



IURC PIPELINE SAFETY ANNUAL REPORT

State Form 54952 (R4 / 4-22)
INDIANA UTILITY REGULATORY COMMISSION

INDIANA UTILITY REGULATORY COMMISSION
PIPELINE SAFETY DIVISION
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**Master meter gas operators may use this form to provide their annual state report as required by 170 IAC 5-3-4(e)(3).
This report is due March 15th of each year.**

The following is our annual report for calendar year: _____

A. (i) Annual Leak Survey: Date (month, day, year): _____

Contractor or employee who performed task: _____

(ii) Annual Cathodic Protection Survey: Date (month, day, year): _____

Contractor or employee who performed task: _____

(iii) Annual Valve Inspection: Date (month, day, year): _____

Contractor or employee who performed task: _____

B. Leak Report for Distribution System:

- (i) Number of unrepaired leaks as of January 1 _____
- (ii) Number of leaks reported during the calendar year _____
- (iii) Number of leaks repaired during the calendar year _____
- (iv) Number of leaks on system as of December 31 _____

C. Current Contact Information:

Property Name

Name of property _____ *Local telephone number (area code)* _____

Operator ID (PHMSA) _____ *Indiana 811 Member ID* _____ *No. of Qualified Employees* _____

Address of property (number and street, city, state, and ZIP Code)

Name of Local Supervisor _____ *Local Supervisor Cellular telephone number (area code)* _____

Local Supervisor E-mail address

Management Company or Officer

Name of officer _____ *Title of officer* _____

Name of Company, Business, or Organization _____ *Telephone number (area code)* _____

Address (number and street, city, state, and ZIP Code)

E-mail address

Signature