

RAIL EQUIPMENT ACCIDENT/INCIDENT REPORT

1. Name of Reporting Railroad BNSF Railway Company [BNSF]			1a. Alphabetic Code BNSF			1b. Railroad Accident/Incident No. HL0219106		
2. Name of Other Railroad or Other Entity with Consist Involved			2a. Alphabetic Code			2b. Railroad Accident/Incident No.		
3. Name of Railroad or Other Entity Responsible for Track Maintenance (single entry) BNSF Railway Company [BNSF]			3a. Alphabetic Code BNSF			3b. Railroad Accident/Incident No. HL0219106		
4. U. S. DOT Grade Crossing Identification Number			5. Date of Accident/Incident month: 0 day: 2 year: 2019			6. Time of Accident/Incident 1:00 AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>		
7. Type of Accident/ Incident (single entry in code box)			7. HAZMAT Cars Damaged/ Derailed N/A			10. Explosion-detonation 11. Fire/violent rupture 12. Other impacts 01		
8. Cars Carrying HAZMAT N/A			9. HAZMAT Cars Damaged/ Derailed N/A			10. Cars Releasing HAZMAT N/A		
11. People Evacuated N/A			12. Subdivision CUBA					
13. Nearest City/Town SPRINGFIELD			14. Milepost (to nearest tenth) 239.9			15. State Code Abbr. MO 29		
16. County GREENE			17. Temperature (F) (specify if minus) 41 °F			18. Visibility (single entry) Code 1. Dawn 3. Dusk 2. Day 4. Dark 2		
19. Weather (single entry) Code 1. Clear 3. Rain 5. Sleet 2. Cloudy 4. Fog 6. Snow 2			20. Type of Track Code 1. Main 3. Siding 2. Yard 4. Industry 2					
21. Track Name/ Number 406			22. FRA Track Class (1-9, X) 1			23. Annual Track Density (gross tons in millions) 3		
24. Time Table Direction 1. North 3. East 2. South 4. West 3			25. Type of Equipment Consist (single entry) 1. Freight train 5. Single car 9. Maint./inspect. car D. EMU 2. Passenger train-Pulling 6. Cut of cars A. Spec. MoW Equip. E. DMU 3. Commuter train-Pulling 7. Yard/switching B. Passenger Train-Pushing 4. Work train 8. Light loco(s) C. Commuter Train-Pushing 1			26. Was Equipment Attended? 1. Yes 2. No Y		
27. Train Number/Symbol CWMTM			28. Speed (recorded speed if available) R - Recorded 007 MPH E - Estimated E			30. Type of Territory (enter codes that apply) Signalization (Mandatory) 1. Signaled 2. Not Signaled 2 Method of Operation/Authority for Movement (Mandatory) 1. Signal Indication 2. Direct Train Control 3. Yard/Restricted Limits 4. Block Register Territory 5. Other Than Main Track K-Restricted Speed or Equivalent Supplemental/Adjunct Codes (Mandatory*) * Mandatory to the extent that all applicable codes are entered		
29. Trailing Tons (gross tonnage, excluding power units) 19,252			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 0					
31. Principal Car/Unit (1) First involved (derailed, struck, etc) JHMX991690			a. Initial and Number 068			b. Position in Train 000		
(2) Causing (if mechanical, cause reported)			c. Loaded (yes/no) Y			32. If any railroad employee(s) tested for drug/alcohol use, enter the number that were positive in the appropriate box. Alcohol: <input type="checkbox"/> Drugs: <input type="checkbox"/>		
33. Was this consist transporting passengers? (y/n) No			34. Locomotive Units (Exclude EMU, DMU, and Cab Car Locomotives.)			35. Cars (Include EMU, DMU, and Cab Car Locomotives.)		
a. Head End 2			b. Manual 0			c. Remote 0		
d. Manual 0			e. Remote 0			a. Freight 135		
b. Pass. 0			c. Freight 0			d. Pass. 0		
e. Caboose 0			(2) Total Derailed 0			7 0		
36. Equipment Damage This Consist \$ 143,070			37. Track, Signal, Way, & Structure Damage \$ 75,000			38. Primary Cause Code T110		
39. Contributing Cause Code			Number of Crew Members			Length of Time on Duty		
			40. Engineers/ Operators 1			41. Firemen 1		
			42. Conductors 1			43. Brakemen		
			44. Engineer/Operator Hrs: 02 Mins: 30			45. Conductor Hrs: 02 Mins: 30		
Casualties to:			46. Railroad Employees 0			47. Train Passengers 0		
Fatal 0			48. Others 0			49a. Special Study Block A OTH		
Nonfatal 0						49b. Special Study Block B 000-000-000		
50. Latitude 37.226408			51. Longitude -93.334342					

52. Narrative Description (Be specific, and continue on separate sheet if necessary)
C-WTMPAM0-38 DERAILED 7 RAILCARS WHILE PULLING THROUGH YARD TRACK 406 DUE TO TRACK WIDE GAGE. NO HAZARDOUS MATERIALS WERE RELEASED.

53. Typed/Printed Name & Title of Preparer		54. Signature		55. Date	
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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 time 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 matter 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 information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.