FEDERAL RAILROAD 1. Name of Reporting Ra		ION		RA	L EQU	JIPME	NT AC	CCIDE			NT REPO	RT		1h Railro	ad Acci			No: 2130-0500
. •								1a. Alphabetic Code					1b. Railroad Accident/Incident No.					
North County Transportation District- Coaster [NCTC] 2. Name of Other Railroad or Other Entity with Consist Involved								_	NCTC 2a. Alphabetic Code					FY2013470 2b. Railroad Accident/Incident No.				
									'		Code					identi interde	1 10.	
Amtrak (National 3. Name of Railroad or C					(single er	itrv)			ATI 3a. Ali		Code			3b. Railroa		dent/Inciden	t No.	
							3a. Alphabetic Code					3b. Railroad Accident/Incident No.						
North County Tra				ter [NCTC]					NC'	_	eident/Incident			6. Time of		ent/Incident		
4. U. S. DOT Grade Cro	ssing Identification	n Numbe	er	1						month	day	year				ı	_	v
				02681					0	4	0 2	202		4:55		AM l		PM X
7. Type of Accident/ Incident (single		Derailme Head on	ent collision		de collision king collisi			Hwy-rail RR grade	_		_	losion-detona /violent ruptu		13. Ot	her describe	a in)		Code
entry in code box)			collision		oken train o			Obstructi	-			er impacts			arrative			07
8. Cars Carrying		9. HA	ZMAT C	ars			s Releasii	ng			People			12. Subdiv	vision			
HAZMAT Damaged/					H	HAZMAT			Evacuated									
N/A Derailed					N/A			15.0		N/A			SAN DIEGO					
13. Nearest City/						14. Mil	epost arest	(to	15. 8	State Abbr.	Code	16. County						
	NSIDE						nth)	228.0		CA.	06	SAN DI	EGO					
17. Temperature (F)		18. V	isibility	(single entry))	Code	19. We		igle entry)				Code	20. Type o	of Track	k		Code
(specify if minus)	65 °F		I. Dawn	3. Dusk	1	•		Clear	3. Rain		SleetSnow			1. Maii		3. Siding		
21. Track Name/	65 F		2. Day	4. Dark	22.	FRA Track		Cloudy Coo	4. Fog de 23. A	Annual T			1	2. Yard 24. Time		4. Industry Direction		Code
Number						Class (1-9,		1						1. Nort		3.East		1
MAIN TRACK #					0.341			5		in millio	(gross tons	11.03		2. Sout		4. West		3
25. Type of Equipment Consist	Freight train Passenger tra	in-Pullin		-	Maint./irA. Spec. V	nspect. car IoW Equip.		D. EMU E. DMU			26. Was Equipmer Attended?	ıt		27.1	Irain N	umber/Syml	юl	
(single entry)	3. Commuter tr		_		-	er Train-Pus			Cod	le	1. Yes	2. No	Co	ode				
	4. Work train		8. Li	ight loco(s).	C. Commu	ter Train-Pu	shing											
28. Speed (recorded speed Code 30. Type of Territory (enter codes that apply)														ontrolled Lo				
if available) R - Recorded Signalization (Mandatory) 1. Signaled 2. Not Signaled								1					0 = Not a remotely controlled operation 1 = Remote control portable transmitter					
E - Estimated 000 MPH Method of Operation/Authority for Movement (Man						ndatory) 1						2 = Remote control tower operation						
	oss tonnage,			1. Signal In							iti Ti Ct-	1				control porta	ıble tra	insmitter -
excluding power un	its)			4. Block Re Supplement	-	•		ın Main Tr *)	аск		itive Train Conti affic Control Sys				than or	ne remote smitter		Code
		0)	* Mandatory	-				entered		cial Instructions							
31. Principal Car/Unit		a. In	nitial and l	Number	b. Positio	on in Train		c. Loade	ed (yes/no)	32. If any railro	ad employee	s) teste	ed for drug/alc	cohol us	se, enter the	numbe	r that
(1) First involved									were pos		were posit	itive in the appropriate b		e box.		Alcohol	\perp	Drugs
(derailed, struck, et	c)					000												
(2) Causing (if m	echanical,					000					33.Was this cor	sist transport	ing pas	ssengers ? ()	y/n)			
cause reported)						000												
34. Locomotive Units (Exclude EMU, DMU, and Cab Car End				Mid T	Rear End d. Manual e. Remote			35. Cars (Include EMU, DM		MU, and Cab Car a. Fre		Loaded reight b. Pass.		Empty c. Freight d. Pass.		Dace	e, Caboose	
Locomotives.)	nd Cab Car		end	b. Manual	c. Remote	d. Mani	iai e.	Remote	Locomot		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a. 1	icigiit	0. 1 ass.	0.110	Agint d. i	ass.	c. Caboosc
(1) Total in Train			0	0	0	0		0	(1) To	otal in Ec	quipment Consist		0	0	0		0	0
(2) Total Derailed			0	0	0	0		0	(2) To	otal Dera	niled		0	0	0		0	0
36. Equipment Damage			37.	Track, Signal, V	Vay,				38. Primai	y Cause				39. Contributi	ing Cau	se		
This Consist	\$,		& Structure Da	mage	\$	14,234	1	Code		I	M307		Code		I		
	Ψ (ber of Cre	w Members									of Ti	ne on Duty				
40. Engineers/	41. Firemen		42. 0	Conductors		43. Braken	nen		44. Engine	eer/Opera	ator			45. Conductor	r			
Operators 0				0					Hrs:		Mins:			Hrs:		M	lins:	
Casualties to:	46. Railroad En	Railroad Employees 47. Tr				48. Others		49a. Special Study Block A				49b.	Db. Special Study Block B					
Fatal	0			0		0												
Nonfatal	0			0		0			CWR									
50. Latitude 33.173876							51. Longitude -117.364384											
52. Narrative Description	(Be spec	fic, and	continue o	on separate shee	t if necessa	ry)												
AMTRAK 580 STRUG	CK A VEHICL	E AT CA	ASSIDY	ST. HIGHWA	Y GRADE	E CROSSIN	NG.											

53. Typed/Printed Name &		55. Date
Title of Preparer	54. Signature	

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 ime 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 natter 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 nformation unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.