FEDERAL RAILROAD ADMINISTRATION

RAIL EOUIPMENT ACCIDENT/INCIDENT REPORT

OMB Approval No: 2130-0500

| | 1. Name of Reporting Railroad | | | | | | | | | | ode | 1b. Rai | 1b. Railroad Accident/Incident No. | | | | | | |
|---|--|----------------------------------|---|--|---------------------------------|---|---|--|--|--|--|---------------|--|--|--|---|--------------------------|--|--|
| BNSF Railway Company [BNSF] | | | | | | | | | BNSF | BNSF | | | | | СН0919101 | | | | |
| 2. Name of Other Railroa | | 2a. Alphabetic Code | | | | | 2b. Rai | 2b. Railroad Accident/Incident No. | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| 3. Name of Railroad or Other Entity Responsible for Track Maintenance (single entry) | | | | | | | | | | 3a. Alphabetic Code | | | | | 3b. Railroad Accident/Incident No. | | | | |
| BNSF Railway Company [BNSF] | | | | | | | | | | BNSF | | | | | CH0919101 | | | | |
| 4. U. S. DOT Grade Crossing Identification Number | | | | | | | | | 5. Date of Accident/Incident | | | | | 6. Time of Accident/Incident | | | | | |
| | | | | | | | | | 0 | $\begin{bmatrix} 0 & 0 & 0 & 0 & 0 \end{bmatrix}$ | | | year 2019 | | | AM _ | PM X | | |
| 7. Type of Accident/ | 1. Der | railment | | 4. Side collision | | | | 7. Hwy-rail crossing | | | 10. Explosion-detonation | | | 7:46 13. | Other | | Code | | |
| Incident (single | | ad on collisi | | Raking collision Broken train collision | | | | 8. RR grade cros | | | | | ire | | (describe | | | | |
| entry in code box) 8. Cars Carrying | | er end collis 9. HAZMA | | 6. Brok | en train c | | llision 9. Obstruction 10. Cars Releasing | | | 12. Other imp | | | | | |) | 01 | | |
| HAZMAT | | Damageo | | | | - 1 | HAZMAT | | | Evacuated | | ĺ | | 12. 300 | 12. Subdivision | | | | |
| | | Derailed | | N/A | | | N/A | | | N/A | | T/A | | | LLICOT | | | | |
| N/A 13. Nearest | | | | IN. | V/A | 14. Mil | epost | (to | 15. State | : | Code | 16. County | | Сп | LLICOT | пе | | | |
| City/ | | | | | nearest | | | Abb | or. | I | | | | | | | | | |
| Town ELWOOD | | | | | | nth) | 50.6 | IL | 17 WILI | | | | 1 | | | Code | | | |
| 17. Temperature (F) 18. Visib (specify if minus) 1. Da | | | | | | Code 19. Weather (sin 1. Clear | | | gle entry) 3. Rain | ** | | | Code 20. Type | | | ne of Track | | | |
| (specify if minus) 80 ° F | | | | 4. Dark | | | | Cloudy | 4. Fog | | 6. Snow | | 1 | | 1. Main 3. Siding 2. Yard 4. Industry | | 2 | | |
| 21. Track Name/ | 1 | | | | 22. | . FRA Track Co | | | le 23. Annu | ıal Trac | | | | 24. Tir | Code | | | | |
| Number | | | | | | Class (1-9, | X) | _ | Der | Density (gross tons in millions) | | | | 1. North 3.East | | | | | |
| 4812 25. Type of Equipment | Freight train | 5 | . Single ca | ar Q | Maint /in | nspect. car | | D. EMU | in million's) 26. Was Equipment | | | | | 2. South 4. West 2 27. Train Number/Symbol | | | | | |
| | Passenger train-I | | . Cut of ca | | | loW Equip. | | E. DMU | | | | | | | | moci/3ymoor | | | |
| | 3. Commuter train- | - | . Yard/swi | | - | er Train-Pu | shing | | Code 1. Yes 2. 1 | | | | (| Code Y | LPC | | | | |
| | 4. Work train | | . Light loc | ., | | ter Train-Pu | | | 7 | | | | | Y | | | | | |
| 28. Speed (recorded spe | red | Code | | Type of Te | | | des that a | ipply) | | | | | | | • | ntrolled Locoi | | | |
| <i>if available)</i> R - Recorded | | | | gnalization Signaled | | signaled | | | 2 | | | | | | 0 = Not a remotely controlled operation 1 = Remote control portable transmitter | | | | |
| E - Estimated 004 MPH R Method of Operation/Authority for Movement | | | | | | | | | Mandatory) 5 | | | | | | 2 = Remote control tower operation | | | | |
| 29. Trailing Tons (gross tonnage, 1. Signal Indication 2. Direct Train Control 3. Ya | | | | | | | | | | | | | | | | 3 = Remote control portable transmitter - | | | |
| excluding power unit | rs) | | | Block Regi | | • | | an Main Track K-Restricted Speed or Equivalent | | | | | | | more than one remote control transmitter Code | | | | |
| | | 5,944 | | pplemental/ | - | | | | | | | | | co | ntroi transi | nitter | Code | | |
| 31. Principal Car/Unit | a. Initial and Number b. Position in Train | | | | | ррисцые | c. Loaded (yes/no) 32. If any railroad employee(s) tester | | | | | ted for drug | alcohol use | enter the nu | | | | | |
| (1) First involved | | | | Number b. Position in Train C | | | | | were positive in the appropria | | | | - | | | | | | |
| (derailed, struck, etc) |) | | | | | | | | | | | | | | | | | | |
| (derdired, sirileit, cie) | | DTTX76 | | | 767568 009 | | | | N 22 W. di iii | | | | ansporting passengers ? (y/n) | | | 00 | 00 | | |
| | 1 1 | DT | TX7675 | 900 | | | | 000 | | | | -1-4 4 | | 0 | (() | | | | |
| (2) Causing (if med | chanical, | DT | TX7675 | ,00 | | 000 | | | | 3 | 33.Was this con | sist transpor | ing p | assengers ? | (y/n) | | l No | | |
| | chanical, | | TX7675 | | in | 000 | Rear End | d | 35, Cars | 3 | 33.Was this con | sist transpor | | assengers ? | (y/n) | Empty | No | | |
| (2) Causing (if medicause reported) 34. Locomotive Units (Exclude EMU, DMU, and | | a. Head | FX7675 | Mid Tra | in Remote | 000 d. Man | Rear Enc | d Remote | | U, DM | U, and Cab Car | | | oaded | | Empty | | | |
| (2) Causing (if med cause reported) 34. Locomotive Units | | a. Head | | Mid Tra | | | | | | U, DM | | | L | oaded | | 7 ' | | | |
| (2) Causing (if medicause reported) 34. Locomotive Units (Exclude EMU, DMU, and | | a. Head | b. Ma | Mid Tra | | | ual e. | | (Include EM Locomotives. | U, DM | | a. F | L | oaded | | 7 ' | | | |
| (2) Causing (if medicause reported) 34. Locomotive Units (Exclude EMU, DMU, and Locomotives.) | | a. Head End | b. Ma | Mid Tra | Remote | d. Man | ual e. | Remote | (Include EM Locomotives. | U, DM .) in Equi | U, and Cab Car | a. F | L | oaded t b. Pass | c. Frei | ght d. Pas | s. e. Caboose | | |
| (2) Causing (if mee cause reported) 34. Locomotive Units (Exclude EMU, DMU, and Locomotives.) (1) Total in Train (2) Total Derailed 36. Equipment Damage | | a. Head End | b. Ma | Mid Tra anual c. 0 0 Signal, Way | Remote 0 0 y, | d. Man | ual e. | Remote 0 | (Include EM Locomotives. | U, DM .) in Equi Deraile | U, and Cab Car | a. F | L Freigh | b. Pass | c. Frei | ght d. Pass | s. e. Caboose | | |
| (2) Causing (if medicause reported) 34. Locomotive Units (Exclude EMU, DMU, and Locomotives.) (1) Total in Train (2) Total Derailed | d Cab Car | a. Head End | b. Ma | Mid Tra anual c. 0 | Remote 0 0 y, | d. Man | ual e. | Remote 0 | (Include EM Locomotives. (1) Total i | U, DM .) in Equi Deraile | U, and Cab Car pment Consist d | a. F | L Freigh | oaded t b. Pass. 0 | c. Frei | ght d. Pass | s. e. Caboose | | |
| (2) Causing (if meacause reported) 34. Locomotive Units (Exclude EMU, DMU, and Locomotives.) (1) Total in Train (2) Total Derailed 36. Equipment Damage This Consist | d Cab Car | a. Head End | b. Ma | Mid Tra anual c. 0 0 Signal, Way | Remote 0 0 y, | d. Man | ual e. | Remote 0 | (Include EM Locomotives. (1) Total i (2) Total 38. Primary Ca | U, DM .) in Equi Deraile | U, and Cab Car pment Consist d | a. F | L Freigh | oaded t b. Pass 0 0 39. Contril | c. Frei | ght d. Pass | s. e. Caboose | | |
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NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report...." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).

This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety. Public reporting burden is estimated to average 2 hours per response, including the ime for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a natter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of nformation unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.