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
03 / 01 / 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	904498X

Part I: Location and Classification Information

1. Primary Operating Railroad	2. State	3. County
Norfolk Southern Railway Company [NS]	NORTH CAROLINA	GUILFORD

4. City / Municipality	5. Street/Road Name & Block Number	6. Highway Type & No.
☒ In ☐ Near GREENSBORO	INDUSTRY ACCESS (Street/Road Name) | * (Block Number)	PRIVATE

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

9. Railroad Division or Region	10. Railroad Subdivision or District	11. Branch or Line Name	12. RR Milepost
☐ None BLUE RIDGE	☐ None DANVILLE	☒ None	K | 0003.280 | (prefix) | (nnnn.nnn) | (suffix)

13. Line Segment *	14. Nearest RR Timetable Station *	15. Parent RR (if applicable)	16. Crossing Owner (if applicable)
	GREENSBORO	☒ N/A	☒ N/A

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	☒ 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) 36.0764448	(WGS84 std: -nnn.nnnnnnn) -79.8952573	☒ 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.)
800-946-4744	800-946-4744	919-715-5564

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?
4	2	5	0	

2. Year of Train Count Data (YYYY)	3. Speed of Train at Crossing
2021	3.A. Maximum Timetable Speed (mph) 25 3.B. Typical Speed Range Over Crossing (mph) From 15 to 25

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

U. S. DOT CROSSING INVENTORY FORM

A. Revision Date *(MM/DD/YYYY)*	PAGE 2	D. Crossing Inventory Number *(7 char.)*
03/01/2024		904498X

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
2	2		☐ W10-1 _____ ☐ W10-3 _____ ☐ W10-11 _____ ☐ W10-2 _____ ☐ W10-4 _____ ☐ W10-12 _____

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_____)* ☒ 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 _____ Count 2 Specify Type _____ Count 0 Specify Type _____ Count _____	☒ Yes ☐ No	

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)* 0	3.E. Total Count of Flashing Light Pairs
Roadway 0 Pedestrian 0	☐ 2 Quad ☐ 3 Quad ☐ 4 Quad ☐ Full *(Barrier)* Resistance ☐ Median Gates	Over Traffic Lane 0 ☐ Incandescent Not Over Traffic Lane 0 ☐ LED	☐ Incandescent ☐ LED ☐ Back Lights Included ☐ Side Lights Included	0

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)*
_____/_____ ☒ Not Required	☐ Yes Installed on *(MM/YYYY)* _____/_____ ☒ No	☐ Yes ☒ No	0

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 _____

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 2	☒ Yes ☐ No	☐ Yes ☒ No	☒ Yes ☐ No

5. Crossing Surface *(on Main Track, multiple types allowed)* Installation Date * *(MM/YYYY)* _____/_____ Width * _____ Length * _____
☐ 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)* _____	☐ 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	_____ MPH ☐ Posted ☐ Statutory

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

6. LRS Milepost *

7. Annual Average Daily Traffic *(AADT)*	8. Estimated Percent Trucks	9. Regularly Used by School Buses?	10. Emergency Services Route
Year 2002 AADT _____	00 %	☐ 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 _____