

RAIL EQUIPMENT ACCIDENT/INCIDENT REPORT

1. Name of Reporting Railroad <b>CSX Transportation [CSX]</b>				1a. Alphabetic Code <b>CSX</b>		1b. Railroad Accident/Incident No. <b>070222017</b>							
2. Name of other Railroad Involved in Train Accident/Incident <b>Amtrak (National Railroad Passenger Corporation) [ATK]</b>				2a. Alphabetic Code <b>ATK</b>		2b. Railroad Accident/Incident No. <b>074513</b>							
3. Name of Railroad Responsible for Track Maintenance (single entry) <b>CSX Transportation [CSX]</b>				3a. Alphabetic Code <b>CSX</b>		3b. Railroad Accident/Incident No. <b>070222017</b>							
4. U. S. DOT Grade Crossing Identification Number				5. Date of Accident/Incident month: <b>0</b>   day: <b>7</b>   year: <b>2</b>   <b>9</b>   <b>2002</b>		6. Time of Accident/Incident <b>1:53</b> AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>							
7. Type of Accident/ Incident (single entry in code box)													
1. Derailment	2. Head on collision	3. Rear end collision	4. Side collision	5. Raking collision	6. Broken train collision	7. Hwy-rail crossing	8. RR grade crossing	9. Obstruction	10. Explosion-detonation	11. Fire/violent rupture	12. Other impacts	13. Other (describe in narrative)	Code <b>01</b>
8. Cars Carrying HAZMAT <b>N/A</b>		9. HAZMAT Cars Damaged/ Derailed <b>N/A</b>		10. Cars Releasing HAZMAT <b>N/A</b>		11. People Evacuated <b>N/A</b>		12. Division <b>BALTIMORE</b>					
13. Nearest City/Town <b>KENSINGTON</b>			14. Milepost (to nearest tenth) <b>0011.9</b>		15. State Abbr. <b>MD</b>	Code <b>24</b>	16. County <b>MONTGOMERY</b>						
17. Temperature (F) (specify if minus) <b>98</b> ° F		18. Visibility (single entry) Code 1. Dawn 3. Dusk 2. Day 4. Dark <b>2</b>		19. Weather (single entry) Code 1. Clear 3. Rain 5. Sleet 2. Cloudy 4. Fog 6. Snow <b>1</b>		20. Type of Track Code 1. Main 3. Siding 2. Yard 4. Industry <b>1</b>							
21. Track Name/ Number <b>NO.1 MAIN 001</b>			22. FRA Track Class (1-9, X) Code <b>4</b>		23. Annual Track Density (gross tons in millions) <b>69.00</b>		24. Time Table Direction Code 1. North 3. East 2. South 4. West						
25. Type of Equipment Consist (single entry) 1. Freight train 4. Work train 7. Yard/switching A. Spec. MoW Equip. 2. Passenger train 5. Single car 8. Light loco(s). 3. Commuter train 6. Cut of cars 9. Maint./inspect. car				26. Was Equipment Attended? Code 1. Yes 2. No		27. Train Number/Symbol							
28. Speed (recorded speed if available) R - Recorded E - Estimated <b>000</b> MPH		30. Method(s) of Operation (enter codes that apply) a. ATCS g. Automatic block b. Auto train control h. Current of traffic c. Auto train stop i. Time table/train orders d. Cab signals j. Track warrant control e. Traffic control k. Direct traffic control f. Interlocking l. Yard limits		m. Special instructions n. Other than main track rules p. Positive train control o. Other (specify in narrative) Code(s)		30a. Remotely Controlled Locomotive? 0 = Not a remotely controlled operation 1 = Remote control portable transmitter 2 = Remote control tower operation 3 = Remote control portable transmitter - more than one remote control transmitter Code							
29. Trailing Tons (gross tonnage, excluding power units) <b>0</b>		31. Principal Car/Unit (1) First involved (derailed, struck, etc) <b>000</b> (2) Causing (if mechanical, cause reported) <b>000</b>		32. If any railroad employee(s) tested for drug/alcohol use, enter the number that were positive in the appropriate box. Alcohol _____ Drugs _____		33. Was this consist transporting passengers? (y/n)							
34. Locomotive Units		a. Head End	Mid Train	Rear End		35. Cars			Loaded	Empty			
		b. Manual	c. Remote	d. Manual	e. Remote	a. Freight	b. Pass.	c. Freight	d. Pass.	e. Caboose			
(1) Total in Train		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>			
(2) Total Derailed		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>			
36. Equipment Damage This Consist \$ <b>0</b>		37. Track, Signal, Way, & Structure Damage \$ <b>58,700</b>		38. Primary Cause Code <b>H993</b>		39. Contributing Cause Code							
40. Engineers/ Operators <b>0</b>				41. Firemen		42. Conductors <b>0</b>		43. Brakemen		44. Engineer/Operator Hrs: _____ Mins: _____		45. Conductor Hrs: _____ Mins: _____	
Casualties to:		46. Railroad Employees	47. Train Passengers	48. Others	49. Special Study Block								
Fatal		<b>0</b>	<b>0</b>	<b>0</b>									
Nonfatal		<b>0</b>	<b>0</b>	<b>0</b>									
50. Latitude (optional) <b>0</b>				51. Longitude (optional) <b>0</b>									
52. Narrative Description (Be specific, and continue on separate sheet if necessary) <b>P03029 DERAILED 11 PASSENGER CARS. EXTENSIVE DAMAGES: EQUIPMENT ATK AND TRACK &amp; SIGNAL/CSXT. OUT OF 163 PASSENGERS, 96 WERE INJURED. ATK TO FILE FORM 54 (RAIL EQUIP) AND FORM 55A (INJURIES); CSXT TO FILE FORM 54.</b>													
53. Typed/Printed Name & Title of Preparer				54. Signature				55. Date					
<b>NOTE:</b> This report is part of the reporting railroad's accident report pursuant to the accident reports status and, as such shall not " be admitted as evidence See 49 C.F.R. 225.7 (b).													