



# One Call Complaint Form

Kansas Pipeline Safety  
December 2019

If available, an investigator may be sent to the scene.

Contact Information: 785.633.6224 or 785.316.337.6244  
Complete form and email to: utilitydamage@kcc.ks.gov

## Action Requested By

Note: If you are filling out on behalf of a company, please make sure you have the proper authority to file the complaint.

Complaint filed by: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

Street Address or P.O. Box: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Action Requested Against

Name of facility operator / excavator: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

Legal Address or P.O. Box: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Is this party aware of your allegations?  Yes  No

## Basic Facts

Address Location of alleged violation: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

\_\_\_\_\_

## Basic Facts (continued)

Date of alleged violation: \_\_\_\_\_ (e.g. 09/03/2010)

Time of alleged violation: \_\_\_\_\_ (e.g. 7:00)  AM  PM

Do you believe the alleged violation to be intentional?  Yes  No

## Excavation / Locate Information: (if applicable)

1. Locate ticket #: \_\_\_\_\_

2. Were facilities marked? \_\_\_\_\_

3. Was the marking complete prior to the start of the ticket?

Yes  No

4. Type of facility involved?

Gas  Electric  Water  Phone  Cable

5. Did the excavator wait until after the start date and time on the ticket before commencing excavation?  Yes  No

6. Were the marked facilities exposed by hand or non-invasive equipment prior to excavation? \_\_\_\_\_

7. When did the excavator begin? \_\_\_\_\_

8. Was the ticket life valid at the time of observation?  Yes  No

9. Was the dig site white lined?  Yes  No

10. Was meet on site documented?  Yes  No

## Damages

Was the facility damaged?  Yes  No

## Additional information or as needed: