OMB Approval No: 2130-0500	
dent/Incident No.	I

FEDERAL KAILKUAD		<u>` </u>	<u>KAI</u>	IL EQU	II IVII	TI AC	CIDE				<u> </u>				и ь Арргоvа		
1. Name of Reporting Ra	ilroad							1a. Alpha	ıbetic C	ode			1b. Railı	road Accident	Incident No.		
PACIFIC HARBO		PHL						062301									
2. Name of Other Railro		2a. Alpha	ibetic C	ode		2b. Raili	road Accident	Incident No.									
				(single ent													
Name of Railroad or C		3a. Alpha	ibetic C	ode			3b. Railre	oad Accident/	íncident No.								
PACIFIC HARBO		PHL						062301									
4. U. S. DOT Grade Cros				lent/Incident			6. Time	6. Time of Accident/Incident									
				0	onth	$\begin{vmatrix} 2 & \text{day} \\ 2 & 3 \end{vmatrix}$	year 20	020 2:45 AM			$_{\mathrm{PM}}$ X						
7. Type of Accident/	1. Der	railment	4. Sic	de collision		7. J	Hwy-rail				losion-deton		13. (Other		Code	
Incident (single		ad on collision		aking collisio			RR grade	-		_	violent rupt			(describe in)			
entry in code box) 3. Rear end collision 6. Broken train collision						9. 0	.on	*			narrative) 12. Subdivision			01			
8. Cars Carrying	* *					rs Releasing		11. People					livision				
HAZMAT Damaged/ Derailed					HAZMAT			Evacı		acuated							
N/A				N/A	N/A			15 540	N/A				ALAMEDACORRIDOR				
13. Nearest City/					14. Mile	lepost (te earest	0	15. State	te bbr.	Code	16. County						
	NGELES					nth)	19.4	CA		06	LOS A	NGEI	LES				
17. Temperature (F)		18. Visibility	(single entry)	,	Code			ngle entry)				Code		e of Track		Code	
(specify if minus)	0	1. Dawn					Clear	3. Rain		5. Sleet	1		1. Ma		iding	1	
21 m 1.31/	76 ° F	2. Day	4. Dark		ED A Trook		Cloudy	4. Fog	1 Tax	6. Snow		1	2. Ya		ndustry	Code	
21. Track Name/ Number					FRA Track Class (1-9, 2		Cod						24. Time 1. No	e Table Direct orth 3.Ea		Code	
2				'	_lass (1 /, .	Λ)	1	in	million ((gross tons s)			2. So			3	
25. Type of Equipment	1. Freight train	5. 5	Single car 9	9. Maint./ins	spect. car	Г	D. EMU			. Was Equipmer	ıt			. Train Numbe			
Consist	2. Passenger train-F	-		A. Spec. Mo			E. DMU	Codo		Attended?		_	VI				
(single entry)	3. Commuter train-		Yard/switching I					Code 1		1. Yes	2. No		Juc	PEV			
28. Speed (recorded sp	4. Work train	8. 1 Code	1	C. Commute		ishing odes that app	I ₂ ,)					1 -	Y 30a Rer	notely Contro	Had Locomo		
28. Speed (recorded sp if available)	eea	Coue	30. Type of T Signalization			les tnai ap _f	pty)						1	Not a remotel			
R - Recorded			1. Signaled		Signaled			2	2				I	Remote contr		-	
E - Estimated	008 MPH	R	Method of O		-	Movemer	at (Mar	ndatory) !	5				I	Remote contr	-		
29. Trailing Tons (gr	ross tonnage,		_					l/Restricted Lin					3 =	Remote contr	ol portable tr	ransmitter -	
excluding power un	its)		1	egister Territ	-			ack I	K-Resti	ricted Speed or	Equivalent			re than one rei		1 .	
	1	1,940	Supplementa					_					con	trol transmitte	er	Code	
		<u> </u>	* Mandatory	_					—				<u> </u>			0	
31. Principal Car/Unit (1) First involved		a. Initial and	Number	b. Position	on in Train		c. Loade	ed (yes/no)	-	32. If any railro	ad employee ive in the ap		-		cohol		
(derailed, struck, et	c)						ı			were posic	.ve iii tiic ap	ргорна	.e box.	Ai	COHOI	Drugs	
(40,400,	-)	DTT	X721548		002		ı	Y									
(2) Causing (if m	echanical,						1			33.Was this consist transporting passes			ssengers ?	(y/n)			
cause reported)		<u> </u>			000											No	
34. Locomotive Units		a. Head	Mid Ti		1	Rear End		35. Cars	ATT DA	MU, and Cab Ca	_		aded	En c. Freight	npty	Chann	
(Exclude EMU, DMU, as Locomotives.)	ıd Cab Car	End	b. Manual	c. Remote	d. Manua	al e. R	Remote	Locomotives		IU, anu Cao Ca	i a	Freight	b. Pass.	c. Freight	d. Pass.	e. Caboose	
(1) Total in Train		1	0	0	0) 0		(1) Total in Eq		quipment Consist		33	0	0	0	0	
							-	(2) Total Derail						+	1	+	
(2) Total Derailed		0	0	0		0	` '		ed 1			0	0	0	0		
36. Equipment Damage This Consist		37.	'. Track, Signal, W					38. Primary C Code	Cause				ContributionCode	iting Cause			
This Consist	\$ 5,000		& Structure Dar	nage	\$	38,000	'	Code		H995							
		Number of Cr					'				Leng		me on Duty				
40. Engineers/	41. Firemen	42.	. Conductors	4	43. Brakeme	.en	,	44. Engineer/	Operate	or			45. Conduct	or			
Operators 1			1				'	Hrs:	05	Mins:	15		Hrs:	05	Mins:	15	
Casualties to:	46. Railroad Emplo	oyees 47	. Train Passengers	s	48. Others			49a. Special	49a. Special Study Bl			49b.	. Special Stud	dy Block B			
Fatal		·		-+													
Fatai	·atai 0		0			0	'	CWR	CWR			000	000-000-000				
Nonfatal 0			0	0 0				0000									
50. Latitude 33.752424						51. Longitude						-118.2	<i>E</i> 7913				
52. Narrative Description	(Pa specific	J continue	e on separate sheet										-110.=	3/013			
CREW MADE COUPLIN COUPLING (1.8 MPH) A' AXLE HAD BEEN DERA RAIL, AND AFTER ABO SWITCH, THE DERAILE SWITCH. CAR DEPART WHEN THE JACKS WEI	G LIGHT POWER TO I THECENTER BREA ILED TO THE NORT UT 60 FEET FORCEI D TRUCK IMPACTE MENT STATED THE	O LOADING T AK, CREW PU IH FROM THE D THE WEST V ED THE SOUTI EY HAD JACK	TRACK 2 AT EAST ULLED EAST 815 I E VERYPOINT WI WHEEL OF TRUC 'H RAIL ON LOAD	T END. DOV FEET BEFOO HEN CREW CK TO JUMI DING YARD	WNLOAD IN ORE STOPPE V FIRST COU IP OVER TH O 3, KNOCKE	PING FROM OUPLED TO HE RAIL AN ING IT SEV	M AN EME O TRACK. AND DERA VERELY (ERGENCY APF K. WHEN PULL AIL TO THE NO OUT OF LINE	PLICAT LING EA ORTH A E AND E	TION OF THE AL AST, THE DERA AS WELL. UPOL VENTUALLY R	IR BRAKES. ILED WHEI N LEAVING E-RAILED T	MARK EL BEG THE AS THE NO	KS IN PAVEM AN MOVING SPHALT ANI ORTH WHEE	MENT INDICA FURTHERTO D APPROACH LS AT THE FF	TE EAST WE O THE NORT IING THE TH ROG OF THE	HEEL OF #3 I'H AWAY FRO! HREE E THREE	
53. Typed/Printed Name	Ŷr												55	Date			
**	&				ļ	54. Signat	ature						35.	55. Date			
Title of Preparer												4.1	idonoo o	- 13		,	
	and in most of the r	amorting rai	"lecad's accident					meta atatuta at	-4 000	and chall not					TT MITTENAGE		
	oort is part of the r n for damages gro						-				"be admit	ted as	evidence o	r used for ai	ny purpose	in any suit	

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.