## DEPARTMENT OF TRANSPORTATION

RAIL EQUIP	MENT ACCIDE	NT/INCIDENT	REPORT

OMB	Approval	No:	2130-0500

FEDERAL RAILROAD	ADMINISTRATIO	N	KA	IL EQU	IPMEN	r accidi	ENT/INCI	IDE	NT REPO	KT			ON	1B Approval	No: 2130-0500	
1. Name of Reporting Ra	ilroad						1a. Alpha	ibetic C	Code			1b. Railı	oad Accident	Incident No.		
Illinois Central Railroad Company [IC] 2. Name of Other Railroad or Other Entity with Consist Involved						IC						985968				
2. Name of Other Railro		2a. Alphabetic Code				2b. Raili	2b. Railroad Accident/Incident No.									
3. Name of Railroad or C	try)		3a. Alphabetic Code					3b. Railr	oad Accident/	Incident No.						
Illinois Central Railroad Company [IC]							IC					98596	8			
4. U. S. DOT Grade Cros	sing Identification N	Jumber					5. Date of	of Acci	dent/Incident			6. Time	of Accident/I	icident		
4. 0. 5. DOT Glade elo.	ssing identification is	unioer						onth	day	yea				AM X	РМ	
7. Type of Accident/	1 Dec	ailment	1.5	ide collision		7 Harris and	0	1	2 9	losion-deto	019	5:30			Code	
Incident (single				aking collisi		<ol> <li>Hwy-rai</li> <li>RR grad</li> </ol>	•		1				(describe in)		Code	
Incident     (single     2. Head on collision       entry in code box)     3. Rear end collision				roken train c		9. Obstruct	e	0				narrative) 12				
8. Cars Carrying	9	9. HAZM	AT Cars		10. Cars R		11. People				12. Subo					
HAZMAT Damage						AZMAT		E	Evacuated							
18 Derailed			d	2 N/A				N/A				JOLI				
13. Nearest				14. Milepost (to			15. Stat	15. State Code 16. County			у	I ~ ~ ~				
City/					neare			obr.	1		_					
Town CHIC		18. Visibi	lity (single entry	0	Code 1	) 5.50 9. Weather (si	II		17	COOF	Code	20 Tur	of Track		Code	
(specify if minus)		18. VISIO 1. Da		9	Coue 1	1. Clear	3. Rain		5. Sleet		Code	1. Ma		ding	Coue	
(4) - 55 5	<b>10</b> <sup>o</sup> <sub>F</sub>	2. Da			1	2. Cloudy	4. Fog		6. Snow		6	2. Ya		dustry	2	
21. Track Name/	•			22.	FRA Track	Co	de 23. Ani	ual Tr	ack	•		24. Time	Table Direct	ion	Code	
Number					Class (1-9, X)		De	ensity	(gross tons 15)			1. No				
TRACK GL08	1. Parishtania		5 Circle	0 Maint for		1	in					2. So			2	
25. Type of Equipment Consist	<ol> <li>Freight train</li> <li>Passenger train-I</li> </ol>		<ol> <li>Single car</li> <li>Cut of cars</li> </ol>	9. Maint./in A. Spec. M	-	D. EMU E. DMU		20	<ol><li>Was Equipmer Attended?</li></ol>	ıt		27	Train Numbe	r/Symbol		
(single entry)	<ol> <li>Commuter train-</li> </ol>		7. Yard/switching	-			Code		1. Yes	2. No	1 0	Code R9	16			
	4. Work train	U	8. Light loco(s).		ter Train-Pushi		7					Y				
28. Speed (recorded sp	eed	Coc	le 30. Type of	Territory	(enter codes	s that apply)						30a. Rei	notely Contro	lled Locomo	tive?	
if available)				on (Manda	• ·			2						Not a remotely controlled operation		
R - Recorded	002 MPH	E	1. Signaled		Signaled								Remote contr	•		
E - Estimated 29. Trailing Tons (gr	oss tonnage,	E		*	•	lovement (Ma		5 nite					2 = Remote control tower operation 3 = Remote control portable transmitter -			
excluding power un			-			in Control 3. Yard/Restricted Limits Other Than Main Track						more than one remote				
01	, 				Codes (Mand						con	control transmitter Code				
		0	* Mandator	y to the exte	nt that all appl	icable codes are	entered								0	
31. Principal Car/Unit		a. Initial	and Number	b. Positio	on in Train	c. Load	ed (yes/no)		32. If any railro	ad employe	ee(s) tes	ted for drug/a	lcohol use, en	ter the numb	er that	
(1) First involved						were positive in the appropriate					te box.	e box. Alcohol Drugs				
(derailed, struck, etc	c)															
(2) Causing (if mechanical,		G	GATX032327		027		Y	Y 33.Was this consist tran		sist transp	rting n	assengers ?	(v/n)	00	00	
cause reported)	containiotai,			000		55. was this consist transport			nung p	issengers :	(),)		No			
34. Locomotive Units		a. Head	Mid	Re	Rear End		35. Cars			L	oaded	En	npty			
(Exclude EMU, DMU, ar	nd Cab Car	End	b. Manual	c. Remote							a. Freight b. Pass.		c. Freight	d. Pass.	e. Caboose	
Locomotives.)							Locomotives.)									
(1) Total in Train		1	0	0	0	0	(1) Total in Equipment Consist			23	0	5	0	0		
(2) Total Derailed		0	0	0	0	0	(2) Total Derailed		0	0	0	0	0			
36. Equipment Damage			37. Track, Signal,	Way,			38. Primary 0	Cause				39. Contribu	ting Cause			
This Consist	\$ 21.797	7	& Structure D	amage	\$	64	Code		1	H318		Code	Í	н	302	
			f Crew Members								gth of T	ime on Duty		1	.502	
40. Engineers/	41. Firemen		42. Conductors		43. Brakemen		44. Engineer/Operato		ator		-	45. Conduct	or			
Operators 1			1				Hrs: 02		02 Mins: 30			Hrs:	02	Mins:	30	
	46 Dellas d Escala				49. Others					50	401				50	
Casualties to:	46. Railroad Emplo	oyees	47. Train Passenge	rs	48. Others		49a. Special	Study I	BIOCK A		490	. Special Stud	IY BIOCK B			
Fatal	0		0			0										
Nonfatal	0		0			0	ОТН				00	0-000-000				
0			0			0										
50. Latitude 41.804503						51. Longitud	e				-87.78	80161				
52. Narrative Descriptior YARD JOB, R91691-2 IN THE FOUL. THEY	9, WAS IN THE P	ROCESS		WITCHING	G OPERATIO									LLED ANI	D WERE LEF	
53 Typed/Printed Name &													55 Data			
53. Typed/Printed Name &					5.	<ol> <li>Signature</li> </ol>						55.	55. Date			
Title of Preparer NOTE: This report is part of the reporting railroad's accident report pursuant to								-		//1 -						
	-									"be admi	tted as	evidence o	r used for ar	y purpose	ın 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																
This collection of infor ime for reviewing inst																
matter of public record																
nformation unless it d	isplays a currently	valid O	MB control num	ber. The O	MB control r	number for th	is collection i	is 213	0-0500.	-		_				