pole in the vicinity of the accident.

10. CMA reported that its service technician arrived at 6:21 a.m.

11. The Seekonk Fire Department reported that CMA was on site at 6:56 a.m.

12. CMA shut off two gas main valves at 6:40 a.m. and 6:50 a.m.

13. At 7:58 a.m., CMA closed a third valve and the release of gas was stopped.

14. The Massachusetts State Police cited the owner of the trailer truck for failing to prevent the cargo from shifting.

B. Conclusions

The cause of the release of natural gas was a tractor trailer rolling over on its side and severing the gas service line to 390 Fall River Avenue, Seekonk. The released gas was most likely ignited by the electric wires severed from the utility pole that was struck and damaged by the tractor trailer.

IV. OPERATOR POST-INCIDENT ACTIONS

On June 12, 2013, the Department concluded an enforcement action with the Operator regarding CMA's response to the Incident. Columbia Gas of Massachusetts, D.P.U. 12-PL-07. The Operator agreed to review and amend its Operating and Maintenance and Emergency Response Plans to require that first responders establish immediate contact and conversation between CMA and public safety officials - e.g., incident commanders and/or available emergency responders - when there is any indication of a pipeline rupture, or other emergency condition which may have a potential adverse impact on public safety, or the environment. The Operator also agreed to develop and implement a training program for public safety officials, and for applicable CMA employees - including contract employees - to become familiar with each municipal incident command system in the CMA service territory, and to establish immediate contact with public safety officials upon their arrival on the scene.

EXHIBIT 1

Columbia Gas of Massachusetts Incident Report to the
U.S. Department of Transportation

NOTICE: This report is required by 49 CFR Part 191. Failure to report can result in a civil penalty not to exceed 100,000 for each violation for each day that such violation persists except that the maximum civil penalty shall not exceed $1,000,000 as provided in 49 USC 60122.	OMB NO: 2137-0522 EXPIRATION DATE: 01/31/2014

U.S Department of Transportation Pipeline and Hazardous Materials Safety Administration	Report Date:	12/18/2012
	No.	20120103- 15563
		---------- (DOT Use Only)

INCIDENT REPORT - GAS DISTRIBUTION SYSTEM

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2137-0522. Public reporting for this collection of information is estimated to be approximately 10 hours per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, PHMSA, Office of Pipeline Safety (PHP-30) 1200 New Jersey Avenue, SE, Washington, D.C. 20590.

INSTRUCTIONS

Important: *Please read the separate instructions for completing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the PHMSA Pipeline Safety Community Web Page at http://www.phmsa.dot.gov/pipeline.*

PART A - KEY REPORT INFORMATION

Report Type: *(select all that apply)*	Original:	Supplemental:	Final:
	Yes		
Last Revision Date			
1. Operator's OPS-issued Operator Identification Number (OPID):	1209		
2. Name of Operator	COLUMBIA GAS OF MASSACHUSETTS		
3. Address of Operator:			
3a. Street Address	4 Technology Drive Suite 250		
3b. City	WESTBOROUGH		
3c. State	Massachusetts		
3d. Zip Code	01581		
4. Local time *(24-hr clock)* and date of the Incident:	06/24/2012 06:05		
5. Location of Incident:			
5a. Street Address or location description	390 Fall River Ave		
5b. City	Seekonk		
5c. County or Parish	Bristol		
5d. State:	Massachusetts		
5e. Zip Code:	02771		
5f. Latitude:	41.817075		
Longitude:	-71.335288		
6. National Response Center Report Number:	1016169		
7. Local time *(24-hr clock)* and date of initial telephonic report to the National Response Center:	06/29/2012 12:20		
8. Incident resulted from:	Unintentional release of gas		
9. Gas released:	Natural Gas		
- Other Gas Released Name:			
10. Estimated volume of gas released - Thousand Cubic Feet (MCF):	10.00		
11. Were there fatalities?	No		
- If Yes, specify the number in each category:			
11a. Operator employees			
11b. Contractor employees working for the Operator			
11c. Non-Operator emergency responders			
11d. Workers working on the right-of-way, but NOT associated with this Operator			
11e. General public			
11f. Total fatalities (sum of above)			
12. Were there injuries requiring inpatient hospitalization?	No		
- If Yes, specify the number in each category:			
12a. Operator employees			
12b. Contractor employees working for the Operator			
12c. Non-Operator emergency responders			
12d. Workers working on the right-of-way, but NOT associated with this Operator			
12e. General public			
12f. Total injuries (sum of above)			
13. Was the pipeline/facility shut down due to the incident?	Yes		
- If No, Explain:			

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- If Yes, complete Questions 13a and 13b: *(use local time, 24-hr clock)*	
13a. Local time and date of shutdown:	06/24/2012 07:58
13b. Local time pipeline/facility restarted:	06/24/2012 11:40
- Still shut down? (* Supplemental Report Required)	
14. Did the gas ignite?	Yes
15. Did the gas explode?	No
16. Number of general public evacuated:	0
17. Time sequence *(use local time, 24-hour clock)*:	
17a. Local time operator identified Incident:	06/24/2012 06:05
17b. Local time operator resources arrived on site:	06/24/2012 06:21

PART B - ADDITIONAL LOCATION INFORMATION

1. Was the Incident on Federal land?	No
2. Location of Incident	Public property
3. Area of Incident:	Aboveground
Specify:	Typical aboveground facility piping or appurtenance (e.g. value or regulator station, outdoor meter set)
If Other, Describe:	
Depth of Cover:	
4. Did Incident occur in a crossing?	No
- If Yes, specify type below:	
- If Bridge crossing –	
Cased/ Uncased:	
- If Railroad crossing –	
Cased/ Uncased/ Bored/drilled	
- If Road crossing –	
Cased/ Uncased/ Bored/drilled	
- If Water crossing –	
Cased/ Uncased	
Name of body of water (If commonly known):	
Approx. water depth (ft):	

PART C - ADDITIONAL FACILITY INFORMATION

1. Indicate the type of pipeline system:	Natural Gas Distribution, privately owned
- If Other, specify:	
2. Part of system involved in Incident:	Service
- If Other, specify:	
2a. Year "Part of system involved in Incident" was installed:	
Unknown?	Yes
3. When "Main" or "Service" is selected as the "Part of system involved in Incident" (from PART C, Question 2), provide the following:	
3a. Nominal diameter of pipe (in):	2
3b. Pipe specification (e.g., API 5L, ASTM D2513):	
Unknown?	Yes
3c. Pipe manufacturer:	
Unknown?	Yes
3d. Year of manufacture:	
Unknown?	Yes
4. Material involved in Incident:	Steel
- If Other, specify:	
4a. If Steel, Specify seam type:	
None/Unknown?	Unknown
4b. If Steel, Specify wall thickness *(inches)*:	
Unknown?	Yes
4c. If Plastic, Specify type:	
- If Other, describe:	
4d. If Plastic, Specify Standard Dimension Ratio (SDR):	
Or wall thickness:	
Unknown?	
4e. If Polyethylene (PE) is selected as the type of plastic in Part C, Question 4.c:	
- Specify PE Pipe Material Designation Code (i.e. 2406, 3408, etc.)	
Unknown?	
5. Type of release involved :	Mechanical Puncture
- If Mechanical Puncture - Specify Approx size:	
Approx. size: in. (axial):	2.00
in. (circumferential):	1.00
- If Leak - Select Type:	

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- If Other, Describe:	
- If Rupture - Select Orientation:	
- If Other, Describe:	
Approx. size: (widest opening):	
(length circumferentially or axially):	
- If Other - Describe:	

PART D - ADDITIONAL CONSEQUENCE INFORMATION

1. Class Location of Incident :	Class 4 Location
2. Estimated Property Damage :	
2a. Estimated cost of public and non-Operator private property damage	$ 300,000
2b. Estimated cost of Operator's property damage & repairs	$ 5,000
2c. Estimated cost of Operator's emergency response	$ 10,000
2d. Estimated other costs	$ 0
- Describe:	
2e. Total estimated property damage (sum of above)	$ 315,000
Cost of Gas Released	
2f. Estimated cost of gas released	$ 400
3. Estimated number of customers out of service:	
3a. Commercial entities	1
3b. Industrial entities	0
3c. Residences	20

PART E - ADDITIONAL OPERATING INFORMATION

1. Estimated pressure at the point and time of the Incident (psig):	60.00
2. Normal operating pressure at the point and time of the Incident (psig):	99.00
3. Maximum Allowable Operating Pressure (MAOP) at the point and time of the Incident (psig):	99.00
4. Describe the pressure on the system relating to the Incident:	Pressure did not exceed MAOP
5. Was a Supervisory Control and Data Acquisition (SCADA) based system in place on the pipeline or facility involved in the Incident?	No
- If Yes:	
5a. Was it operating at the time of the Incident?	
5b. Was it fully functional at the time of the Incident?	
5c. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume or pack calculations) assist with the detection of the Incident?	
5d. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume calculations) assist with the confirmation of the Incident?	
6. How was the Incident initially identified for the Operator?	Notification from Emergency Responder
6a. If "Controller", "Local Operating Personnel, including contractors", "Air Patrol", or "Ground Patrol by Operator or its contractor" is selected in Question 6, specify the following:	
- If Other, Specify:	
7. Was an investigation initiated into whether or not the controller(s) or control room issues were the cause of or a contributing factor to the Incident?	No, the facility was not monitored by a controller(s) at the time of the Incident
- If No, the operator did not find that an investigation of the controller(s) actions or control room issues was necessary due to: (*provide an explanation for why the operator did not investigate*)	
- If Yes, Specify investigation result(s) *(select all that apply)*:	
- Investigation reviewed work schedule rotations, continuous hours of service (while working for the Operator), and other factors associated with fatigue	
- Investigation did NOT review work schedule rotations, continuous hours of service (while working for the Operator), and other factors associated with fatigue	
- Provide an explanation for why not:	
- Investigation identified no control room issues	
- Investigation identified no controller issues	
- Investigation identified incorrect controller action or controller error	
- Investigation identified that fatigue may have affected the controller(s) involved or impacted the involved controller(s) response	
- Investigation identified incorrect procedures	
- Investigation identified incorrect control room equipment operation	

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- Investigation identified maintenance activities that affected control room operations, procedures, and/or controller response	
- Investigation identified areas other than those above	
Describe:	

PART F - DRUG & ALCOHOL TESTING INFORMATION

1. As a result of this Incident, were any Operator employees tested under the post-accident drug and alcohol testing requirements of DOT's Drug & Alcohol Testing regulations?	No
- If Yes:	
1a. Specify how many were tested:	
1b. Specify how many failed:	
2. As a result of this Incident, were any Operator contractor employees tested under the post-accident drug and alcohol testing requirements of DOT's Drug & Alcohol Testing regulations?	No
- If Yes:	
2a. Specify how many were tested:	
2b. Specify how many failed:	

PART G - CAUSE INFORMATION

Select only one box from PART G in shaded column on left representing the Apparent Cause of the Incident, and answer the questions on the right. Describe secondary, contributing, or root causes of the Incident in the narrative (PART H).

Apparent Cause:	G4 - Other Outside Force Damage

G1 - Corrosion Failure – only one **sub-cause** can be picked from shaded left-hand column

Corrosion Failure Sub-Cause:	
- If External Corrosion:	
1. Results of visual examination:	
- If Other, Specify:	
2. Type of corrosion:	
- Galvanic	
- Atmospheric	
- Stray Current	
- Microbiological	
- Selective Seam	
- Other	
- If Other, Describe:	
3. The type(s) of corrosion selected in Question 2 is based on the following:	
- Field examination	
- Determined by metallurgical analysis	
- Other	
- If Other, Describe:	
4. Was the failed item buried under the ground?	
- If Yes:	
4a. Was failed item considered to be under cathodic protection at the time of the incident?	
- If Yes, Year protection started:	
4b. Was shielding, tenting, or disbonding of coating evident at the point of the incident?	
4c. Has one or more Cathodic Protection Survey been conducted at the point of the incident?	
If "Yes, CP Annual Survey" – Most recent year conducted:	
If "Yes, Close Interval Survey" – Most recent year conducted:	
If "Yes, Other CP Survey" – Most recent year conducted:	
- If No:	
4d. Was the failed item externally coated or painted?	
5. Was there observable damage to the coating or paint in the vicinity of the corrosion?	
6. Pipeline coating type, if steel pipe is involved:	
- If Other, Describe:	
- If Internal Corrosion:	
7. Results of visual examination:	
- If Other, Describe:	
8. Cause of corrosion *(select all that apply)*:	
- Corrosive Commodity	

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- Water drop-out/Acid	
- Microbiological	
- Erosion	
- Other	
- If Other, Specify:	
9. The cause(s) of corrosion selected in Question 8 is based on the following: *(select all that apply)*:	
- Field examination	
- Determined by metallurgical analysis	
- Other	
- If Other, Describe:	
10. Location of corrosion *(select all that apply)*:	
- Low point in pipe	
- Elbow	
- Drop-out	
- Other	
- If Other, Describe:	
11. Was the gas/fluid treated with corrosion inhibitor or biocides?	
12. Were any liquids found in the distribution system where the Incident occurred?	
Complete the following if any Corrosion Failure sub-cause is selected AND the "Part of system involved in incident" (from PART C, Question 2) is Main, Service, or Service Riser.	
13. Date of the most recent Leak Survey conducted	
14. Has one or more pressure test been conducted since original construction at the point of the Incident?	
- If Yes:	
Most recent year tested:	
Test pressure:	
G2 – Natural Force Damage – only one **sub-cause** can be picked from shaded left-handed column	
Natural Force Damage – Sub-Cause:	
- If Earth Movement, NOT due to Heavy Rains/Floods:	
1. Specify:	
- If Other, Specify:	
- If Heavy Rains/Floods:	
2. Specify:	
- If Other, Specify:	
- If Lightning:	
3. Specify:	
- If Temperature:	
4. Specify:	
- If Other, Specify:	
- If High Winds:	
- Other Natural Force Damage:	
5. Describe:	
Complete the following if any Natural Force Damage sub-cause is selected.	
6. Were the natural forces causing the Incident generated in conjunction with an extreme weather event?	
6.a If Yes, specify *(select all that apply)*:	
- Hurricane	
- Tropical Storm	
- Tornado	
- Other	
- If Other, Specify:	
G3 – Excavation Damage – only one **sub-cause** can be picked from shaded left-hand column	
Excavation Damage – Sub-Cause:	
- If Excavation Damage by Operator (First Party):	
- If Excavation Damage by Operator's Contractor (Second Party):	
- If Excavation Damage by Third Party:	
- If Previous Damage due to Excavation Activity:	

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Complete the following ONLY IF the "Part of system involved in Incident" (from Part C, Question 2) is Main, Service, or Service Riser.	
1. Date of the most recent Leak Survey conducted	
2. Has one or more pressure test been conducted since original construction at the point of the Incident?	
- If Yes:	
Most recent year tested:	
Test pressure:	
Complete the following if Excavation Damage by Third Party is selected.	
3. Did the operator get prior notification of the excavation activity?	
3a. If Yes, Notification received from: *(select all that apply)*:	
- One-Call System	
- Excavator	
- Contractor	
- Landowner	
Complete the following mandatory CGA-DIRT Program questions if any Excavation Damage sub-cause is selected.	
4. Do you want PHMSA to upload the following information to CGA-DIRT (www.cga-dirt.com)?	
5. Right-of-Way where event occurred *(select all that apply)*:	
- Public	
- If Public, Specify:	
- Private	
- If Private, Specify:	
- Pipeline Property/Easement	
- Power/Transmission Line	
- Railroad	
- Dedicated Public Utility Easement	
- Federal Land	
- Data not collected	
- Unknown/Other	
6. Type of excavator :	
7. Type of excavation equipment :	
8. Type of work performed :	
9. Was the One-Call Center notified?	
9a. If Yes, specify ticket number:	
9b. If this is a State where more than a single One-Call Center exists, list the name of the One-Call Center notified:	
10. Type of Locator:	
11. Were facility locate marks visible in the area of excavation?	
12. Were facilities marked correctly?	
13. Did the damage cause an interruption in service?	
13a. If Yes, specify duration of the interruption:	
14. Description of the CGA-DIRT Root Cause *(select only the one predominant first level CGA-DIRT Root Cause and then, where available as a choice, the one predominant second level CGA-DIRT Root Cause as well)*:	
- Root Cause Description:	
- If One-Call Notification Practices Not Sufficient, specify:	
- If Locating Practices Not Sufficient, specify:	
- If Excavation Practices Not Sufficient, specify:	
- If Other/None of the Above (explain), specify:	
G4 - Other Outside Force Damage - only one **sub-cause** can be selected from the shaded left-hand column	
Other Outside Force Damage – Sub-Cause:	Damage by Car, Truck, or Other Motorized Vehicle/Equipment NOT Engaged in Excavation
- If Nearby Industrial, Man-made, or Other Fire/Explosion as Primary Cause of Incident:	
- If Damage by Car, Truck, or Other Motorized Vehicle/Equipment NOT Engaged in Excavation:	
1. Vehicle/Equipment operated by:	Third Party
- If Damage by Boats, Barges, Drilling Rigs, or Other Maritime Equipment or Vessels Set Adrift or Which Have Otherwise Lost Their Mooring:	
2. Select one or more of the following IF an extreme weather event was a factor:	
- Hurricane	
- Tropical Storm	
- Tornado	
- Heavy Rains/Flood	

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- Other	
- If Other, Specify:	
- If Routine or Normal Fishing or Other Maritime Activity NOT Engaged in Excavation:	
- If Electrical Arcing from Other Equipment or Facility:	
- If Previous Mechanical Damage NOT Related to Excavation:	
Complete the following ONLY IF the "Part of system involved in Incident" (from Part C, Question 2) is Main, Service, or Service Riser.	
3. Date of the most recent Leak Survey conducted:	
4. Has one or more pressure test been conducted since original construction at the point of the Incident?	
- If Yes:	
Most recent year tested:	
Test pressure (psig):	
- If Intentional Damage:	
5. Specify:	
- If Other, Specify:	
- If Other Outside Force Damage:	
6. Describe:	
G5 - Pipe, Weld, or Joint Failure - only one **sub-cause** can be selected from the shaded left-hand column	
Pipe, Weld or Joint Failure – Sub-Cause:	
- If Body of Pipe:	
1. Specify:	
- If Other, Describe:	
- If Butt Weld:	
2. Specify:	
- If Other, Describe:	
- If Fillet Weld:	
3. Specify:	
- If Other, Describe:	
- If Pipe Seam:	
4. Specify:	
- If Other, Describe:	
- If Threaded Metallic Pipe:	
- If Mechanical Fitting:	
5. Specify the mechanical fitting involved:	
- If Other, Describe:	
6. Specify the type of mechanical fitting:	
- If Other, Describe:	
7. Manufacturer:	
8. Year manufactured:	
9. Year Installed:	
10. Other attributes:	
11. Specify the two materials being joined:	
11a. First material being jointed:	
- Steel	
- Cast/Wrought Iron	
- Ductile Iron	
- Copper	
- Plastic	
- Unknown	
- Other	
- If Other, Specify:	
11b. If Plastic, specify:	
- If Other Plastic, specify:	
11c. Second material being joined:	
- Steel	
- Cast/Wrought Iron	
- Ductile Iron	
- Copper	
- Plastic	

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- Unknown	
- Other	
- If Other, Specify:	
11d. If Plastic, specify:	
- If Other Plastic, Specify:	
12. If used on plastic pipe, did the fitting – as designed by the manufacturer – include restraint?	
12a. If Yes, specify:	
- If Compression Fitting:	
13. Fitting type:	
14. Manufacturer:	
15. Year manufactured:	
16. Year installed:	
17. Other attributes:	
18. Specify the two materials being joined:	
18a. First material being joined:	
- Steel	
- Cast/Wrought Iron	
- Ductile Iron	
- Copper	
- Plastic	
- Unknown	
- Other	
- If Other, specify:	
18b. If Plastic, specify:	
- If Other Plastic, specify:	
18c. Second material being joined:	
- Steel	
- Cast/Wrought Iron	
- Ductile Iron	
- Copper	
- Plastic	
- Unknown	
- Other	
If Other, specify:	
18d. If Plastic, specify:	
- Other Plastic, specify:	
- If Fusion Joint:	
19. Specify:	
- If Other, Specify:	
20. Year installed:	
21. Other attributes:	
22. Specify the two materials being joined:	
22a. First material being joined:	
- If Other, Specify:	
22b. Second material being joined:	
- If Other, Specify:	
- If Other Pipe, Weld, or Joint Failure:	
23. Describe:	
Complete the following if any Pipe, Weld, or Joint Failure sub-cause is selected.	
24. Additional Factors (*select all that apply*):	
- Dent	
- Gouge	
- Pipe Bend	
- Arc Burn	
- Crack	
- Lack of Fusion	
- Lamination	
- Buckle	
- Wrinkle	
- Misalignment	
- Burnt Steel	
- Other	
25. Was the Incident a result of:	
- Construction defect	
Specify:	
- Material defect	

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Specify:	
- If Other, Specify:	
- Design defect	
- Previous damage	
26. Has one or more pressure test been conducted since original construction at the point of the Incident?	
- If Yes:	
Most recent year tested:	
Test pressure:	
G6 - Equipment Failure - only one **sub-cause** can be selected from the shaded left-hand column	
Equipment Failure – Sub-Cause:	
- If Malfunction of Control/Relief Equipment:	
1. Specify:	
- Control Valve	
- Instrumentation	
- SCADA	
- Communications	
- Block Valve	
- Check Valve	
- Relief Valve	
- Power Failure	
- Stopple/Control Fitting	
- Pressure Regulator	
- Other	
- If Other, Specify:	
- If Threaded Connection Failure:	
2. Specify:	
- If Other, Specify:	
- If Non-threaded Connection Failure:	
3. Specify:	
- If Other, Specify:	
- If Valve:	
4. Specify:	
- If Other, Specify:	
4a. Valve type:	
4b. Manufactured by:	
4c. Year manufactured:	
- If Other Equipment Failure:	
5. Describe:	
G7 - Incorrect Operation - only one **sub-cause** can be selected from the shaded left-hand column	
Incorrect Operation Sub-Cause:	
- If Damage by Operator or Operator's Contractor NOT Related to Excavation and NOT due to Motorized Vehicle/Equipment Damage:	
- If Valve Left or Placed in Wrong Position, but NOT Resulting in an Overpressure:	
- If Pipeline or Equipment Overpressured:	
- If Equipment Not Installed Properly:	
- If Wrong Equipment Specified or Installed:	
- If "Other Incorrect Operation:	
1. Describe:	
Complete the following if any Incorrect Operation sub-cause is selected.	
2. Was this Incident related to: (select all that apply)	
- Inadequate procedure	
- No procedure established	
- Failure to follow procedure	
- Other	
- If Other, Describe:	
3. What category type was the activity that caused the Incident:	
4. Was the task(s) that led to the Incident identified as a covered task in your	

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Operator Qualification Program?	
4a. If Yes, were the individuals performing the task(s) qualified for the task(s)?	

G8 - Other Incident Cause - only one **sub-cause** can be selected from the shaded left-hand column

Other Incident Cause – Sub-Cause:	
- If Miscellaneous:	
1. Describe:	
- If Unknown:	
2. Specify:	

PART H - NARRATIVE DESCRIPTION OF THE INCIDENT

Tractor trailer roll-over at 06:00 on Sunday June 24, 2012, striking above ground meter causing release and ignition of natural gas and fire damage to the restaurant located at 390 fall River Ave, Seekonk. Service valve was unable to be accessed due to fire, vehicle and emergecy vehicles. isolation of gas facilities was achieved via alterante valves in distribution system.

File Full Name Note: The users have to sign in to view the attachment if there is no current user session.

PART I - PREPARER AND AUTHORIZED SIGNATURE

Preparer's Name	Brian Normoyle
Preparer's Title	Operations compliance manager
Preparer's Telephone Number	508-836-7031
Preparer's E-mail Address	bnormoyle@nisource.com
Preparer's Facsimile Number	508-836-7070
Authorized Signature	
Authorize Signature's Name	Brian Normoyle
Authorized Signature's Title	Operations compliance manager
Authorized Signature Telephone Number	508-836-7031
Authorized Signature's Email Address	bnormoyle@nisource.com
Date	06/29/2012

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EXHIBIT 2

Columbia Gas Massachusetts Incident Analysis and Sequence of Events

Incident Review

Location of Incident: **Fall River Avenue, Seekonk**
Date of Incident: **6/24/2012** Date of Review: 7/16/2012
Time of Incident: **05:49 am** Number of Customers Involved: **38**
Did this incident merit review according to 49 CFR 192 Subpart L? **NO**
Did this incident merit review according to circumstance or performance related issues? **YES**
Name of Operations Center Manager: Troy Page Name of Facilitator: Brian Normoyle
Was Preliminary Report, 1540C Completed? **NO**

Description of Incident – What actually happened?

18 wheel tractor w/ trailer went off roadway and struck restaurant located at 390 Fall River Ave, Seekonk. Truck struck meter set after traveling through fence and concrete berm severing piping at ground level causing release of gas (system at 76 psi . Truck skidded on side knocking over a telephone pole, dropping live wires to the ground igniting natural gas and setting fire to the building.

CMA received call from unidentified caller (assumed to be police or fire) at 05:49am of vehicle accident and gas fueled fire at the Grist Mill restaurant in Seekonk.

Scope of Review: **Determine areas of improvement. Identify shortcomings as well as positive actions taken by CMA personnel.**

Name of Employees Attending Review:

Brian Normoyle	**Jim Murphy**	**Troy Page**	**Frank Davis**	**Chavonne Baldwin**
Dan Levesque	**Carl Aiello**	**Kevin Steele**	**Dave Mueller**	

What could have been done to improve Incident Preparation? N/A

What actions were taken?

- **Responded to Incident per CMA standards. First responder arriving 32 minutes after IC notification.**
- **First responder contacted IC to request Distribution crew and supervisor notification then made determination that he could not access curb valve due to proximity to fire and vehicles. Used ScanTrax to view system and determine alternate valves to operate to make situation safe.**
- **06:40am first valve closed at 195 fall River Ave, 06:50am second valve closed at intersection of Fall River, Arcade, and Mill Rd. Gas pressure reduced but still being fed. 3rd valve located on Milton St accessed and closed at 07:58am, isolating gas source completely.**
- **Fire extinguished, CMA was eventually allowed to excavate and cut off service before restoring gas to blown down portion of system.**
- **Gas restored and relights of 38 customers completed by 6:00pm.**

What was done well?

- **Response time**
- **ARCOS (Automated Recorded Call Out System) worked well. 120 calls made in 21 minutes.**
- **Use of ScanTrax to identify area valves to isolate.**
- **Shut down / isolation minimizing outage.**
- **Re gassing system and Relights.**

What improvements could be implemented?

- **Instruct / Train first responders to check in with Incident commander (or an available emergency responder) to make them aware of their arrival and collaborate on making situation safe from a gas supply standpoint.**
- **Integration Center to work on keeping communication to field employees , fact based, brief exchanges. Reduce speculation and opinion.**

What ideas were generated?

- **Additional Fire department training and CMA training to get familiar with the Incident Command System.**
- **Integration Center communication training when handling fire emergencies.**

Lessons learned:

- **First responder did not check in with Fire official upon arrival and make them aware of service valve location. We may have missed an opportunity to get FD to assist in access to service valve that was in close proximity to fire / incident instead of assuming it was inaccessible.**
- **ScanTrax is a good tool to identify system maps however, can only have one map up at a time. This area spanned a few different map numbers.**

June 24, 2012 – Fire at Old Grist Mill Tavern, Seekonk

Columbia Gas Timeline

Time	Activity
5:49 a.m.	Initial call to Columbia Gas Logistics Center from unidentified caller (assume fire/police department – sounded like recorded line)
5:51 a.m.	Logistics Coordinator contacts technician in Taunton via telephone for availability
5:57 a.m.	Tech begins drive to Seekonk (tracked by GPS via Field Force Manager)
6:01-6:03 a.m.	Logistics Coordinator attempts 4 calls to Seekonk Fire Dept. to verify call and obtain additional information, but is unsuccessful negotiating menu options
6:04 a.m.	Logistics Coordinator reaches Seekonk Fire Dept. -- hold for 3 minutes and then call disconnected
6:09 a.m.	Logistics Coordinator reaches Seekonk Fire Dept., and verifies situation
6:21 a.m.	Tech arrives at 379 Fall River Avenue, Seekonk (tracked by GPS via Field Force Manager).
6:21 a.m.	Seeing the fire, the Technician realizes the situation immediately and notifies Logistics Coordinator of need for street crew
6:22 a.m.	Logistics Coordinator notifies on-call supervisor of situation
6:23 a.m.	Tech updates supervisor via telephone
6:25 a.m.	Using Scantrax, Tech locates valve in front of Grist Mill Tavern and sees that it is some 6 feet from structure. He is close enough (75-100 yards) to the burning building to see that he would be unable to access the valve. Using Scantrax, Tech identifies two other valves that should shut down the gas flow to the Tavern. Tech notifies supervisor (who is travelling to the scene) of the two valve plan and receives approval to proceed. Tech speaks with police officer and asks him to radio ahead to fire/police at the site of 2nd valve location to inform them he is on his way.
6:27 a.m.	Logistics Coordinator notifies street crew (on site at 7:24 a.m. & 7:51 a.m.)
6:29 a.m.	Tech notifies Logistics Coordinator that curb valve was located but inaccessible.
6:40 a.m.	First valve shut off – tech then travels approx. 2 miles for 2nd valve
6:50 a.m.	Second valve shut off – gas flow drops significantly – flame reduced from approx. 35' to 20' -- but not completely
7:10 a.m.	Logistics Coordinator notifies street crew of best route to avoid blocked streets
7:38 a.m.	Logistics Coordinator uses ARCOS (Automated Recorded Call Out System) to reach 7 additional technicians to assist. ARCOS called 120 phone numbers in 21 minutes.
7:40 a.m.	Supervisor on site – crew assessed situation and reviewed Scantrax records -- a 3rd line was identified and valve located. Supervisor went looking for Fire Chief to inform him of the situation.
7:58 a.m.	Third and final valve shut off
8:24 a.m.	Additional techs reporting on site – 6 by 9:13 a.m. and last one at 9:52 a.m. (confirmed by Field Force Manager)
3:30 p.m.	Light ups of 38 customers begins
6:00 p.m.	Light ups completed

FORM C

BAY STATE GAS CO.

PUBLIC ACCIDENT REPORT

Date of Report 6-24-12

Street and Number 408 Fall River Av. City/Town SK
Name Mill Restaurante Telephone Number

Received By Date and Time 11 4 AM/PM
Dispatched To 420930 Date and Time 11 4 600 AM/PM
Time of Arrival 11 4 620 AM/PM Time of Departure 11 4 1330 AM/PM

Nature of Accident Truck Run over meter fit, Electric caused Fire, Riser Broke at Ground Level

Persons Injured:

Name NONE Address

Apparent Age Occupation Employed By

Nature and Extent of Injury

Taken Home or to Hospital Name of Attending Doctor

Property Damage:

Nature and Extent Fire Burned Front of Propert

Name of Owner Address 408 Fall River av.

	Meter		Street			Meter		Street	
Found Gas:	On (✓)	Off ( )	On (✓)	Off ( )	Left Gas:	On ( )	Off ( )	On ( )	Off (✓)

Meter Fit: Inside ( ) Outside ( ) None ( )
H. P. (✓) L. P. ( )

Other Company Personnel at the Location:

Name Time of Arrival AM/PM
AM/PM

Public Officials at the Location:

Name Seekonk FD Title Chief Time of Arrival 6-24-12 AM/PM
AM/PM

Field Report: (Describe in detail conditions found and corrections made. If gas appliances are involved give make, model and type.) 195 Fall River gate Valve shut off at 6:40 Am, mill and Arcade gate off at 6:50Am. Milton street off at 7:58, Fire on gas Riser 8:9m at 6:25; Had Police on Three Radio, Relay message To Locate Valves at mill and arcade FD Recived message and was done, When arrived To intersection of mill and Arcade, Seekonk Police was at gate Valve

employee signature supervisor department manager

*Use reverse side for additional information

EXHIBIT 3

Columbia Gas of Massachusetts Record of the Gas Main on Fall River Avenue and the Gas Service to 390 Fall River Avenue, Seekonk

CMS #321947 Distribution Work Order

B09B6011
Project I.D.

Identification:

At House	To House	Street Name	Location Phone	Work Order #
390	0	FALL RIVER AVE		7124239-1

Bldg. #	Unit #	Apt. #	Suite #	Town	Work Phone	Initiated Date
				SEEKONK		03/03/2009

At Lot	To Lot	At Pole	To Pole	At Intersection	Customer Account #	Initiated Time
				PRO SCAN		16:53

Kit and Grid #	To Intersection	CCS Number	Source
	JAN 14 2010	0-0-0	EMPLOYEE

Customer Name	Entered By	Digging Conditions	Source Name
GRIST MILL	COMPLETED		JOSEPH JOHN F

Work:

Work Code	Work Description	Estimated Units	Scheduled Date
TIEPEC	TIEOVER - PERFORMANCE	1	

Leak Priority	Employee Assigned
	0000

Outgoing Comments:
TIE OVER SERVICE. CMS#321947

COMPLETED
HME

9/3/14

Cause of Leak	BSG Crew Assigned

Dig Safe #	Contr. Crew Assigned
	DEVCO

Job Priority	
	Mark Long

Pipe Data:

	New Pipe		Exposed Pipe	Retired Pipe	Internal Insp.
Pipe Size		2"	8"	2"	2"
Pipe Type		PE	PE	PE	PE
Coat Type		BARE	BARE	BARE	BARE
Pressure		INT.	INT.	INT.	INT.
Length		8½		34'	
Cut		(S) M L		S M (L)	
Depth		37"	½"	37"	37"
Year			2009	1996	1996
Pipe Cond.		(LN) F P VP	(LN) F P VP	(LN) F P VP	(LN) F P VP
Coat Cond.		(G) MD ED	G MD ED	G MD ED	
Pit Depth					
# of Fits		ROOTS			
Fit Size					
Rate Class					

Other Data:

	Yes	No
Anode Inst.		✓
Flow Limiter Installed		✓
Flow Limiter Tagged		✓
Curb Cock Installed	✓	
Meter Barrier Installed		✓
Meter Fit Installed		✓
Inside Location: F B R L		✓
Outside Location: F (B) R L		
Soap Test	✓	
Pressure Test	✓	

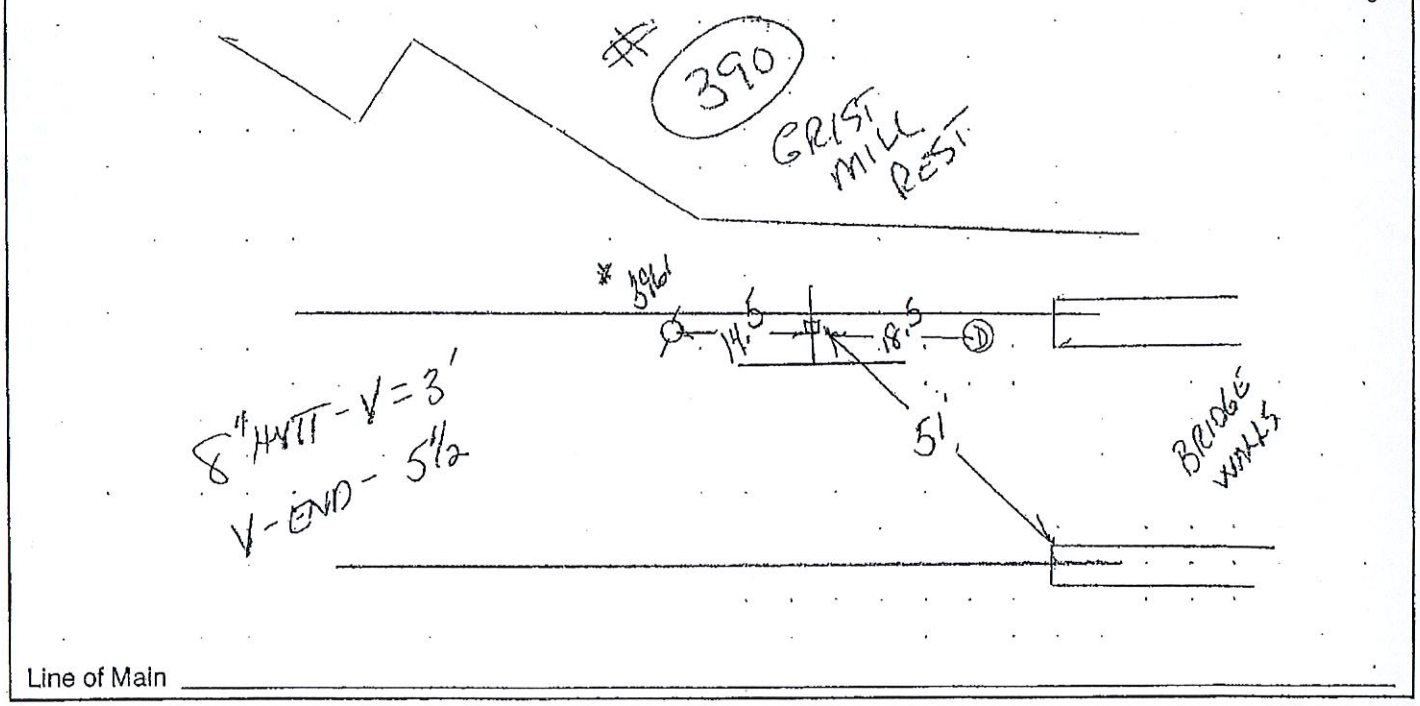
Pounds/ Square Inch	109
Elpsd. PSI Time	25 M

Patch Size Length	
Width	

Restoration Needed ☐ Yes ☑ No Restoration Done ☑ Yes ☐ No Welder ☐ Company ☐ Contractor ☐

Enter Other Completion Information And Restoration Information on Back

Sketch:



Line of Main _____

Restoration Data:

	Required	Done	Date Done
Sand			
Gravel			
Base Coat			
Cold Patch			
Hot Patch			
Flow Fill			
Infra-Red			
Concrete			
Loam & Seed			
Other			
Size			
Signature			

Permit Data:

Dig Safe: Ticket # Date Effective

Notification: _____ _____

_____ _____

Permit Required:

		Date Sent	Date Rec'd	Permit #
Town	☐			
State	☐			

Water Notification: ☐ Date Called_____

Sewer Notification: ☐ Date Called_____

Stamps:

PRO SCAN
NOV - - 2009
COMPLETED

Completion Data:

Comments: TIED OVER TO THE NEW 8" HWTT
1-8"x8" HWTT AND 1-8"x6" PVC GATE
ALL LINE DEMOLITION WORK MUST BE INSPECTED

Start Date: 8/2009

Completed Date: 8/2009

Completed Units: 1

Signature: [signature]

Employee #: 0460

EXHIBIT 4

Seekonk Fire Department Report

Incident #: 12-1200-IN Exp. 0

NARRATIVE FOR LIEUTENANT PETER J BURKE

Ref: 12-1200-IN

Entered: 06/24/2012 @ 1524 Entry ID: 953
Modified: 06/24/2012 @ 1524 Modified ID: 953

0548 E3 L1 R4 dispatched to above location for a report of a structure fire. On arrival companies had a semi trailer/tractor that had rolled one its passenger side into the buidling striking a natural gas line and electrical service. Heavy exterior fire from natural gas line. Career and Call firefighters recalled. E2 responded.

E3 assumed command, E3 established water supply from hydrant, R4 stretched and operated portable monitor on the exterior fire. E3 A established command and requested 2 engines and 1 ladder 1 rescue to the north (Taunton Ave.) side and 2 additional engines to the Arcade Ave. side. Fire Department Connection blocked by truck and fire condition. National Grid and Columbia Gas notified.

L1 E3 stretched 2 1/2 and 1 3/4 handlines to the parking lot side entrance.

East Providence Batt. 1 E1 L3 arrived side, Seekonk E2 laid supply line to EP E1. EP companies stretched 2 1/2 and 1 3/4 handlines to the Fall River Ave. side entrance. Pawtucket E6 assigned RIT. Seekonk E1 arrived on Arcade Ave. Side and assisted in operating hand lines.

C2 arrived and assumed command. Companies operated lines in interior of building. Barrington E1 assigned to additional forcible entry and ventilation.

0641 Roof failure on Fall River Ave. side, building vacuated.

Rehoboth E3, Swansea Heavy Rescue requested to scene. Rehoboth E3 supplied Seekonk L1. EP L3 put into operation.

Mass DEP requested to scene.

0740 Seekonk C5 responded with absorbent booms and pads, companies contained fuel and oil coming from overturned truck.

0801 gas terminated to building, exterior fire extinguished. Companies reentered building to complete extinguishment.

Building evacuated due to further roof collapse.

DFS rehab and incident support unit on scene. Companies remained in defensive mode while rotating crews.

1003 Warren Tower Ladder requested to scene. 1019 Warren arrived and replaced Seekonk L1. Water department, Building Commissioner, and Health Agent to scene.

Car 1 on scene.

Big Wheels recovery removed truck and trailer. Environmental clean up completed.

1111 EP E1 cleared scene and covered Station 3.

1224 All mutual Aid E2 E4 cleared from scene.

1220 EP E1 cleared from Station 3.

1429 C1 C2 E3 R4 L1 cleared

Old Grist Mill Fire 6/2412

0546: Initial Dispatch
0548: Recall full time firefighters
0549: E-3 Ladder 1 and Rescue 4 responding
0550: Eng 3 reports MVA vehicle into the building
0551: Eng 3 on scene reports a truck on its side, fuel fed fire, Code Red.
0553: Police request EMS for the truck driver
0554: Command established
0556: Eng 2 responding
0559: Mutual Aid responding; EP Eng, Ladder and rescue
Pawt & Barrington 1 – engine each
0603: East Prov Engine, Engine 2 & Engine 4 on the scene
0607: Car 2 on the scene
0610: Barrington Engine on the scene
0609: Water supply established
0613: Car 2 request on Gas Co eta, fire alarm states momentarily and the service crew is responding out of Taunton.
0617: Rehoboth Car 4 responding
0624: Rehobth Eng 3 out at our HQ
0641: Command ordered All personnel to evacuate the building
0656: Gas Co on scene
0718: Command requesting ma DEP, fuel tank on truck has let go
0724: Pawt Eng clear, returning to Pawt
0730: Pawt Rescue on the scene
0735: Swansea Air supply on scene
0739: Town Administrator and the Water Dept notified.
0801: Gas terminated to the bulding
0837: State Fire Marshall on scene
1001: Demolition unit on scene
1002: Request for Warren FD Tower ladder

Google earth

feet 10
meters 3

EXHIBIT 5

Photographs

5(a) - Damage to 390 Fall River Avenue, Seekonk

5(b) - Overturned tractor trailer truck at 390 Fall River Avenue, Seekonk

5(c) - Concrete berm in front of damaged gas facility at 390 Fall River Avenue, Seekonk

5(d) - 390 Fall River Avenue, Seekonk, before the Incident

Exhibit 5(a) - Damage to 390 Fall River Avenue, Seekonk

Exhibit 5(b) - Overturned tractor trailer truck at 390 Fall River Avenue, Seekonk

Exhibit 5(c) - Concrete berm in front of damaged gas facility
at 390 Fall River Avenue, Seekonk

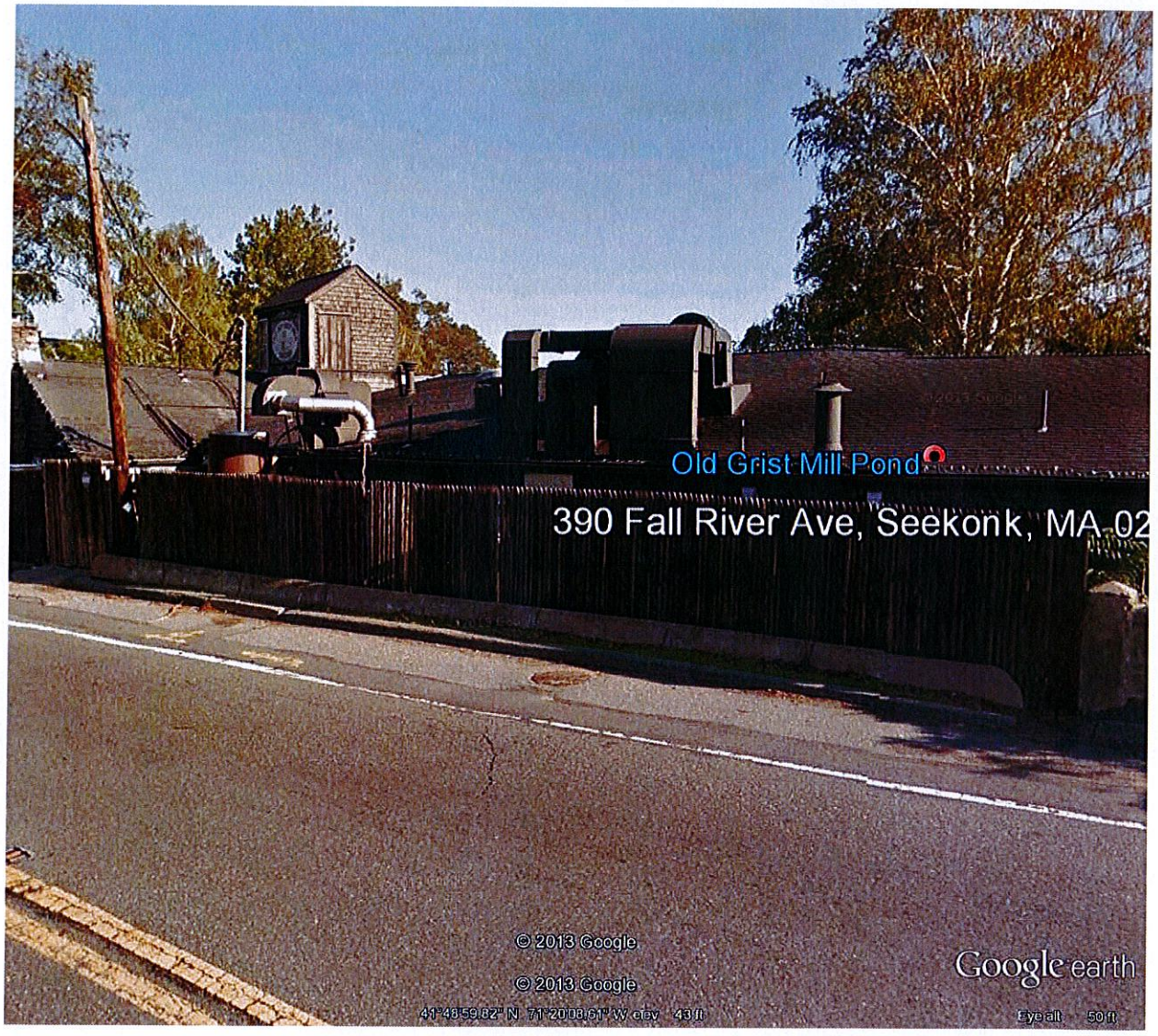


Exhibit 5(d) - 390 Fall River Avenue, Seekonk, before the Incident

EXHIBIT 6

Seekonk Police Department Report

Commonwealth of Massachusetts
Motor Vehicle Crash Police Report

For RMV Use Only

RMV Document Number

Date of Crash	Time of Crash	City/Town	Number Vehicles	Number Injured	Speed Limit	State Police	Local Police	MBTA Police	Other
06/24/2012	0548 24HR	Seekonk	1	1	30	☐	☒	☐	

Lat. ____ Lon. ____

AT INTERSECTION: < LOCATION > NOT AT INTERSECTION:

12 Route# ____ Direction ____ Name of Roadway/Street ____ At ____ Route# ____ Direction ____ Name of Intersecting Roadway/Street

21 Also at Intersection with ____ Route# ____ Direction ____ Name of Intersecting Roadway/Street

9 Route# 390 Direction Address # FALL RIVER AVE Name of Roadway/Street

10 ____ Feet [N S E W] of ____ Mile Marker or ____ Exit Number

____ Feet [N S E W] of Route# ____ Intersecting Roadway/Street

11 ____ Feet [N S E W] of ____ Landmark

3 **Please Select One of the Following:** ☒ Vehicle 1 #Occupants ☐ Hit/Run ☐ Moped

12-315-AC

License # 9910546 St RI DOB/Age 06/14/1982

Sex M Lic. Class 18 A 18 Lic. Restrictions 19 1 CDL Endorsement

41 Operator RUBIO, CHARLES (Last First Middle)

Address 76 PERRIN AVE

City PAWTUCKET State RI Zip 02860

Insurance Company LIBERTY MUTUAL INS

5 Vehicle Travel Direction: [X S E W] Responding to Emergency? 2

Citation # (If Issued) R1946091

61 Viol. 1: Ch/Sec/Sub 540CMR1 / FAILUR Viol. 2: Ch/Sec/Sub ____ / ____

Viol. 3: Ch/Sec/Sub ____ / ____ Viol. 4: Ch/Sec/Sub ____ / ____

Reg # 84666 Reg Type AP Reg State MA

Veh Year 2006 Veh Make FREIGHTLINER Veh Config. 20 10

Owner PRAY TRUCKING (Last First Middle)

112 Address 60 MEAD ST

City SEEKONK State MA Zip 02771

Vehicle Action Prior to Crash 21 1

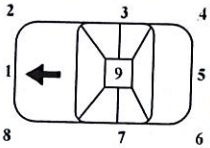
Event Sequence 22 20 22 36 22 35 22 23

Most Harmful Event 23 20

Driver Contributing Code 24 1 24 ____

Underride/Override 25 1 Towed 1

Damaged Area Code: (Circle Up to Three)



0 None
10 Undercarriage
11 Totaled
97 Other
99 Unknown

Please fill out for operator and all occupants involved

Name (Last First Middle) / Address	DOB/Age	Sex	26 Seat Pos.	27 Safety System	28 Airbag Status	29 Airbag Switch	30 Eject Code	31 Trap Code	32 Injury Status	33 Transp. Code	Medical Facility
Operator / See Above	---------	---	---	1	99	3	0	0	3	2	Rhode Island Hospital

13 20

7 1 **Please Select One of the Following:** ☐ Vehicle 2 #Occupants ☐ Non-Motorist A Type 14 Action 15 Location 16 Condition 17 ☐ Hit/Run ☐ Moped

License # ____ St ____ DOB/Age ____

Sex ____ Lic. Class 18 18 Lic. Restrictions 19 CDL Endorsement

81 Operator ____ (Last First Middle)

Address ____

City ____ State ____ Zip ____

Insurance Company ____

Vehicle Travel Direction: [N S E W] Responding to Emergency? ____

Citation # (If Issued) ____

Viol. 1: Ch/Sec/Sub ____ / ____ Viol. 2: Ch/Sec/Sub ____ / ____

Viol. 3: Ch/Sec/Sub ____ / ____ Viol. 4: Ch/Sec/Sub ____ / ____

Reg # ____ Reg Type ____ Reg State ____

Veh Year ____ Veh Make ____ Veh Config. 20

Owner ____ (Last First Middle)

Address ____

City ____ State ____ Zip ____

Vehicle Action Prior to Crash 21

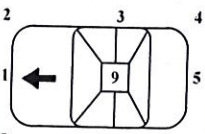
Event Sequence 22 22 22 22

Most Harmful Event 23

Driver Contributing Code 24 24

Underride/Override 25 Towed ____

Damaged Area Code: (Circle Up to Three)



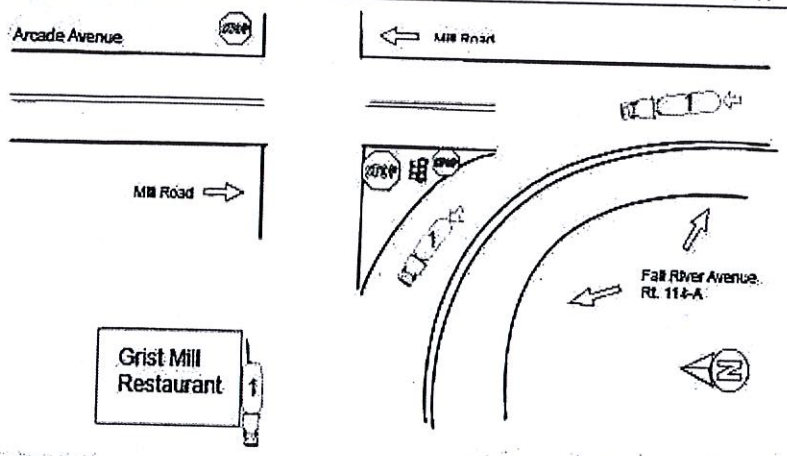
0 None
10 Undercarriage
11 Totaled
97 Other
99 Unknown

Please fill out for operator/non-motorist and all occupants involved

Name (Last First Middle) / Address	DOB/Age	Sex	26 Seat Pos.	27 Safety System	28 Airbag Status	29 Airbag Switch	30 Eject Code	31 Trap Code	32 Injury Status	33 Transp. Code	Medical Facility
Operator/Non-Motorist / See Above	---------	---	---								

= Direction | 1 = Vehicle 1 | 2 = Vehicle 2 | = Pedestrian

Crash Diagram: ie: → 1 → 2 →



If Crash Did Not Occur on a Public Way:

- ☐ Off-Street Parking Lot
- ☐ Garage
- ☐ Mall/Shopping Center
- ☐ Other Private Way

North

Crash Narrative:

See multiple officer supplemental narratives:
Investigating Seekonk Police- Officer Chalifoux
Seekonk Police- Detective Hedrick
Seekonk Police- Sgt. Araujo
Massachusetts State Police Truck Team- Tpr. Palmer
Attachments:
Seekonk Police patrol photos
Seekonk Police Detective photos

Witnesses:

Name (Last,First,Middle)	Address	Phone #	Statement

Property Damage:

Owner (Last,First,Middle)	Address	Phone #	34-Type	Description of Damaged Property
GRIST MILL RESTURANT	390 FALL RIVER AVE SEEKONK MA 0277			RESTURANT

Truck and Bus Information: Registration # 84666 (From Vehicle Section)

Carrier Name Pray Trucking — Carrier Issuing Authority Code 35: 3

Address 60 MEAD ST — City SEEKONK — St MA — Zip 02771

US DOT #: 00255677 — State Number — Issuing State MA — ICC # — Interstate 36: 1

Cargo Body Type Code 37: 97 — Gross Vehicle Weight 38: 3

Trailer Reg #: 1842313 — Reg Type TL — Reg State ME — Reg Year 2007 — Trailer Length 39:

Hazmat Information:

Placard 40: 2 — Material 1 digit # 41: — Material Name — Material 4 digit # — Release code 42:

Patrol Officer ERIC L CHALIFOUX		CHAE	Seekonk Police Department		06/25/2012
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date

Ref: 12-315-AC

Entered: 06/25/2012 @ 1231 Entry ID: BENJ
Modified: 06/26/2012 @ 0950 Modified ID: BENJ

SUPPLEMENT
12-315-AC
Officer J. Benker #2212

SUPPLEMENT:
On Monday 06-25-12 at approximately 1100 hours I placed several miscellaneous items into evidence at the Seekonk Police Department located at 500 Taunton Ave in Seekonk Ma.

The following items have been impounded into evidence:
1. 1 Garmin GPS
2. 1 Blackberry Cell Phone and 1 Motorola Cell phone
3. 1 Bluetooth LG
4. 1 red and black cooler
5. 2 bottles of Poland Springs water
6. black colored belt with gray colored buckle
7. plastic pill vile with no pills but several nuts and bolts
8. 1 bottle of "allergy medicine/1 bottle of "zinc supplement"
9. 1 plastic clipboard with misc. papers and cards
10. 7 plastic seals
11. 2 CD's
12. ye glasses in a case
13. lack colored stocking cap
14. 3 small flash lights (red/gray colored)
15. 2 tubes of moisture creams
16. Dial soap bottle with soap
17. ruler, pens and pencils
18. a long thin folding knife with a white handle
19. Driver's Daily Log Book

At this time all the above mentioned items have been impounded as evidence by myself and Officer S. Kandarian. It should be noted that there was a baggy of strawberries, a green apple and a peach that were found in the red and black cooler but destroyed as they can not be placed into evidence/impound.

Respectfully submitted, Officer J. Benker #2212

NARRATIVE FOR PATROL OFFICER ERIC L CHALIFOUX

Ref: 12-315-AC

Entered: 06/26/2012 @ 0252 Entry ID: CHAE
Modified: 07/01/2012 @ 0040 Modified ID: ARAA

On Sunday June 24, 2012 at approximately 0548 hours, I was dispatched to the Grist Mill Restaurant for a report of a structure fire. I arrived on scene in less than 60 seconds and positioned my cruiser to block northbound traffic on Fall River Avenue and immediately request that another officer stop traffic from coming southbound towards the structure. When first on scene, I observed a large plume of smoke and flames rising high from the structure on the south side along Fall River Avenue. Also, it appeared that a gas line had ruptured and was also ignited and burning. Wires that had been connected to the building by were also down and hanging across the roadway. As I looked up Fall River Avenue, I observed a tractor trailer unit that had been overturned onto its right side. The vehicle was on the north side of the flames and ruptured gas line. I was advised by a bystander that the driver of the truck was still inside the cab.

Sergeant Araujo arrived on scene quickly after I did. He took over immediate operations. I then notified him that it appeared that the fire was caused by a motor vehicle accident and the driver was still inside the vehicle. I then left that side of the fire to get on the north side of it. I traveled Arcade Avenue, west on Taunton Avenue and then south on Fall River Avenue to the location.

Once I arrived on scene, I observed a male sitting with another male in a golf cart. One man was identified as Anthony Grossi (DOB 7/10/1969). He stated that he observed the smoke from where he was working at Fire Fly Golf Course. He stated that he drove over in the cart to see what was going on. He then observed the driver of the vehicle trying to exit the cab but having great difficulty. He stated that the driver appeared "dazed and confused". He stated that he responded down to the truck and assisted in helping the driver exit.

I asked the second male in the golf cart if he was the driver. He stated he was. I asked him if he was hurt and he stated that he was having trouble breathing. I immediately requested a rescue to the scene. I then gave him 15ml of O2 to help him breathe while he awaited rescue.

The driver was identified as Charles Rubio and he stated that he was driving for Pray Trucking Inc. When I asked him what happened he stated the he did not know but he was sure he wasn't exceeding the speed limit. He was transported to RI Hospital by East Providence Rescue.

Massachusetts State Police truck team was requested to the scene by Sergeant Araujo. When they arrived on scene they conducted their own investigation of the vehicle and possible cause of the crash.

Ptlm. Eric L. Chalifoux #1144

NARRATIVE FOR SERGEANT ANTHONY R ARAUJO

Ref: 12-315-AC

Entered: 06/28/2012 @ 0155 Entry ID: ARAA
Modified: 07/01/2012 @ 0038 Modified ID: ARAA

On Sunday June 24, 2012 @ approximately 5:48 AM I responded with Officer Chalifoux, Officer Amaral and Officer Mahoney to a report of a structure fire at the Grist Mill Restaurant 390 Fall River Avenue Seekonk. As I approached the area I advised Seekonk Communications that smoke was clearly visible.

On arrival at the intersection of Arcade Avenue, Mill Road and Fall River Avenue I observed a large fire and thick smoke at the Fall River Avenue side of the restaurant. I further observed down power lines and determined the fire was fed by a natural gas leak. I radioed Communications requesting utilities, stressing the need for the gas company to expedite their response. Officer Chalifoux advised me that from his vantage point he could see a Tractor trailer unit on its side, adjacent to the restaurant, that I could not see from my location, obscured in the smoke and flame. Officer Chalifoux further advised me that a bystander stated the operator was trying to exit the cab of the tractor. Moments later Officer Chalifoux advised me the operator, appearing injured, had made his way to a nearby golf cart and was safely evacuated from the immediate accident scene.

I directed responding officers to close the north side of Fall River Ave. in front of Vinny's Antiques located at 380 Fall River Avenue. I later extended the road closure to Fall River Avenue at Rt. 44 Taunton Avenue. I requested a response by the Massachusetts State Police Truck Team. A short time later, I conferred by cell phone with MSP Tpr. David Palmer #02558, as he was responding to the accident scene. I advised him of the location of the tractor trailer unit and it close proximity to the conflagration caused by the natural gas. I further advised him of the evacuation of the operator and the information I had received that the trailer was loaded with bananas and not any hazardous materials. Tpr. Palmer confirmed he was in route from Sandwich, MA and would be there as quickly as possible. During my conversations with Tpr. Palmer MSP Sergeant Saraiva arrived on scene and assisted with road closures and summoned an additional MSP Trooper to maintain the closed roadway.

I requested two sign boards from Massachusetts Department of Public Works to be stationed at Fall River Avenue & Taunton Avenue and Fall River Avenue & County Street. I further requested Seekonk DPW respond to both locations with detour signage to route the motorists safely around this incident. Both requests were fulfilled in a timely fashion by both agencies.

I directed Officer Beaudoin to secure two additional detail officers prior to 8:00 AM, to manage the detours I had established at Fall River Avenue at Taunton Avenue, Fall River Avenue at County Street and Arcade Avenue at Pleasant Street. I confirmed the Mutual aid response by East Providence Police at the Fall River Avenue & Taunton Avenue location until a Seekonk Police detail officer could arrive.

At 6:37 AM I made an initial call to Chief Charron advising him by voice mail of the current accident and fire. I was interrupted during this voice message but called back completing the update at approximately 6:41AM. Shortly after 7:00 AM MSP Truck team Tpr. Palmer arrived on scene. I reviewed the accident scene process including the leak of one of the fuel tanks on the passenger side of the vehicle, the temporary containment by the fire department and the notification of Mass. DPW and Mass. DEP. of the containment. While waiting with Tpr. Palmer at a safe distance for the fire to be extinguished, we conferred with the vehicle owner and contacted his preferred tow company, to remove the damaged vehicle and cargo of bananas. The towing companies arrived and staged nearby until safe removal of the vehicle was possible.

During this time Chief Charron arrived at my location, Arcade Avenue and Mill Road. I advised him of the status and transport of the operator, the location of the vehicle, the agencies currently on scene and agencies in route. I briefed the Chief concerning the deployment of both Seekonk Police officers and their locations at that time. I also advised him of the Massachusetts State Police response and the locations of the Troopers present. At approximately

11:30 I met on scene with the Seekonk Assistant Building Inspector Watson and Seekonk Health Agent Hallal. Health Agent Hallal declared the cargo of bananas condemned, unfit for human consumption and cleared the scene at approximately 12:32. Assistant Building Inspector Watson remained at the fire/accident scene until I escorted him to his residence at 3:45 PM.

After the cargo was condemned I escorted the intermodal container to Coletta"s Towing 425 Richmond Street Providence, RI 02903. On arrival to this tow facility Towing Manager Alvin Cook supervised the removal of the Chiquita cargo seal #265801. I retained the seal in a plastic zip lock bag to be entered into evidence. Mr Cook supervised the opening of the operator side cargo door. The passenger side cargo was deformed from the accident and was not fully functioning, allowing only limited visibility to the passenger side interior of the container. I photographed the visible load with the patrol camera and was advised the load would be weighed and off-loaded on Monday at the opening of business. I was further advised that the customary process for Coletta's Towing was to photograph the cargo removal process. This would be achieved after cutting off the deformed cargo door on Monday. Mr. Cook stated their report and photos would be available after this process.

I returned to the accident scene at 390 Fall River Avenue and met with Sgt. Ciszkowski and Asst. Inspector Watson. As Columbia Gas Company completed their gas termination to the structure I secured temporary construction barrels from Massachusetts DPW, to be placed at the edge of the road surface, adjacent to the building. Confident there were no other building safety issues I escorted Mr. Watson home. I secured from duty at approximately 3:55 PM.

Thursday June 28, 2010 @8: AM I spoke to MSP Tpr. Palmer by telephone. He advised me of his findings depicted on the *Driver/Vehicle Examination Report.* The violations section VIO code 393.100C **Failure to prevent cargo shifting no spacers between pallets and walls over 1.6' of space**. Tpr. Palmer advised me he would issue a citation for the violation.

On Friday June 29, 2012 @ 11:53 AM I received a FAX copy of Massachusetts Uniform Citation number R1946091 issued by Massachusetts State Police Trooper David Palmer #2558. The citation offenses depict 540 CMR 14.03(b) Fail to prevent cargo from shifting (393.100(c)). Tpr. Palmer forwarded the violator copy to Chiquita Fresh North America LLC 250 East Fifth Street Cincinnati OH 45202.

Respectfully submitted,

Sgt. Anthony R. Araujo

Seekonk Police Officers deployed:
Sgt. Anthony Araujo
Off. Eric Chalifoux
Off. Arthur Beaudoin
Off.Andrew Amaral
Off. David Mahoney
SO. Scott Dumond
SO. Thomas Piquette
SO. Arthur St.Hilair

SUPPLEMENTAL NARRATIVE FOR DETECTIVE THOMAS HEDRICK

Ref: 12-315-AC

Entered: 06/28/2012 @ 1509 Entry ID: HEDT
Modified: 06/28/2012 @ 1820 Modified ID: HEDT

On Sunday, June 24, 2012, at or about 1100 hours, I was contacted by Sergeant Ciszkowski to respond to the Grist Mill Restaurant for a motor vehicle accident and fire to the building.

21. At or about 1200 hours, the driver Charles Rubio was interviewed at the Seekonk Police Department. He was brought into interview room 1 and advised that the room was audio and video recorded. He was given his Miranda warnings verbally by Officer Benker. Charles Rubio waived his rights and signed that he would like to speak with us about the accident. Charles said he arrived at 0500 hours located the trailer he was assigned to take to Chelsea Massachusetts and hooked up. He did his pre-trip inspection; he did not find any safety issues during this inspection. He was unable to check the load because of the security seal that was installed on the trailer doors. This seal can only be removed by the terminal in Chelsea.

22. Charles says that he could have taken route 195 west to route 95 north but elected to travel up Fall River Avenue into East Providence Rhode Island, to Newport Avenue and onto 95 north. This was a route that all 18 wheeled trucks had to take when the bridge was under construction in Pawtucket. Charles had plenty of time to get to his destination and did not seem to have been in a rush.

23. Charles was traveling north on Fall River Avenue and when he reached the curve at the Grist Mill he slowed his vehicle to about 25mph and entered the turn. Halfway through the turn he looked into the driver side mirror and noticed that the tandem wheels on the trailer were off the ground. Before he could do anything to correct the issue, the tractor and trailer were on its right side. He was thankful he was wearing his seatbelt and avoided serious injury. He was asked if he thought he had a mechanical problem that caused the truck to tip and he said no. He was asked again about his speed and he reiterated that he was only traveling at or about 25mph. He could not understand why the vehicle turned onto its side; he has traveled that route many times in the past and has never had a problem.

24. **On Thursday, June 28, 2012**, I went to Pray Trucking and spoke with the owner Ronald Reed. He was advised of the report from the State Police Truck Team. I asked about the GPS unit that was installed on the tractor in question. He said it was from a company called, FleetMatics and his company leases the unit. FleetMatics monitors the GPS and uploads information to a web site that Ronald can log into too review the information. The information, lists date, time, address and speed of the vehicle every 30 to 60 seconds. Ronald was unsure if the GPS unit kept a more in-depth log on the unit itself. I explained that I would call the company and ask for the details on the unit. Ronald gave me printouts off the website in regards to this vehicle on the morning of the 24th.

25. I contacted FleetMatics and spoke with the Sales Manager Jim Beattie. He explained that the unit located in the truck sends a signal to a Satellite every 30-60 seconds and then it's uploaded to the web page for the end user to view. The only information that is recorded is on the web page. No further in-depth information is available from the unit itself located in the vehicle.

26. After reviewing the printout, it was inconclusive as far as speed. The last log entry says that the vehicle was traveling 2mph at the location of the crash, just before the unit and tractor being shut off.

27. At 1500 hours, Charles Rubio came back into the Seekonk Police Station to collect his personal belongings that were seized by this department. Charles gave me permission to look at his call logs and text messages on the phone found in the vehicle that he said was his personal phone, to rule out the fact that he was on the phone at the time of the crash. No evidence that he was using his phone in any way during the time of the crash were discovered and he was given back all property.

Entered: 06/28/2012 @ 1509 Entry ID: HEDT
Modified: 06/28/2012 @ 1820 Modified ID: HEDT

Detective Hedrick