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) 09 / 22 / 2023 | B. Reporting Agency ☒ Railroad ☐ Transit ☐ State ☐ Other | C. Reason for Update *(Select only one)* ☒ Change in Data ☐ New Crossing ☐ Closed ☐ No Train Traffic ☐ Quiet Zone Update ☐ Re-Open ☐ Date Change Only ☐ Change in Primary Operating RR ☐ Admin. Correction | D. DOT Crossing Inventory Number 522545W |

Part I: Location and Classification Information

1. Primary Operating Railroad
Norfolk Southern Railway Company [NS]

2. State
INDIANA

3. County
ST JOSEPH

4. City / Municipality
☒ In ☐ Near   SOUTH BEND

5. Street/Road Name & Block Number
TWYCKENHAM DRIVE |
(Street/Road Name) | * *(Block Number)*

6. Highway Type & No.
LS

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 ATK, CP, _____, _____

9. Railroad Division or Region
☐ None GREAT LAKES

10. Railroad Subdivision or District
☐ None CHICAGO LINE

11. Branch or Line Name
☒ None

12. RR Milepost
CD | 0434.970 |
(prefix) | (nnnn.nnn) | (suffix)

13. Line Segment *

14. Nearest RR Timetable Station *
SOUTH BEND

15. Parent RR *(if applicable)*
☒ N/A

16. Crossing Owner *(if applicable)*
☒ N/A

| 17. Crossing Type ☒ Public ☐ Private | 18. Crossing Purpose ☒ Highway ☐ Pathway, Ped. ☐ Station, Ped. | 19. Crossing Position ☒ At Grade ☐ RR Under ☐ RR Over | 20. Public Access *(if Private Crossing)* ☐ Yes ☐ No | 21. Type of Train ☒ Freight ☒ Intercity Passenger ☐ Commuter   ☐ Transit ☐ Shared Use Transit ☐ Tourist/Other | 22. Average Passenger Train Count Per Day ☐ Less Than One Per Day ☒ Number Per Day 4 |

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?
☐ Yes ☒ No   If Yes, Provide Crossing Number _____

25. Quiet Zone *(FRA provided)*
☐ No ☒ 24 Hr ☐ Partial ☐ Chicago Excused   Date Established 9/8/2017 12:00:00

26. HSR Corridor ID ☒ N/A

27. Latitude in decimal degrees
(WGS84 std: nn.nnnnnnn) 41.6577081

28. Longitude in decimal degrees
(WGS84 std: -nnn.nnnnnnn) -86.2255606

29. Lat/Long Source
☒ Actual ☐ Estimated

30.A. Railroad Use *	31.A. State Use * 1
30.B. Railroad Use *	31.B. State Use * 75
30.C. Railroad Use *	31.C. State Use * 2
30.D. Railroad Use *	31.D. State Use * 1

32.A. Narrative *(Railroad Use)* * TWO CROSSINGS ASPHALT AND FLANGE

32.B. Narrative *(State Use)* * TWO CROSSINGS ASPHALT AND FLANGE

33. Emergency Notification Telephone No. *(posted)*
800-946-4744

34. Railroad Contact *(Telephone No.)*
800-946-4744

35. State Contact *(Telephone No.)*
855-463-6848

Part II: Railroad Information

1. Estimated Number of Daily Train Movements

| 1.A. Total Day Thru Trains *(6 AM to 6 PM)* 26 | 1.B. Total Night Thru Trains *(6 PM to 6 AM)* 34 | 1.C. Total Switching Trains 4 | 1.D. Total Transit Trains 0 | 1.E. Check if Less Than One Movement Per Day ☐ How many trains per week? _____ |

2. Year of Train Count Data *(YYYY)* 2022

3. Speed of Train at Crossing
3.A. Maximum Timetable Speed *(mph)* 79
3.B. Typical Speed Range Over Crossing *(mph)* From 40 to 60

4. Type and Count of Tracks
Main 2   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? ☒ Yes ☐ No | 7.A. Event Recorder ☒ Yes ☐ No | 7.B. Remote Health Monitoring ☐ Yes ☒ No |

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A. Revision Date *(MM/DD/YYYY)* 09/22/2023	PAGE 2	D. Crossing Inventory Number *(7 char.)* 522545W

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	2.B. STOP SIGNS (R1-1) *(count)* 0	2.C. YIELD Signs (R1-2) *(count)* 0	2.D. Advance Warning Signs *(Check all that apply; include count)* ☐ None ☒ W10-1 __2__ ☐ W10-3 _____ ☐ W10-11 _____ ☐ W10-2 _____ ☐ W10-4 _____ ☐ W10-12 _____

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

2.J. Other MUTCD Signs ☒ Yes ☐ No Specify Type __R15-2P__ Count __2__ Specify Type _____ Count __2__ Specify Type _____ Count __2__	2.K. Private Crossing Signs *(if private)* ☐ Yes ☐ No	2.L. LED Enhanced Signs *(List types)*

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)* Roadway __2__ Pedestrian __0__	3.B. Gate Configuration ☒ 2 Quad ☐ Full *(Barrier)* Resistance ☐ 3 Quad ☐ 4 Quad ☐ Median Gates	3.C. Cantilevered *(or Bridged)* Flashing Light Structures *(count)* Over Traffic Lane __2__ ☐ Incandescent Not Over Traffic Lane __0__ ☒ LED	3.D. Mast Mounted Flashing Lights *(count of masts)* __2__ ☐ Incandescent ☒ LED ☒ Back Lights Included ☐ Side Lights Included	3.E. Total Count of Flashing Light Pairs 4

3.F. Installation Date of Current Active Warning Devices: *(MM/YYYY)* __04__ / __2016__ ☐ Not Required	3.G. Wayside Horn ☐ Yes Installed on *(MM/YYYY)* ____/_____ ☒ No	3.H. Highway Traffic Signals Controlling Crossing ☐ Yes ☒ No	3.I. Bells *(count)* 0

3.J. Non-Train Active Warning ☒ Flagging/Flagman ☐ Manually Operated Signals ☐ Watchman ☐ Floodlighting ☐ None	3.K. Other Flashing Lights or Warning Devices Count __0__ Specify type __none__

4.A. Does nearby Hwy Intersection have Traffic Signals? ☐ Yes ☒ No	4.B. Hwy Traffic Signal Interconnection ☒ Not Interconnected ☐ For Traffic Signals ☐ For Warning Signs	4.C. Hwy Traffic Signal Preemption ☐ Simultaneous ☐ Advance	5. Highway Traffic Pre-Signals ☐ Yes ☒ No Storage Distance * __0__ Stop Line Distance * __0__	6. Highway Monitoring Devices *(Check all that apply)* ☐ Yes - Photo/Video Recording ☐ Yes – Vehicle Presence Detection ☒ None

Part IV: Physical Characteristics

1. Traffic Lanes Crossing Railroad ☐ One-way Traffic ☒ Two-way Traffic Number of Lanes __2__ ☐ Divided Traffic	2. Is Roadway/Pathway Paved? ☒ Yes ☐ No	3. Does Track Run Down a Street? ☐ Yes ☒ No	4. Is Crossing Illuminated? *(Street lights within approx. 50 feet from nearest rail)* ☒ Yes ☐ No

5. Crossing Surface *(on Main Track, multiple types allowed)*   Installation Date * *(MM/YYYY)* ____/_____   Width * __25__   Length * __80__ ☐ 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? ☒ Yes ☐ No If Yes, Approximate Distance *(feet)* _____	7. Smallest Crossing Angle ☐ 0° – 29° ☐ 30° – 59° ☒ 60° - 90°	8. Is Commercial Power Available? * ☒ Yes ☐ No

Part V: Public Highway Information

1. Highway System ☐ (01) Interstate Highway System ☐ (02) Other Nat Hwy System (NHS) ☒ (03) Federal AID, Not NHS ☐ (08) Non-Federal Aid	2. Functional Classification of Road at Crossing ☐ (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	3. Is Crossing on State Highway System? ☐ Yes ☒ No	4. Highway Speed Limit __30__ MPH ☒ Posted ☐ Statutory
		5. Linear Referencing System *(LRS Route ID)* *	
		6. LRS Milepost *	

7. Annual Average Daily Traffic *(AADT)* Year __2018__ AADT __7138__	8. Estimated Percent Trucks 7 %	9. Regularly Used by School Buses? ☒ Yes ☐ No Average Number per Day __12__	10. Emergency Services Route ☒ Yes ☐ No

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

Submitted by _____   Organization _____   Phone _____   Date _____