



Procedure for Reportable Gas Incidents, Attachment 1

Gas Control - Gas Incident Procedure

INCIDENT DATA

Where is the incident located? [Address, City, County]

Incident Time/Date [Exact or Approximate?]

REASON CONSIDERED REPORTABLE (OR POSSIBLE REPORTABLE)

- Release of Gas? [ ] from Company Facilities [ ] in the Vicinity of Company Facilities [ ] Neither [ ] Unknown
Was there a... [ ] Fire? [ ] Explosion? [ ] Transmission Shutdown?
Deaths? Yes [ ] # Names: No [ ] Injury involving hospitalization? Yes [ ] # Names: No [ ]
Damage expected to exceed \$50,000? Yes [ ] No [ ]\* Estimate Unknown [ ]
Major media coverage? [Bay Area and Sacramento Major TV Stations: KTVU-2, KPIX-5, KGO-7, KNTV-11, KCRA 3, KXTV 10, KOVR 13, KTXL 40 or National TV: FOX News, CNN, ABC, CBS, NBC] Yes [ ] Which Network: Time: No [ ]\*

\*If No, request caller to contact GSO immediately if major media shows up or if cost escalates to \$50,000 or more.

Considered a Significant Event? Yes [ ] No [ ] Why considered significant?

AGENCY ON THE SCENE: [ ] Fire [ ] Police [ ] Ambulance [ ] Traffic Rerouted? [ ] Area Blocked off? [ ] Evacuation? #

INCIDENT CAUSE: Is this a Dig-in? No [ ] Yes [ ] USA Required? [ ] USA Notified? [ ] Properly Marked? [ ] Ticket Expired? [ ]

Excavator Name: Excavator Contact: Excavator Phone #

- Did a vehicle impact our gas facility? Yes [ ] No [ ]
Other (Describe)

GAS EQUIPMENT AFFECTED - [ ] Transmission [ ] Distribution [ ] Service [ ] Service Riser [ ] Valve [ ] Meter [ ] Customer's Facilities
[ ] Plastic [ ] Steel Other:

Pipe Size: (inches) [ ] Unknown Operating Pressure: (psig) [ ] Unknown MAOP:

SUMMARY: (Briefly describe the incident and the probable cause.)

Follow GSO GAS INCIDENT PROCEDURES (COMMUNICATIONS & DOCUMENTS) Contact the GAS On-Call Person. IT IS IMPORTANT THAT ALL OF THE KEY INFORMATION IS OBTAINED AND RELAYED TO THE GAS ON-CALL PERSON! THE ON-CALL PERSON ONLY HAS 1/2 HOUR TO MAKE A DECISION TO CALL THE CPUC.

