FEDERAL RAILROAD	ADMINISTRA	ATION		RA	IL EQU	<u>IPMEN</u>	IT AC	CIDE	NT/INC	IDE	NT REPO) <u>RT</u>				OMB Approval No: 2130-0500					
1. Name of Reporting Ra								1b. Railroa	b. Railroad Accident/Incident No.												
Norfolk Southern															135316						
2. Name of Other Railro	2. Name of Other Railroad or Other Entity with Consist Involved											2a. Alphabetic Code						2b. Railroad Accident/Incident No.			
3. Name of Railroad or C	3. Name of Railroad or Other Entity Responsible for Track Maintenance (single entry)											3a. Alphabetic Code 3b						Bb. Railroad Accident/Incident No.			
Norfolk Southern	Railway C	ompany	y [NS]						NS						135316						
4. U. S. DOT Grade Cros																Accident/Inc	ident				
	-								0	0 8 2 9			year 2019		3:42	A	м	$_{\mathrm{PM}}$ X			
7. Type of Accident/ 1. De					ide collision	7. Hwy-rail cr			_	ossing 10. Explosi			tonation	n	13. Oth		Code				
			n collision nd collision		aking collision roken train co	-			-	-			-		(describe in) narrative)			Δ1			
8. Cars Carrying			AZMAT Ca		10. Cars Releasing			on	11. People			S		12. Subdivision			01				
HAZMAT			Damaged/			HAZMAT				Evacuated											
N/A		D	Derailed		N/A	N/A				N/A				ILLINOIS							
13. Nearest						14. Milepost (to			15. State		Code	Code 16. County									
City/ Town WEN1	TZVILLE					nearest tenth) S042				Abbr. ¶O	29	29 ST CHARLES									
17. Temperature (F)	LITELL	18.	Visibility	(single entry))	Code 19. Weather (si							Cod		20. Type of Track			Code			
(specify if minus)	86 ° F		1. Dawn	3. Dusk		_	1. Cl		3. Rain		5. Sleet	1	2		1. Main		-				
21. Track Name/	86 г		2. Day	4. Dark	22. F	2 2. Cloudy 22. FRA Track Co			4. Fog de 23. Ar	4. Fog 6. Snow 23. Annual Track					2. Yard 4. Industry 2 24. Time Table Direction Code						
Number						Class (1-9, X)									1. North	1					
EAST END LEAD			5.01		2 3 5 Jul Co.		1		iı	n million	ns)	0.0	00		2. South 4. West			4			
25. Type of Equipment Consist	Freight trai Passenger			-	Maint./insjA. Spec. Mo	-				20	6. Was Equipm Attended?	ent		27. Train Number/Symb			/Symbol				
(single entry) 3. Commuter train-Pulling 7. Yard/switching B. P.					B. Passenger C. Commuter	Train-Pusl		Code 1	,	1. Yes 2. No Code Y				D991	D						
28. Speed (recorded speed Code 30. Type of Territory (enter codes that apply)															tely Controll						
if available) R - Recorded				Signalization 1. Signaled	on (Mandate d 2. Not S				0 = Not a remotely controlled operation 1 = Remote control portable transmitter												
E - Estimated	004	MPH	R	_	Operation/Au	-	Movement	t (Man	udatory)	5						emote contro	-				
	oss tonnage,			_	ndication 2.1							T				3 = Remote control portable transmitter -					
excluding power un	its)			I	egister Territo tal/Adjunct Co	•	other Than I	Main Tra	ack	K-Rest	tricted Speed	or Equivai	ent		more than one remote control transmitter Code						
		y to the extent			entered						0										
31. Principal Car/Unit		a. I	Initial and N	Number	b. Position	in Train		c. Loade	ed (yes/no)	(yes/no) 32. If any railroad employee(s) t				tested fo	sted for drug/alcohol use, enter the number that						
(1) First involved					T					_	were pos	were positive in the appropriate be				box. Alcohol					
(derailed, struck, etc	2)		SOO!	516386	16386		021		Y												
(2) Causing (if me	echanical,			710000	+				33.Was this consist tra			sporting	passen	gers ? (y/n)							
cause reported)		+				000			25.0					* dari		E		No			
34. Locomotive Units (Exclude EMU, DMU, and Cab Car Locomotives.)			Head End	Mid Train b. Manual c. Remote		Rear End d. Manual e. Ren		.emote	35. Cars (Include EMU, DM Locomotives.)		MU, and Cab C	MU, and Cab Car a. Fre		Loaded ight b. Pass.		Emp c. Freight	pty d. Pass.	e. Caboose			
(1) Total in Train			1	0 0		0	0		(1) Tot	tal in Eq	quipment Consi	oment Consist 57			0	2	0	0			
(2) Total Derailed		$\overline{}$	0	0	0	0		0		(2) Total Derailed			7		0	0	0	0			
36. Equipment Damage			37. T						38. Primary Cause				39.	Contributir							
This Consist	\$ 13	8,666		& Structure Da	amage \$	\$	3,683		Code			M405		'	Code	1					
			nber of Cre	ew Members							Length of Time			Time c	e on Duty						
40. Engineers/ Operators	41. Firemer	41. Firemen		42. Conductors		43. Brakemen			44. Engineer/Operator Hrs: 02 Mins:			s: 4	12	45.	Conductor Hrs:	02	Mins:	42			
Casualties to:	46. Railroad Emplo		oyees 47. Train Pass		rs 4	18. Others	8. Others			49a. Special Study B		-			pecial Study Block B						
Fatal	0			0		0			CWR		000-00										
Nonfatal	fatal 0		0			0			CVIR						VV UVV						
50. Latitude				38.809845					51. Longitude						-90.810	-90.810653					
	52. Narrative Description (Be specific, and continue on separate sheet if necessary) NS TRAIN D99D729 SHOVING WEST ON THE EAST LEAD AT WENTZVILLE YARD DERAILED 7 CARS, 21ST HC CAR SOO 516386 (R1 AND R2 WHEELS), 22ND HC TTGX 255032 (A AND B ENDS), 23RD HC TTGX 160518 (R1 - R4 WHEELS), 24TH HC TTGX 852882(L1 AND L2 WHEELS), 26TH HC 9644205 (L3-L4, R-3, R4 WHEELS), 27TH HC 990323 (A&BENDS) AND 28TH HC 971492																				
53. Typed/Printed Name	&														55. D	ate					

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.