

1. Name of Reporting Railroad CSX Transportation [CSX]			1a. Alphabetic Code CSX			1b. Railroad Accident/Incident No. 000176589		
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. 000176589		
4. U. S. DOT Grade Crossing Identification Number			5. Date of Accident/Incident month: 0 day: 5 year: 2018			6. Time of Accident/Incident 11:30 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>		
7. Type of Accident/ Incident (single entry in code box)			7. Side collision			7. Hwy-rail crossing		
8. Cars Carrying HAZMAT N/A			9. HAZMAT Cars Damaged/ Derailed N/A			10. Cars Releasing HAZMAT N/A		
13. Nearest City/Town LOUISVILLE			14. Milepost (to nearest tenth) 0006.0			15. State Code Abbr. KY 21		
17. Temperature (F) (specify if minus) 85 °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		
21. Track Name/ Number EAST PULLBACK			22. FRA Track Class (1-9, X) 1			23. Annual Track Density (gross tons in millions) 0.00		
25. Type of Equipment Consist (single entry)			5. Single car			9. Maint./inspect. car		
28. Speed (recorded speed if available) R - Recorded E - Estimated 008 MPH			30. Type of Territory (enter codes that apply) Signalization (Mandatory) 1. Signaled 2. Not Signaled 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			26. Was Equipment Attended? 1. Yes 2. No Code Y		
29. Trailing Tons (gross tonnage, excluding power units) 5,454			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) TTGX157628			a. Initial and Number 065			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		
34. Locomotive Units (Exclude EMU, DMU, and Cab Car Locomotives.)			35. Cars (Include EMU, DMU, and Cab Car Locomotives.)			33. Was this consist transporting passengers? (y/n) No		
(1) Total in Train 2			a. Head End 2			a. Freight 71		
(2) Total Derailed 0			b. Manual 0			b. Pass. 0		
36. Equipment Damage This Consist \$ 62,009			37. Track, Signal, Way, & Structure Damage \$ 0			38. Primary Cause Code H306		
39. Contributing Cause Code			Number of Crew Members			Length of Time on Duty		
			40. Engineers/ Operators 1			44. Engineer/Operator Hrs: 01 Mins: 30		
			41. Firemen 1			45. Conductor Hrs: 01 Mins: 30		
			42. Conductors 1					
			43. Brakemen 0					
Casualties to:			46. Railroad Employees 0			49a. Special Study Block A OTH		
Fatal			47. Train Passengers 0			49b. Special Study Block B 000-000-000		
Nonfatal			48. Others 0					
50. Latitude 38.160709			51. Longitude -85.749174					
52. Narrative Description (Be specific, and continue on separate sheet if necessary) Y19124 PULLING OUT OF L-YARD SIDE SWIPEQ Q21124 DEPARTING. DERAILING REAR 7 CARS OFF Q21124 ALONGWITH Y19124S ENGINE AND HEAD CAR.								
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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13. Nearest City/Town LOUISVILLE			14. Milepost (to nearest tenth) 0006.0			15. State Code Abbr. KY 21		
17. Temperature (F) (specify if minus) 85 °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		
21. Track Name/ Number EAST PULLBACK			22. FRA Track Class (1-9, X) 1			23. Annual Track Density (gross tons in millions) 0.00		
25. Type of Equipment Consist (single entry)			5. Single car			9. Maint./inspect. car		
28. Speed (recorded speed if available) R - Recorded 004 MPH E - Estimated			30. Type of Territory (enter codes that apply) Signalization (Mandatory) 1. Signaled 2. Not Signaled 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			26. Was Equipment Attended? 1. Yes 2. No Y		
29. Trailing Tons (gross tonnage, excluding power units) 0			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 3			27. Train Number/Symbol Y191		
31. Principal Car/Unit (1) First involved (derailed, struck, etc) CSXT008464			a. Initial and Number 001			b. Position in Train 000		
(2) Causing (if mechanical, cause reported)			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: 00 Drugs: 00		
34. Locomotive Units (Exclude EMU, DMU, and Cab Car Locomotives.)			35. Cars (Include EMU, DMU, and Cab Car Locomotives.)			33. Was this consist transporting passengers? (y/n) No		
(1) Total in Train 1			a. Head End			a. Freight		
(2) Total Derailed 1			b. Manual			b. Pass.		
			c. Remote			c. Freight		
			d. Manual			d. Pass.		
			e. Remote			e. Caboose		
36. Equipment Damage This Consist \$ 11,122			37. Track, Signal, Way, & Structure Damage \$ 38,759			38. Primary Cause Code H306		
40. Engineers/ Operators 1			41. Firemen			42. Conductors 1		
43. Brakemen			44. Engineer/Operator			45. Conductor		
Hrs: 05 Mins:			Hrs: 05 Mins:					
Casualties to:			46. Railroad Employees			47. Train Passengers		
Fatal 0			48. Others 0			49a. Special Study Block A		
Nonfatal 0			49b. Special Study Block B			OTH		
50. Latitude 38.160709			51. Longitude -85.749174			000-000-000		
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