

RAIL EQUIPMENT ACCIDENT/INCIDENT REPORT

1. Name of Reporting Railroad CSX Transportation [CSX]			1a. Alphabetic Code CSX			1b. Railroad Accident/Incident No. 000175542		
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) CSX Transportation [CSX]			3a. Alphabetic Code CSX			3b. Railroad Accident/Incident No. 000175542		
4. U. S. DOT Grade Crossing Identification Number			5. Date of Accident/Incident month: 0 day: 3 year: 2018			6. Time of Accident/Incident 6:43 AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>		
7. Type of Accident/ Incident (single entry in code box)			7. Side collision			13. Other (describe in narrative) Code 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 LCL					
13. Nearest City/Town LOUISVILLE			14. Milepost (to nearest tenth) 0014.0			15. State Code Abbr. KY 21		
16. County JEFFERSON			17. Temperature (F) (specify if minus) 60 °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 1			20. Type of Track Code 1. Main 3. Siding 2. Yard 4. Industry 2					
21. Track Name/ Number O'BANNON MAIN LEAD			22. FRA Track Class (1-9, X) 1			23. Annual Track Density (gross tons in millions) 0.00		
24. Time Table Direction Code 1. North 3. East 2. South 4. West 1			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 Code 1			26. Was Equipment Attended? 1. Yes 2. No Code Y		
27. Train Number/Symbol J718			28. Speed (recorded speed if available) R - Recorded 001 MPH E - Estimated Code R			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 Supplemental/Adjunct Codes (Mandatory*) * Mandatory to the extent that all applicable codes are entered 5		
29. Trailing Tons (gross tonnage, excluding power units) 1,076			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 Code 0					
31. Principal Car/Unit (1) First involved (derailed, struck, etc) TTGX704294			a. Initial and Number 049			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 00 Drugs 00		
33. Was this consist transporting passengers? (y/n) No			34. Locomotive Units (Exclude EMU, DMU, and Cab Car Locomotives.) a. Head End (1) Total in Train 2 (2) Total Derailed 0			b. Mid Train b. Manual c. Remote 0 0		
c. Rear End d. Manual e. Remote 0 0			35. Cars (Include EMU, DMU, and Cab Car Locomotives.) a. Freight b. Pass. c. Freight d. Pass. e. Caboose (1) Total in Equipment Consist 65 (2) Total Derailed 3			36. Equipment Damage This Consist \$ 52,321		
37. Track, Signal, Way, & Structure Damage \$ 2,509			38. Primary Cause Code H702			39. Contributing Cause Code		
40. Engineers/ Operators 1			41. Firemen			42. Conductors 1		
43. Brakemen			44. Engineer/Operator Hrs: 04 Mins: 43			45. Conductor Hrs: 04 Mins: 43		
Casualties to:			46. Railroad Employees			47. Train Passengers		
Fatal 0			48. Others 0			49a. Special Study Block A OTH		
Nonfatal 0			49b. Special Study Block B 000-000-000					
50. Latitude 38.279951			51. Longitude -85.516779					
52. Narrative Description (Be specific, and continue on separate sheet if necessary) J71830 DERAILED 3 CARS ON OBANNON MAIN LEAD TRACK AFTER OPERATING THROUGH IMPROPERLY LINED LOWER YARD LEAD CROSSOVER SWITCH. DERAILED CARS SIDESWIPED UNOCCUPIED LOCOMOTIVE CONSIST CSXT 6550 AND CSXT 6004 SECURED ON ADJACENT RUNAROUND TRACK #1.								
53. Typed/Printed Name & Title of Preparer			54. Signature			55. Date		
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.								

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4. U. S. DOT Grade Crossing Identification Number			5. Date of Accident/Incident month day year 0 3 0 2018			6. Time of Accident/Incident 6:43 AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>				
7. Type of Accident/ Incident (single entry in code box)			1. Derailment 2. Head on collision 3. Rear end collision			4. Side collision 5. Raking collision 6. Broken train collision				
			7. Hwy-rail crossing 8. RR grade crossing 9. Obstruction			10. Explosion-detonation 11. Fire/violent rupture 12. Other impacts				
			13. Other (describe in narrative)			Code 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 LCL		
13. Nearest City/ Town LOUISVILLE			14. Milepost (to nearest tenth) 0014.0		15. State Code Abbr. KY 21		16. County JEFFERSON			
17. Temperature (F) (specify if minus) 60 ° 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 1		20. Type of Track Code 1. Main 3. Siding 2. Yard 4. Industry 2				
21. Track Name/ Number RUNAROUND TRACK 1			22. FRA Track Class (1-9, X) 1		23. Annual Track Density (gross tons in millions) 0.00		24. Time Table Direction Code 1. North 3. East 2. South 4. West 1			
25. Type of Equipment Consist (single entry)		1. Freight train 2. Passenger train-Pulling 3. Commuter train-Pulling 4. Work train		5. Single car 6. Cut of cars 7. Yard/switching 8. Light loco(s)		9. Maint./inspect. car A. Spec. MoW Equip. B. Passenger Train-Pushing C. Commuter Train-Pushing		D. EMU E. DMU Code 8		
						26. Was Equipment Attended? 1. Yes 2. No Code N		27. Train Number/Symbol J550		
28. Speed (recorded speed if available) R - Recorded E - Estimated 000 MPH		Code R		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 5 Supplemental/Adjunct Codes (Mandatory*) * Mandatory to the extent that all applicable codes are entered				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 Code 0		
29. Trailing Tons (gross tonnage, excluding power units) 0										
31. Principal Car/Unit (1) First involved (derailed, struck, etc) CSXT006550		a. Initial and Number		b. Position in Train 001		c. Loaded (yes/no) N		32. If any railroad employee(s) tested for drug/alcohol use, enter the number that were positive in the appropriate box. Alcohol Drugs 00 00		
(2) Causing (if mechanical, cause reported)		000		N				33. Was this consist transporting passengers? (y/n) No		
34. Locomotive Units (Exclude EMU, DMU, and Cab Car Locomotives.)		a. Head End		b. Manual		c. Remote		d. Manual		
								e. Remote		
(1) Total in Train		2		0		0		0		
(2) Total Derailed		0		0		0		0		
35. Cars (Include EMU, DMU, and Cab Car Locomotives.)		a. Freight		b. Pass.		c. Freight		d. Pass.		
								e. Caboose		
(1) Total in Equipment Consist		0		0		0		0		
(2) Total Derailed		0		0		0		0		
36. Equipment Damage This Consist \$ 41,700		37. Track, Signal, Way, & Structure Damage \$ 0		38. Primary Cause Code H702		39. Contributing Cause Code				
Number of Crew Members					Length of Time on Duty					
40. Engineers/ Operators 0		41. Firemen		42. Conductors 0		43. Brakemen		44. Engineer/Operator Hrs: Mins:		
								45. Conductor Hrs: Mins:		
Casualties to:		46. Railroad Employees		47. Train Passengers		48. Others		49a. Special Study Block A		
Fatal		0		0		0		OTH		
Nonfatal		0		0		0		000-000-000		
50. Latitude 38.279951					51. Longitude -85.516779					
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