U. S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION
FEDERAL RAILROAD ADMINISTRATION

OMB No. 2130-0017

Instructions for the initial reporting of the following types of new or previously unreported crossings: For public highway-rail grade crossings, complete the entire inventory Form. For private highway-rail grade crossings, complete the Header, Parts I and II, and the Submission Information section. For public pathway grade crossings (including pedestrian station grade crossings), complete the Header, Parts I and II, and the Submission Information section. For Private pathway grade crossings, complete the Header, Parts I and II, and the Submission Information section. For grade-separated highway-rail or pathway crossings (including pedestrian station crossings), complete the Header, Part I, and the Submission Information section. For changes to existing data, complete the Header, Part I Items 1-3, and the Submission Information section, in addition to the updated data fields. Note: For private crossings only, Part I Item 20 and Part III Item 2.K. are required unless otherwise noted. An asterisk * denotes an optional field.

A. Revision Date *(MM/DD/YYYY)*	**B. Reporting Agency**	**C. Reason for Update** *(Select only one)*	**D. DOT Crossing Inventory Number**
04 / 05 / 2024	☐ Railroad ☐ Transit ☒ State ☐ Other	☒ Change in Data ☐ New Crossing ☐ Closed ☐ No Train Traffic ☐ Quiet Zone Update ☐ Re-Open ☐ Date Change Only ☐ Change in Primary Operating RR ☐ Admin. Correction	271997L

Part I: Location and Classification Information

1. Primary Operating Railroad	**2. State**	**3. County**
Florida East Coast Railway Company [FEC]	FLORIDA	BREVARD

4. City / Municipality	**5. Street/Road Name & Block Number**	**6. Highway Type & No.**
☒ In ☐ Near TITUSVILLE	GARDEN ST *(Street/Road Name)* | 499 ** (Block Number)*	SR406

7. Do Other Railroads Operate a Separate Track at Crossing? ☐ Yes ☒ No If Yes, Specify RR	**8. Do Other Railroads Operate Over Your Track at Crossing?** ☐ Yes ☒ No If Yes, Specify RR
_____, _____, _____, _____	_____, _____, _____, _____

9. Railroad Division or Region	**10. Railroad Subdivision or District**	**11. Branch or Line Name**	**12. RR Milepost** *(prefix) | (nnnn.nnn) | (suffix)*
☐ None NORTH	☐ None NORTH	☐ None MAINLINE	_____ | 0154.10 | _____

13. Line Segment *	**14. Nearest RR Timetable Station ***	**15. Parent RR** *(if applicable)*	**16. Crossing Owner** *(if applicable)*
154-530	TITUSVILLE	☐ N/A FEC	☐ N/A FEC

17. Crossing Type	**18. Crossing Purpose**	**19. Crossing Position**	**20. Public Access** *(if Private Crossing)*	**21. Type of Train**	**22. Average Passenger Train Count Per Day**
☒ Public ☐ Private	☒ Highway ☐ Pathway, Ped. ☐ Station, Ped.	☒ At Grade ☐ RR Under ☐ RR Over	☐ Yes ☐ No	☒ Freight ☐ Intercity Passenger ☐ Commuter ☐ Transit ☐ Shared Use Transit ☐ Tourist/Other	☐ Less Than One Per Day ☐ Number Per Day 0

23. Type of Land Use
☐ Open Space ☐ Farm ☐ Residential ☒ Commercial ☐ Industrial ☐ Institutional ☐ Recreational ☐ RR Yard

24. Is there an Adjacent Crossing with a Separate Number?	**25. Quiet Zone** *(FRA provided)*
☐ Yes ☒ No If Yes, Provide Crossing Number 0	☒ No ☐ 24 Hr ☐ Partial ☐ Chicago Excused Date Established _____

26. HSR Corridor ID	**27. Latitude in decimal degrees**	**28. Longitude in decimal degrees**	**29. Lat/Long Source**
☒ N/A	*(WGS84 std: nn.nnnnnnn)* 28.6153959	*(WGS84 std: -nnn.nnnnnnn)* -80.8105756	☒ Actual ☐ Estimated

30.A. Railroad Use *	**31.A. State Use ***
30.B. Railroad Use *	**31.B. State Use ***
30.C. Railroad Use *	**31.C. State Use ***
30.D. Railroad Use *	**31.D. State Use ***
32.A. Narrative *(Railroad Use)* *****	**32.B. Narrative** *(State Use)* *****

33. Emergency Notification Telephone No. *(posted)*	**34. Railroad Contact** *(Telephone No.)*	**35. State Contact** *(Telephone No.)*
800-572-1522	800-572-1522	850-414-4907

Part II: Railroad Information

1. Estimated Number of Daily Train Movements

1.A. Total Day Thru Trains *(6 AM to 6 PM)*	1.B. Total Night Thru Trains *(6 PM to 6 AM)*	1.C. Total Switching Trains	1.D. Total Transit Trains	1.E. Check if Less Than One Movement Per Day ☐ How many trains per week?
14	7	0	0	

2. Year of Train Count Data *(YYYY)*	3. Speed of Train at Crossing
2016	3.A. Maximum Timetable Speed *(mph)* 60 3.B. Typical Speed Range Over Crossing *(mph)* From 30 to 60

4. Type and Count of Tracks
Main 1 Siding 0 Yard 0 Transit 0 Industry 0

5. Train Detection *(Main Track only)*
☒ Constant Warning Time ☒ Motion Detection ☐AFO ☐ PTC ☐ DC ☐ Other ☐ None

6. Is Track Signaled?	7.A. Event Recorder	7.B. Remote Health Monitoring
☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No

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A. Revision Date *(MM/DD/YYYY)*	PAGE 2	D. Crossing Inventory Number *(7 char.)*
04/05/2024		271997L

Part III: Highway or Pathway Traffic Control Device Information

1. Are there Signs or Signals? ☒ Yes ☐ No

2. Types of Passive Traffic Control Devices associated with the Crossing

2.A. Crossbuck Assemblies *(count)*	2.B. STOP Signs *(R1-1)* *(count)*	2.C. YIELD Signs *(R1-2)* *(count)*	2.D. Advance Warning Signs *(Check all that apply; include count)* ☐ None
0	0	0	☒ W10-1 2 ☒ W10-3 0 ☒ W10-11 0 ☒ W10-2 0 ☒ W10-4 0 ☒ W10-12 0

2.E. Low Ground Clearance Sign *(W10-5)*	2.F. Pavement Markings	2.G. Channelization Devices/Medians	2.H. EXEMPT Sign *(R15-3)*	2.I. ENS Sign *(I-13)* Displayed
☐ Yes *(count* 0 *)* ☒ No	☒ Stop Lines ☒ Dynamic Envelope ☒ RR Xing Symbols ☐ None	☒ All Approaches ☒ Median ☐ One Approach ☐ None	☐ Yes ☒ No	☒ Yes ☐ No

2.J. Other MUTCD Signs ☒ Yes ☐ No	2.K. Private Crossing Signs *(if private)*	2.L. LED Enhanced Signs *(List types)*
Specify Type W10-1 Count 2 Specify Type _____ Count 0 Specify Type _____ Count 0	☐ Yes ☐ No	0

3. Types of Train Activated Warning Devices at the Grade Crossing *(specify count of each device for all that apply)*

3.A. Gate Arms *(count)*	3.B. Gate Configuration	3.C. Cantilevered *(or Bridged)* Flashing Light Structures *(count)*	3.D. Mast Mounted Flashing Lights *(count of masts)* 6	3.E. Total Count of Flashing Light Pairs
Roadway 4 Pedestrian 2	☒ 2 Quad ☐ Full *(Barrier)* Resistance ☐ 3 Quad ☐ 4 Quad ☒ Median Gates	Over Traffic Lane 2 ☐ Incandescent Not Over Traffic Lane 0 ☒ LED	☐ Incandescent ☒ LED ☒ Back Lights Included ☐ Side Lights Included	20

3.F. Installation Date of Current Active Warning Devices: *(MM/YYYY)*	3.G. Wayside Horn	3.H. Highway Traffic Signals Controlling Crossing	3.I. Bells *(count)*
10 / 1978 ☐ Not Required	☐ Yes Installed on *(MM/YYYY)* _____/_____ ☒ No	☐ Yes ☒ No	6

3.J. Non-Train Active Warning	3.K. Other Flashing Lights or Warning Devices
☐ Flagging/Flagman ☐Manually Operated Signals ☐ Watchman ☐ Floodlighting ☒ None	Count 0 Specify type 0

4.A. Does nearby Hwy Intersection have Traffic Signals?	4.B. Hwy Traffic Signal Interconnection	4.C. Hwy Traffic Signal Preemption	5. Highway Traffic Pre-Signals	6. Highway Monitoring Devices *(Check all that apply)*
☐ Yes ☒ No	☒ Not Interconnected ☐ For Traffic Signals ☐ For Warning Signs	☐ Simultaneous ☐ Advance	☐ Yes ☒ No Storage Distance * 0 Stop Line Distance * 0	☐ Yes - Photo/Video Recording ☐ Yes – Vehicle Presence Detection ☒ None

Part IV: Physical Characteristics

1. Traffic Lanes Crossing Railroad	2. Is Roadway/Pathway Paved?	3. Does Track Run Down a Street?	4. Is Crossing Illuminated? *(Street lights within approx. 50 feet from nearest rail)*
☐ One-way Traffic ☐ Two-way Traffic ☒ Divided Traffic Number of Lanes 5	☒ Yes ☐ No	☐ Yes ☒ No	☒ Yes ☐ No

5. Crossing Surface *(on Main Track, multiple types allowed)* Installation Date * *(MM/YYYY)* 0 /_____ Width * 10 Length * 84

☐ 1 Timber ☐ 2 Asphalt ☐ 3 Asphalt and Timber ☒ 4 Concrete ☐ 5 Concrete and Rubber ☐ 6 Rubber ☐ 7 Metal
☐ 8 Unconsolidated ☐ 9 Composite ☐ 10 Other *(specify)* _____

6. Intersecting Roadway within 500 feet?	7. Smallest Crossing Angle	8. Is Commercial Power Available? *
☒ Yes ☐ No If Yes, Approximate Distance *(feet)* 250	☐ 0° – 29° ☐ 30° – 59° ☒ 60° - 90°	☒ Yes ☐ No

Part V: Public Highway Information

1. Highway System	2. Functional Classification of Road at Crossing	3. Is Crossing on State Highway System?	4. Highway Speed Limit
☐ (01) Interstate Highway System ☒ (02) Other Nat Hwy System (NHS) ☐ (03) Federal AID, Not NHS ☐ (08) Non-Federal Aid	☐ (0) Rural ☒ (1) Urban ☐ (1) Interstate ☐ (5) Major Collector ☐ (2) Other Freeways and Expressways ☒ (3) Other Principal Arterial ☐ (6) Minor Collector ☐ (4) Minor Arterial ☐ (7) Local	☒ Yes ☐ No	30 MPH ☒ Posted ☐ Statutory

5. Linear Referencing System *(LRS Route ID)* * 70002000

6. LRS Milepost * 2.762

7. Annual Average Daily Traffic *(AADT)*	8. Estimated Percent Trucks	9. Regularly Used by School Buses?	10. Emergency Services Route
Year 2024 AADT 1	0 %	☒ Yes ☐ No Average Number per Day 0	☒ Yes ☐ No

Submission Information - *This information is used for administrative purposes and is not available on the public website.*

Submitted by _____ Organization _____ Phone _____ Date _____