

1. Name of Reporting Railroad CSX Transportation [CSX]			1a. Alphabetic Code CSX			1b. Railroad Accident/Incident No. 000178617		
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. 000178617		
4. U. S. DOT Grade Crossing Identification Number			5. Date of Accident/Incident month: 0 day: 9 year: 2018			6. Time of Accident/Incident 12:52 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) 79 °F			18. Visibility (single entry) Code 1. Dawn 3. Dusk 2. Day 4. Dark 4			19. Weather (single entry) Code 1. Clear 3. Rain 5. Sleet 2. Cloudy 4. Fog 6. Snow 1		
21. Track Name/ Number WEST 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 006 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 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 Code 1					
31. Principal Car/Unit (1) First involved (derailed, struck, etc) BNSF301182			a. Initial and Number 014			b. Position in Train 014		
(2) Causing (if mechanical, cause reported) TTGX994819			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.)			a. Head End			b. Mid Train		
(1) Total in Train 1			b. Manual 0			c. Remote 0		
(2) Total Derailed 0			d. Manual 0			e. Remote 0		
36. Equipment Damage This Consist \$ 0			37. Track, Signal, Way, & Structure Damage \$ 0			38. Primary Cause Code E35C		
40. Engineers/ Operators 1			41. Firemen			42. Conductors 0		
43. Brakemen			44. Engineer/Operator Hrs: 02 Mins: 22			45. Conductor Hrs: Mins:		
Casualties to:			46. Railroad Employees			47. Train Passengers		
Fatal 0			48. Others 0			49a. Special Study Block A CWR		
Nonfatal 0						49b. Special Study Block B 000-000-000		
50. Latitude 38.160709			51. Longitude -85.749174					
52. Narrative Description (Be specific, and continue on separate sheet if necessary) Q23706 DERAILED WHILE SHOVING BACK IN C02 DUE TO WORN AND DEFECTIVE CARRIER PLATE ON TTGX 994819 ANDRACKED Y39105 THAT HAD 22 CARS.								
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.								

RAIL EQUIPMENT ACCIDENT/INCIDENT REPORT

1. Name of Reporting Railroad CSX Transportation [CSX]			1a. Alphabetic Code CSX			1b. Railroad Accident/Incident No. 000178617		
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. 000178617		
4. U. S. DOT Grade Crossing Identification Number			5. Date of Accident/Incident month: 0 day: 9 year: 2018			6. Time of Accident/Incident 12:52 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) 79 °F			18. Visibility (single entry) Code 1. Dawn 3. Dusk 2. Day 4. Dark 4			19. Weather (single entry) Code 1. Clear 3. Rain 5. Sleet 2. Cloudy 4. Fog 6. Snow 1		
21. Track Name/ Number C YARD LEAD			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			26. Was Equipment Attended? 1. Yes 2. No Y		
28. Speed (recorded speed if available) R - Recorded 001 MPH E - Estimated			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			27. Train Number/Symbol Q237 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) 3,382			31. Principal Car/Unit			32. If any railroad employee(s) tested for drug/alcohol use, enter the number that were positive in the appropriate box.		
			a. Initial and Number TTGX994819			b. Position in Train 047		
			c. Loaded (yes/no) N			Alcohol 00		
			d. Loaded (yes/no) N			Drugs 00		
			33. Was this consist transporting passengers? (y/n) No					
34. Locomotive Units (Exclude EMU, DMU, and Cab Car Locomotives.)			a. Head End			b. Manual		
(1) Total in Train			3			0		
(2) Total Derailed			0			0		
36. Equipment Damage This Consist			37. Track, Signal, Way, & Structure Damage			38. Primary Cause Code		
\$ 84,059			\$ 9,349			E35C		
39. Contributing Cause Code			40. Engineers/ Operators			41. Firemen		
			1			1		
42. Conductors			43. Brakemen			44. Engineer/Operator		
1			1			Hrs: 01 Mins: 22		
45. Conductor			46. Railroad Employees			47. Train Passengers		
Hrs: 01 Mins: 22			0			0		
48. Others			49a. Special Study Block A			49b. Special Study Block B		
0			CWR			000-000-000		
50. Latitude 38.160709			51. Longitude -85.749174					

52. Narrative Description (Be specific, and continue on separate sheet if necessary)
Q23706 DERAILED WHILE SHOVING BACK IN C02 DUE TO WORN AND DEFECTIVE CARRIER PLATE ON TTGX 994819 ANDRACKED Y39105 THAT HAD 22 CARS.

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.