

**Incident Information**

Date of Incident: \_\_\_\_\_

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

Subdivision/Other Location Name: \_\_\_\_\_

Street Number: \_\_\_\_\_ Street Name: \_\_\_\_\_

Nearest Intersection: \_\_\_\_\_

Format Type for Latitude and Longitude: \_\_\_\_\_

‘Format Type’ choices are: Decimal, Degrees, NAD 83

Latitude : \_\_\_\_\_ Longitude: \_\_\_\_\_

Time of incident:  hr  mins  AM / PM

Right of way where incident occurred: \_\_\_\_\_

‘ROW’ choices are: Public-City Street; Public-State Hwy; Public-County Road; Public-Interstate Hwy; Public-Other; Private Business; Private-Land Owner; Private-Easement; Pipeline; Power/Transmission Line; Dedicated Public Utility Easement; Federal Land; Railroad; Data not collected; Unknown/Other

**Who is providing this information?**

Type of Entity: \_\_\_\_\_

‘Type of Entity’ choices are: Electric; Engineer/Design; Equipment Manufacturer; Excavator; Gas Pipeline; Insurance; Locator; Liquid Pipeline; One Call Center; Private Water; Public Works; Railroad; Road Builders; State Regulator; Telecommunications; Unknown/Other; Home Owner

Name of person providing this information: \_\_\_\_\_

**Excavator Contact Information**

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Zip5: \_\_\_\_\_ Zip4: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

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