

COMMONWEALTH OF KENTUCKY  
BEFORE THE PUBLIC SERVICE COMMISSION

In the Matter of:

KENTUCKY UTILITIES COMPANY )  
\_\_\_\_\_) )  
ALLEGED VIOLATION OF COMMISSION ) CASE NO. 96-356  
REGULATION 807 KAR 5:041, SECTION 3 )

O R D E R

Kentucky Utilities Company ("KU"), a Kentucky corporation which engages in the distribution of electricity to the public for compensation for light, heat, power, and other uses, is a utility subject to Commission jurisdiction. KRS 278.010(3)(a).

KRS 278.280(2) directs the Commission to prescribe rules and regulations for the performance of services by utilities. Pursuant to this statutory directive, the Commission promulgated Commission Regulation 807 KAR 5:041, Section 3, which requires electric utilities to maintain their plant and facilities in accordance with the standards of the National Electrical Safety Code (1990 edition) ("NESC").

Commission Staff has submitted to the Commission a Utility Accident Investigation Report dated May 6, 1996, appended hereto, which alleges:

1. On March 29, 1996, Jerry M. Hall was fatally injured while working on a 7200 volt distribution line in Bell County, Kentucky.
2. At the time of the incident, Hall was removing a line hoist on a double dead end 7200 volt single phase line. While Hall performed this task, the line hoist became energized. Hall was electrocuted when he came into contact with the energized line hoist while his body was grounded against the primary neutral.

3. At the time of the incident, Hall was a KU employee and acting within the scope of his employment.

4. At the time of the incident, Hall was not insulated from the grounded primary neutral.

5. NESC Section 441A1 prohibits an employee from approaching or taking any conductive object without a suitable insulating handle near exposed parts within certain distances unless: (a) the line or part is deenergized; or (b) the employee is insulated from the energized line or part; or (c) the energized line or part is insulated from the employee; or (d) the employee is insulated from all conducting surfaces other than the one upon which the employee is working.

6. NESC Section 443A1 requires that when an employee is working on energized lines and equipment, he must be insulated from energized parts or he must be isolated or insulated from ground and grounded structures, and potentials other than the one being worked on.

7. While performing maintenance on the pole, Hall failed to comply with NESC Sections 441A1 and 443A1.

8. As a result of these failures, KU is in probable violation of Commission Regulation 807 KAR 5:041, Section 3.

Based on its review of the Utility Accident Investigation Report and being otherwise sufficiently advised, the Commission finds that prima facie evidence exists that KU has failed to comply with Commission Regulation 807 KAR 5:041, Section 3.

The Commission, on its own motion, HEREBY ORDERS that:

1. KU shall appear before the Commission on October 17, 1996 at 10:00 a.m., Eastern Daylight Time in Hearing Room 1 of the Commission's offices at 730 Schenkel Lane, Frankfort, Kentucky, for the purpose of presenting evidence concerning the alleged violations of Commission Regulation 807 KAR 5:041, Section 3, and of showing cause why it should not be subject to the penalties prescribed in KRS 278.990(1) for these alleged violations.

2. KU shall submit to the Commission within 20 days of the date of this Order a written response to the allegations contained in the Utility Accident Investigation Report.

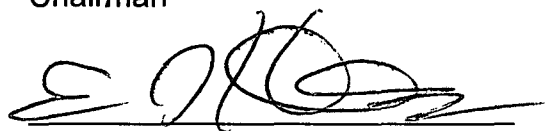
3. The Utility Accident Investigation Report of May 6, 1996, a copy of which is appended hereto, is made part of the record of this proceeding.

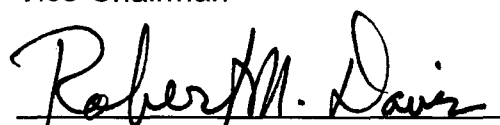
4. Any motion requesting any informal conference with Commission Staff to consider any matter which would aid in the handling or disposition of this proceeding shall be filed with the Commission no later than 20 days from the date of this Order.

Done at Frankfort, Kentucky, this 30th day of July, 1996.

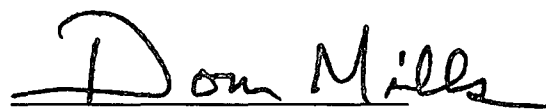
PUBLIC SERVICE COMMISSION

  
Chairman

  
Vice Chairman

  
Commissioner

ATTEST:

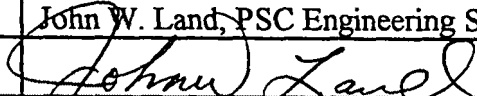
  
Executive Director

May 6, 1996

Page 1

### UTILITY ACCIDENT INVESTIGATION REPORT

<b>Utility:</b>	Kentucky Utilities			
<b>Reported By:</b>	Carl Wise			
<b>Dates &amp; Times</b>				
<b>Accident Occurred:</b>	03/29/96 - Approximately 10:30 am (EST)			
<b>Utility Notified:</b>	03/29/96 - 10:40 am (EST)			
<b>PSC Notified:</b>	03/29/96 - 10:55 am (EST)			
<b>Investigated:</b>	04/02/96			
<b>Written Report Rcvd:</b>	04/02/96			
<b>Location of Accident:</b>	Lee Farm off Hwy 987 in Bell County, Cabbage, Kentucky			
<b>Description of Accident:</b>	Mr. Hall was removing a line hoist on a double dead end 7,200 Volt single phase pole line structure when the accident occurred. It is believed the line hoist became energized in his attempt to remove it and contacted his left chest area while his left leg thigh was grounded against the primary neutral.			
<b>Victims:</b>				
<b>Name:</b>	Jerry M. Hall	<b>Fatal:</b>	Yes	<b>Age:</b> 48
<b>Addr./Empl.:</b>	Route 2, Box 730C, Pineville, Kentucky/Kentucky Utilities			
<b>Injuries:</b>	Received fatal contact with 7,200 Volt line.			
<b>Witnesses:</b>	<b>Name</b>	<b>Address/Employment</b>		
	Gary Byington	Route 7, Box 658, Pineville, KY/KU		
	Arthur Seigler	Route 7, Box 2744, Pineville, KY/KU		
	Leonard W. Hobbs	P. O. Box 464, Middlesboro, KY/KU		
<b>Sources of Information:</b>	<b>Name</b>	<b>Address/Employment</b>		
	Brian Dickey	Pineville, KY/KU		
	Jack Cook	Pineville, KY/KU		
	Billy Allen	Pineville, KY/KU		
	Gary Byington	Pineville, KY/KU		

	Arthur Seigler		Pineville, KY/KU		
	Leonard W. Hobbs		Pineville, KY/KU		
<b>Probable Violations:</b>	807 KAR 5:041, Section 3, 1990 NESC: Rule 443A1, Work on Energized Lines and Equipment, General Rules Rule 441A1, Approach to Energized Conductors or Parts, Clearance from Live Parts - Employee should have been insulated or isolated from the primary neutral.				
<b>Line Clearances At Point of Accident:</b>	<b>Measured</b>	<b>Minimum Allowed by NESC</b>	<b>Applicable NESC Edition<sup>1</sup></b>	<b>Volt.</b>	<b>Constr. Date</b>
<b>Phase to Ground Elevation:</b>	33' - 11"	18' - 6"	1990	7200 V	1979
<b>Primary Neutral to Ground Elevation:</b>	31' - 1"	15' - 6"	1990	N/A	1979
<b>CATV to Ground Elevation:</b>	22' - 10 1/2"	15' - 6"	1990	N/A	1979
<b>Comm. Cable to Ground Elevation:</b>	21' - 9 1/2"	15' - 6'	1990	N/A	1979
<b>Span Length:</b>	367'				
<b>Date of Measurement:</b>	04/02/96				
<b>Approximate Temp.:</b>	50°				
<b>Measurements Made By:</b>	Jack Cook and Billy Allen, Kentucky Utilities Company Employees and John W. Land, PSC Engineering Staff				
<b>Investigated By:</b>	John W. Land, PSC Engineering Staff				
<b>Signed:</b>					

<sup>1</sup> Current edition adopted by the Commission. If clearances are not in compliance with the current edition, then the edition in effect when the facilities were last constructed or modified would apply.

Attachments:

- A. PSC Accident and Trouble Report Form
- B. Kentucky Utilities Company Investigation Report
- C. Photographs

## Attachment A

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### PSC Accident and Trouble Report Form

P. S. C.  
ACCIDENT AND TROUBLE REPORT FORM

TODAY'S DATE 3/29/96 TIME 10:55

COMPANY Kentucky Utilities

PERSON REPORTING INCIDENT: NAME: Carl Wise

TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO: [REDACTED]

ACCIDENT DESCRIPTION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VICTIMS NAMES: Jerry Hall SEX M AGE 47 DEATH \_\_\_\_\_ INJURY   
\_\_\_\_\_ SEX \_\_\_\_\_ AGE \_\_\_\_\_ DEATH \_\_\_\_\_ INJURY \_\_\_\_\_  
\_\_\_\_\_ SEX \_\_\_\_\_ AGE \_\_\_\_\_ DEATH \_\_\_\_\_ INJURY \_\_\_\_\_

LOCATION OF ACCIDENT: Pineville, Ky - KU employee  
found on electric line - presumably dead

TIME OF OCCURRENCE: 10:40 am no more details at this time

TROUBLE DESCRIPTION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TIME OF OCCURRENCE: \_\_\_\_\_

TIME OF RESUMPTION OF NORMAL SERVICE: \_\_\_\_\_

NUMBER OF CUSTOMERS AFFECTED: \_\_\_\_\_

SIGNED Jan Power  
DATE 3/29/96



**Attachment B**

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**Kentucky Utilities Investigation Report**

4/2/96

# REPORT OF INCIDENT - EMPLOYEE

KU 24-11 REV 02/84

Kentucky Utilities Company  
Company

102 West Kentucky Avenue  
Address

Pineville  
City

KY  
State

40977  
Zip

Date of this report 4/1/96

Location at which injured employee is regularly employed Stores/Services Comple - Fourmile

Incident number \_\_\_\_\_

# E

WHO WAS INJURED?

Name Jerry M. Hall Sex M Age 48 Wage 21.50 Per (Hour/Week/Month)  
 Address Rt. 2, Box 730C Pineville KY 40977  
 Street City State Zip  
 Area code and telephone number [REDACTED] Married  Yes  No Date of birth [REDACTED]  
 No. of children under 16 years 1 No. of dependents 5 List names, birthdates, relationship  
Shari(Spouse), Mark 23(Son), Kevin 15(Son), Laura Costner(Great Aunt-In-Law)  
 Occupation Service Supervisor B Years employed by company 23 On present job 15  
 Social security no. [REDACTED] Department District Service Crew Responsibility no. 418

TIME AND PLACE OF INJURY

Date 3/29/96 Hour 10:40 A.M. P.M. Did incident occur on employer's premises?  Yes  No  
 Place of incident Rt. 987 (Lee Farm) Cubbage KY  
 Street City State

WITNESSES TO THE INJURY

Name	Address	Phone
1. <u>Gary Byington</u>	<u>Rt. 7, Box 658, Pineville, Ky 40977</u>	[REDACTED]
2. <u>Arthur Seigler</u>	<u>Rt. 7, Box 2744, Pineville, KY 40977</u>	[REDACTED]
3. <u>Leonard W. Hobbs</u>	<u>P.O. Box 464, Middlesboro, KY 40965</u>	[REDACTED]

NATURE AND EXTENT OF INJURY (Include All Injuries)

Parts of body injured Burn to left ribcage and left mid thigh  
 First Aid  Medical  Modified Duty Days \_\_\_\_\_  Lost Time Days \_\_\_\_\_  
 Date of first treatment by doctor Fatal  
 Emergency room or attending physician Pineville Comm. Hospital Address Riverview Avenue, Pineville, KY  
 Date hospitalized 3/29/96 Name and address of hospital \_\_\_\_\_

INCIDENT

Identify object, substance or machine which directly injured employee Employee came in contact with 7200 volt distribution primary.  
 What was employee doing when injured? (Be specific) Installing a 10 deadend in order to install a 10 recloser.  
 How did incident or exposure occur? (Tell what happened and how it happened) Unknown at this time.  
 Describe events which resulted in injury Contact with 7200 volt primary.

SIGNATURES

Employee's signature \_\_\_\_\_ Date \_\_\_\_\_  
 Supervisor's signature [Signature] Date 4/2/96  
 Report approved by [Signature] Date 4/2/96  
 (Dist. Mgr. or Dept. Head)

COMMONWEALTH OF KENTUCKY

Justice Cabinet

OFFICE OF THE ASSOCIATE CHIEF MEDICAL EXAMINER

University of Kentucky College of Medicine  
 Department of Pathology and Laboratory Medicine  
 Central Laboratory Facility  
 100 Sower Blvd., Suite 202  
 Frankfort, Kentucky 40601-8272  
 (502)564-4545

Date: 3/30/96

To: <sup>XXX</sup>Coroner/Deputy Coroner Bill Bisceglia

Name: Jerry Hall

Bell County

ME-C: 96-03-166

From: John C. Hunsaker JR M.D.

Re: Recommended formulation for Paragraphs 25-30 on Certificate of Death (form V.S. No. 1-A (Rev. 11/91)):

25. TIME OF DEATH <del>XXXXXX</del> <u>12:10 P</u> <u>pronounced</u> M		26. DATE PRONOUNCED DEAD (Month, Day, Year) <u>3/29/96</u>		27. WAS CASE REFERRED TO MEDICAL EXAMINER/CORONER? (Yes or No) <u>YES</u>	
28. Part I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock or heart failure. List only one cause on each line.					Approximate interval between onset and death.
Immediate Cause (Final disease or condition resulting in death) a. <u>Progressive Cardiorespiratory Failure</u> Due to (or as a consequence of): <u>Electrocution (High Voltage)</u>					<u>less than 2 hours.</u>
Sequentially list conditions, if any, heading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST b. _____ Due to (or as a consequence of):					
c. _____ Due to (or as a consequence of):					
d. _____ Due to (or as a consequence of):					
Part II Other significant conditions contributed to death but not resulting in the underlying cause given in Part I.			28a. Was autopsy performed? (Yes or No) <u>YES</u>		28b. Were autopsy findings available prior to completion of cause of death (Yes or No) <u>yes.</u>
29. Manner of death <input type="checkbox"/> Natural <input type="checkbox"/> Pending Investigation <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Could Not Be Determined <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide		30a. Date of Injury (Month, Day, Year) <u>3/29/96</u>	30b. Time of Injury <u>abt. 10:30 AM</u>	30c. Injury at Work? (Yes or No) <u>YES</u>	30d. Describe How Injury Occurred <u>KV Employee - Line Work Contact - 7200V Energized Line</u>
30e. Place of Injury - At home, farm, street, factory, office building, etc. (specify) <u>Utility Pole on Job Site</u>			30f. Location (Street and number or rural route number, city or town) <u>Brownie's Creek, Bell Co., Ky. Highway 987</u>		

The above formulation:

Is unlikely to change regardless of further study and investigation

Will be amended pending further study and investigation

Is incomplete until the following results are known:

Toxicology

Bacteriology

Microscopy

Chemistry

Circumstances of Death

Other \_\_\_\_\_



Kentucky  
Utilities  
Company

April 10, 1996

Mr. John Land  
Public Service Commission  
P.O. Box 615  
Frankfort, KY 40602

RECEIVED

APR 11 1996

DIVISION OF UTILITY  
ENGINEERING & SERVICES

Dear John:

**SUBJECT: JERRY HALL**  
**DATE OF LOSS: 3/29/96**

Enclosed is the information you requested. If we can be of further help, please let us know.

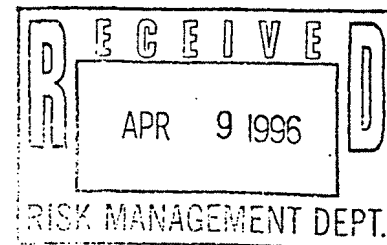
Sincerely,

A handwritten signature in cursive script that reads "J. Brian Dickey". The signature is written in dark ink and is positioned above the typed name.

J. Brian Dickey, CPCU, ARM  
Claims Representative

JBD/ss  
Enclosure

KENTUCKY UTILITIES COMPANY



FOR COMPANY BUSINESS ONLY

Subject: PSC Request

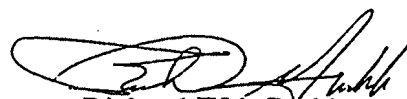
Date: April 4, 1996

From: R.W. Grubb

To: Brian Dickey

Attached is a one line diagram of the Calloway Substation 882-1 distribution system. On this one line I have identified five points along the distribution facility that serves the Cubbage area which was involved in the Jerry Hall fatality. Mr. Land requested that we provide three pieces of information, (1) was the date the original line was built, (2) the dates of any upgrades of these facilities in this area and (3) the latest facility inspection on this section of line. We have researched our maps and files and determined that the line serving the Cubbage area from point B all the way to point E was constructed as a single phase line back in 1949. In 1978 on work order project #11875 we upgraded this single phase #6 copperwell circuit from point B to point C with three phase 2/0 ACSR. Then the following year in 1979 on project #12425 we upgraded this single phase circuit by installing two additional phases from point C to point D. Point D is located at the Cubbage School and is approximately 10,000 feet away from point E which was the location of the incident. None of the facilities passed point D have been upgraded since the original construction in 1949. The Inspection records are kept by Alan Lewis at the Stores/Services Complex at Fourmile. He will be forwarding you these records under a separate mailing.

Also attached is map showing our distribution facilities on a 1" = 100' map of the area where this incident occurred. If you should need any further information, please feel free to contact me.



Richard W. Grubb

Attachment

cc: CMBishop  
JHGann  
GALewis

KU INSPECTION REPORT

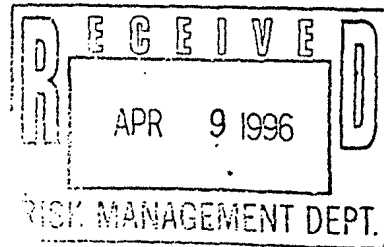
DISTRIBUTION AND SERVICE FACILITIES

Instructions to inspection personnel: Inspect all distribution facilities in the designated area or route, complete report and send to District Manager.

Office Pineville

Route No. Zone 6

Line Location Nensley Settlement Hollow



Inspection Check List:

Conductors	<input checked="" type="checkbox"/>	Crossarms	<input checked="" type="checkbox"/>	Lightning arresters, cutouts	<input checked="" type="checkbox"/>
Insulators	<input checked="" type="checkbox"/>	Guys & anchors	<input checked="" type="checkbox"/>	and grounds	<input checked="" type="checkbox"/>
Poles/structures	<input checked="" type="checkbox"/>	Transformers	<input checked="" type="checkbox"/>	Service drops	<input checked="" type="checkbox"/>
				Meters	<input checked="" type="checkbox"/>

Maintenance required or other remarks (attach additional sheets as required). Show location by line, route or address.

Lines - O.K.

Visual inspection performed in whole or in part in connection with regular duties.

Date completed 2-21-94 Bob Henderson / A.L.  
Inspection Personnel

Instructions to maintenance personnel: When work finished, complete report below and send to District Manager.

Repairs or other maintenance performed (attach additional sheets as required).

Date completed \_\_\_\_\_  
Maintenance Personnel

SYSTEM INSPECTION & PREVENTATIVE MAINTENANCE

SEQUENCE NO..

DISTRICT-Middlesboro/Pineville OFFICE-

ZONE NUMBER ..

SUB ZONE LETTER.. L

ZONE DESCRIPTION ..

SUB STATION NUMBER ..

BREAKER NUMBER . (KV)

KEY MAP ..... BASE MAP ..... DETAIL/SUB .....

LINE LOCATION From Cabbage School To End of Line in

Both Directions

Inspection Check List:

Conductors

Crossarms

Lightning arresters, cutouts

Insulators

Guy & anchors

and grounds

Poles/structures

Transformers

Service drops

Meters

Maintenance required or other remarks (attach additional sheets as required). Show location by line, route or address.

Lines are OK.

Everything done in L except Polkari

Visual inspection performed in whole or in part in connection with regular duties.

Date completed 8-12-94

CARY BUNTING

Inspection Personnel

Instructions to maintenance personnel: When work finished, complete report below and send to District Manager.

Repairs or other maintenance performed (attach additional sheets as required).

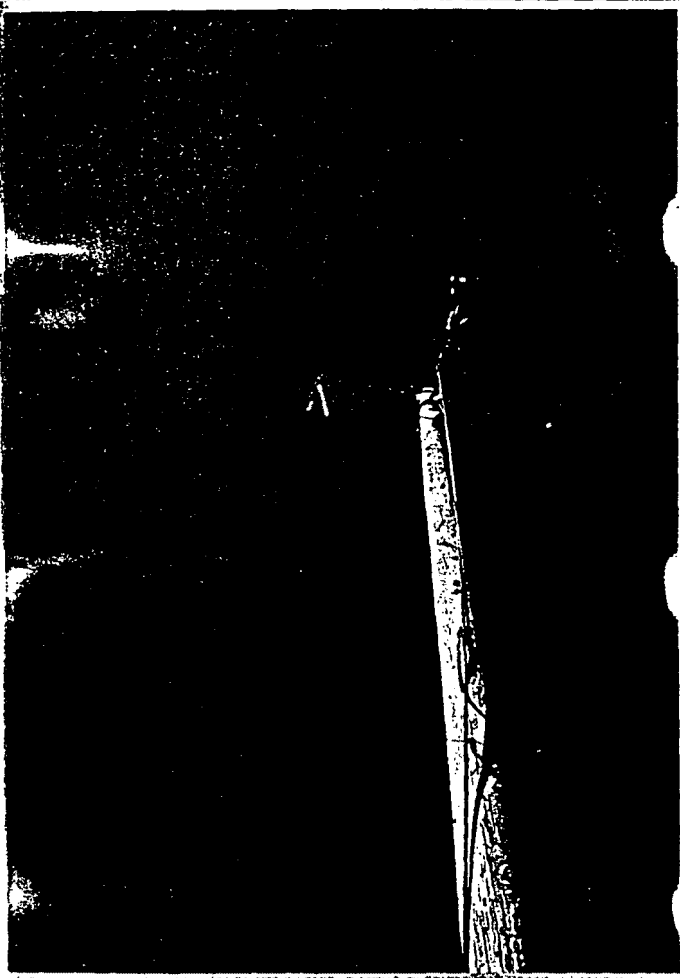
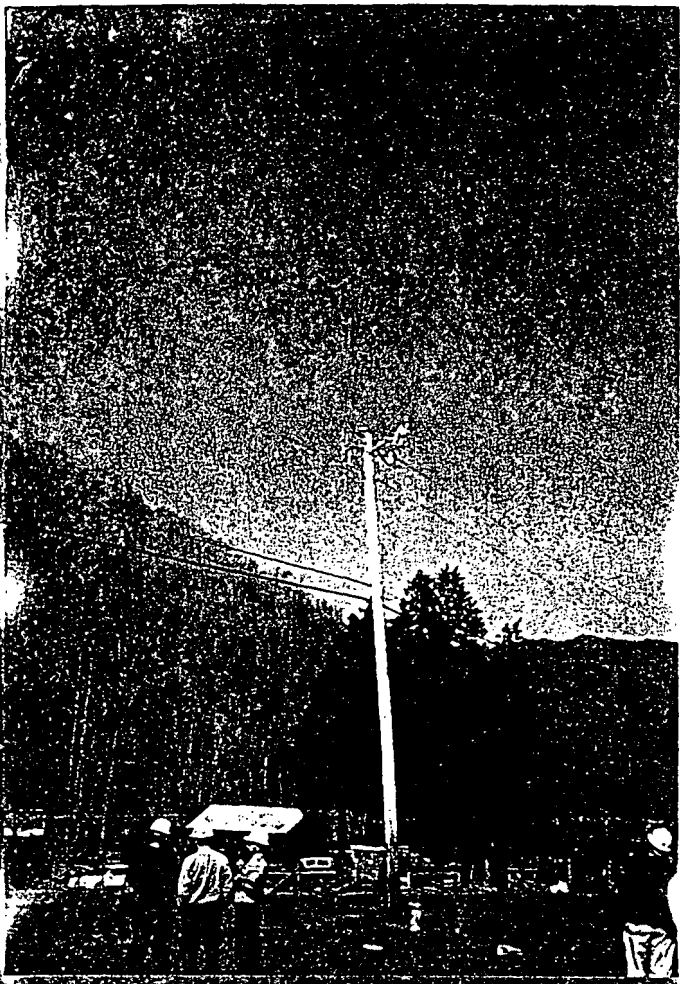
Date Completed \_\_\_\_\_

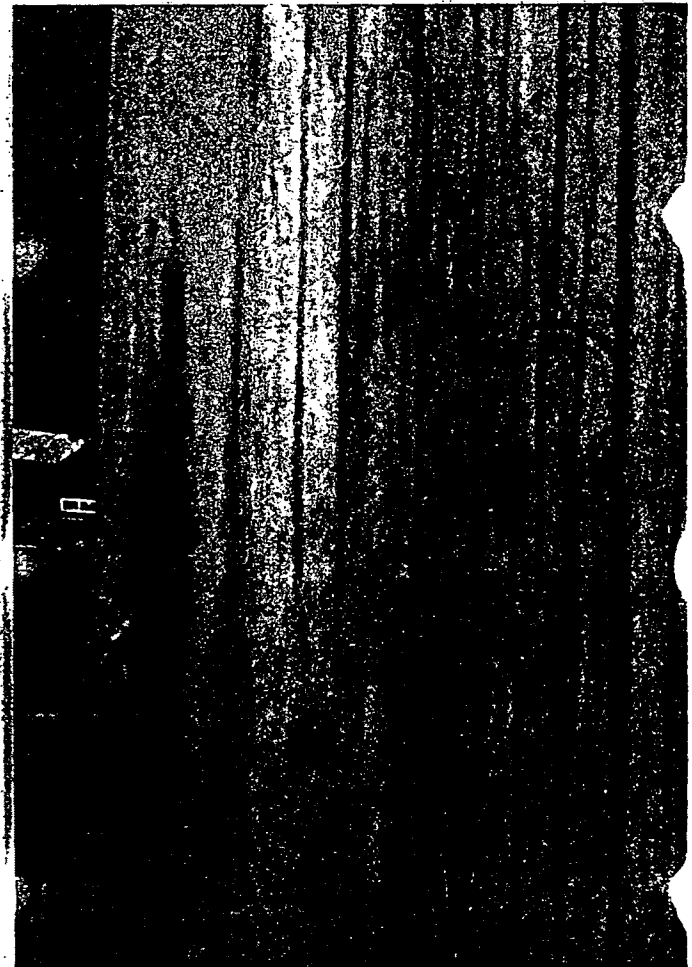
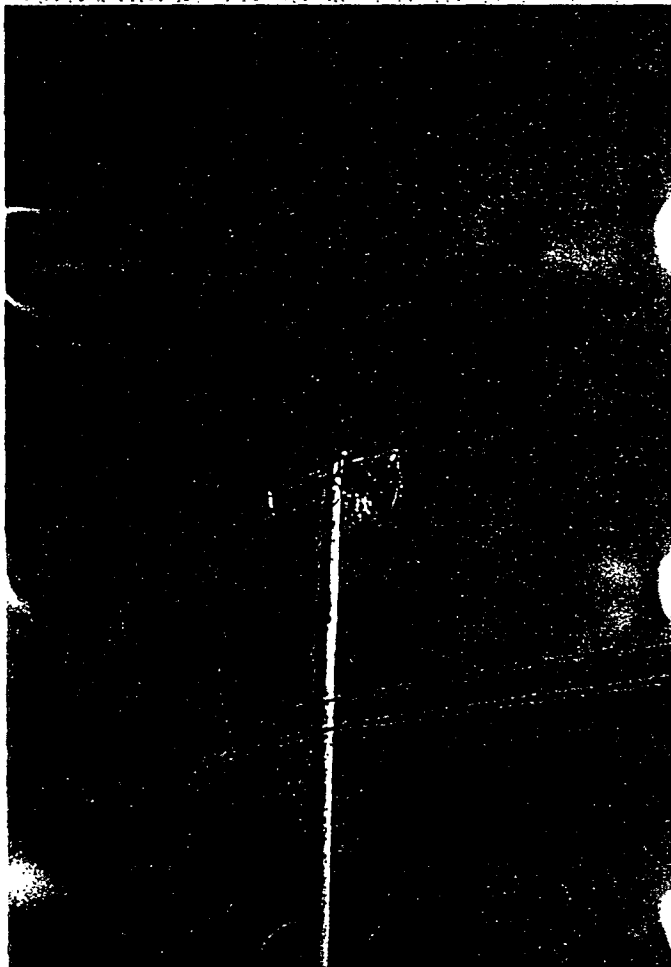
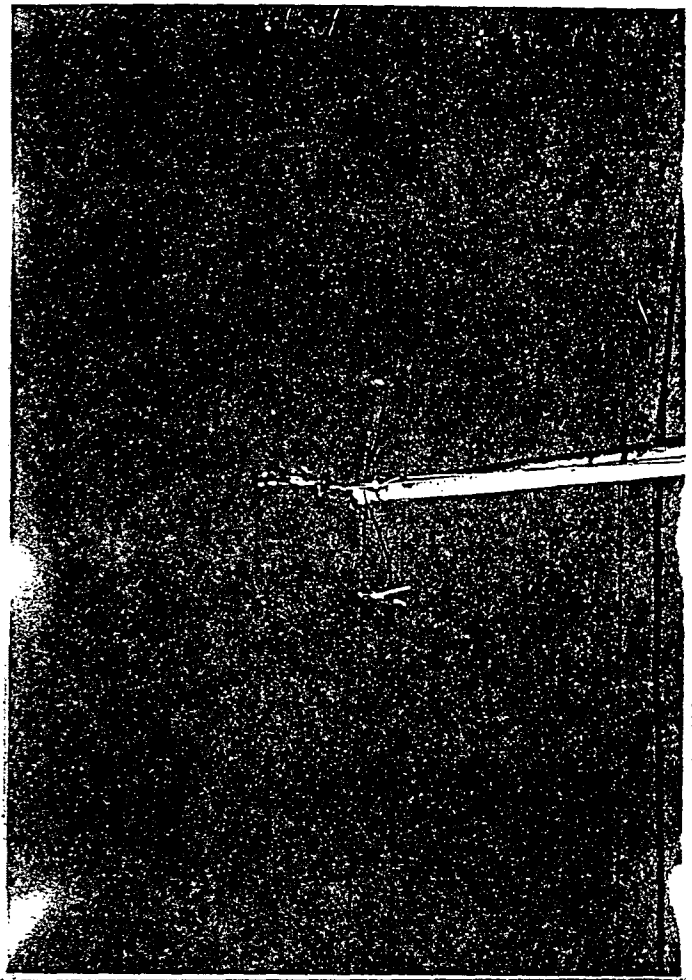
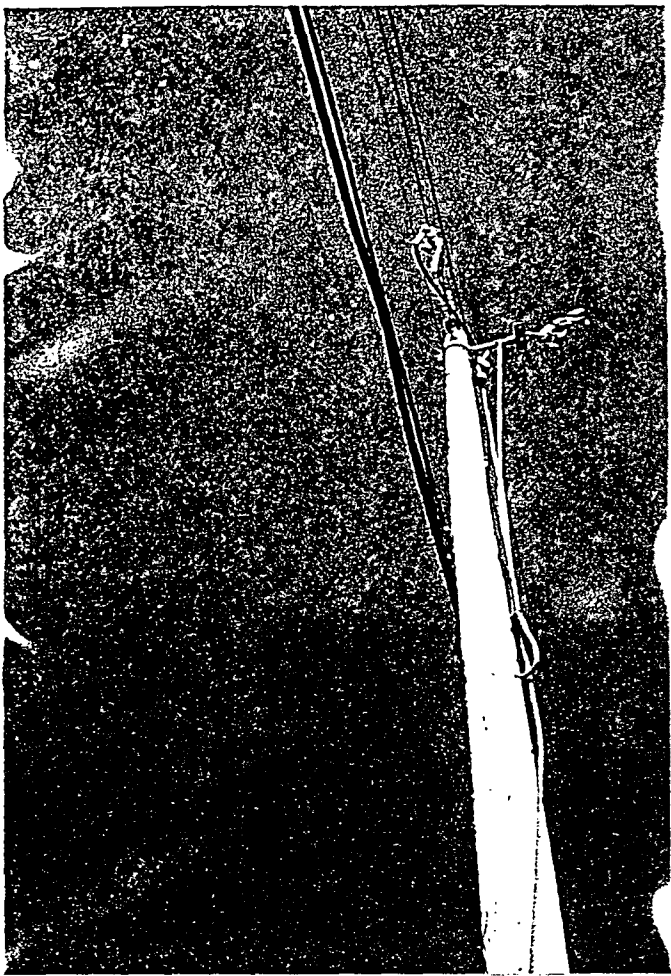
## Attachment C

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### Photographs







PHOTOGRAPHY UNIT  
U.S. AIR FORCE