DEPARTMENT OF				II. EOU	IPMEN	T AC	'CIDE	NT/INCI	DEN	IT REPOI	QТ			OM	R Approval	No: 2130-0500	
FEDERAL RAILROAD ADMINISTRATION RAIL EQUIPMENT ACCIDEN 1. Name of Reporting Railroad								1a. Alphabetic Code					1b. Railroad Accident/Incident No.				
								TEXR					2020012				
Tex Rail [TEXR] 2. Name of Other Railro	ad or Other Entity v	with Consist	Involved						2a. Alphabetic Code				2b. Railroad Accident/Incident No.				
3. Name of Railroad or C	Other Entity Respons	sible for Trac	ck Maintenance	(single entr	ry)			3a. Alpha	betic Co	ode			3b. Railroa	3b. Railroad Accident/Incident No.			
Tex Rail [TEXR]	· -							TEXR					202001	2020012			
	. X1 ('C'('1								5. Date of Accident/Incident					Accident/Inc	cident		
4. U. S. DOT Grade Cros	ssing Identification i	Number	1						onth	day	year				., 🖂	PM X	
7 T (A	1 D	7	74830				77	1	2	2 4		20	2:53		М		
7. Type of Accident/ Incident (single		erailment ead on collision		de collision aking collision	nn,		Hwy-rail RR grade	-			osion-detona violent ruptu		13. Oth	er escribe in)		Code	
entry in code box)		ar end collisi		oken train co			Obstruction			12. Othe		ne		irrative)		07	
8. Cars Carrying		9. HAZMAT				Releasing	g		11. Pe	•		12. Subdiv	ision				
HAZMAT		Damaged					HAZMAT			Evacuated							
N/A		Derailed		N/A	N/A				N/A				TEXRAIL				
13. Nearest					14. Milep		to	15. Stat		Code	16. County						
City/ Town GRAP	PEVINE				near tenti		31.15	T	obr.	48	TARRA	ANT					
17. Temperature (F)		18. Visibilit	ity (single entry))				igle entry)		10		Code	20. Type of	f Track		Code	
(specify if minus)	0	1. Daw		1			Clear	3. Rain		5. Sleet	1		1. Main			1	
21 M 1 M	50 ° F	2. Day	4. Dark	22.1	2	2. 0	Cloudy	4. Fog	1	6. Snow		1	2. Yard			1	
21. Track Name/ Number				I	FRA Track Class (1-9, X	X)	Cod		nual Trac ensity				24. Time T	able Direction 3.Eas		Code	
MAIN							4	in	millions (§	gross tons s)			2. South			4	
25. Type of Equipment	1. Freight train		-	9. Maint./insp	_		D. EMU			Was Equipmen	ıt		27. Train Number/Symbol				
Consist	Passenger train- Commuter train	-		A. Spec. Mo			E. DMU	Attended? Code 1. Yes 2. No 1 Cod				de TEXR					
(single entry)	Commuter train Work train	-		B. PassengerC. Commuter		-		E		1. res	2. No	Y					
28. Speed (recorded sp		Code			(enter code		pply)							tely Controll	ed Locomot	tive?	
if available)		1	I	on (Mandate				1						ot a remotely		-	
R - Recorded	055 MPH	ı E	1. Signaled		-	* f	· /M							emote contro	•		
E - Estimated 29. Trailing Tons (gro	oss tonnage,			Operation/Au dication 2. I	-			(Restricted Lin	1 nits				1	emote contro emote contro			
excluding power un	-		1 -	egister Territo			n Main Tra								-		
		0		al/Adjunct Co				Q-Traffic Control System/CTC					control transmitter Code				
			•	y to the extent		plicable c	1						<u> </u>			0	
31. Principal Car/Unit (1) First involved		a. Initial ar	and Number	b. Position	on in Train c. Loaded							aployee(s) tested for drug/alc the appropriate box.		Alcohol Alcohol		er that Drugs	
(derailed, struck, etc	c)									were positive		. in the appropriate box.		JA. Alcohol		Diugo	
	,	TE	XR000105		001			Y									
	echanical,	T	_	T	000			33.Was this consist transporting			ting passe	g passengers? (y/n)			I 17-0		
34. Locomotive Units		771	Mili			2 . P. 4		25 Core				Load	lad	Em	ntsy	Yes	
(Exclude EMU, DMU, ar	nd Cab Car	a. Head End	Mid T b. Manual	rain c. Remote	d. Manua	Rear End al le. R	Remote	35. Cars (Include EM	ИU, DM	IU, and Cab Car	a. J	Freight	b. Pass.	c. Freight	d. Pass.	e. Caboose	
Locomotives.)			0.1		u		XCII.O.	Locomotive	s.)								
(1) Total in Train		0	0	0	0		0	(1) Total	in Equi	ipment Consist		0	1	0	0	0	
(2) Total Derailed		0	0	0	0		0	(2) Total	Deraile	ed		0	0	0	0	0	
36. Equipment Damage		3	37. Track, Signal, W						38. Primary Cause 39					ng Cause			
This Consist	\$ 26,20	.n	& Structure Da	amage \$	\$	1,000		Code		I T	M399		Code	1	М	1399	
1			Crew Members									h of Time	e on Duty			.377	
40. Engineers/	41. Firemen	4	42. Conductors	4	43. Brakeme	en		44. Engineer/	Operato	or		45	5. Conductor				
Operators 1			1					Hrs:	05	Mins:	38		Hrs:	05	Mins:	38	
Casualties to:	46. Railroad Emple	ovees 4	47. Train Passengers	s 2	48. Others			49a. Special S				49b. S	special Study				
									470. Special Study Block A 470				J-000-000				
Fatal	0		0		0			CWR 000-				000-					
Nonfatal 0		0			0												
50. Latitude 32.			32,92657	2.926576				51. Longitude				-97.106	-97.106847				
52. Narrative Description	1 (Be specific	and contin	ue on separate shee		ν)												
A BOX TRUCK PASS UNABLE TO STOP A										ONT OF THE	APPROAC	HING T	FRAIN. THI	E WESTBO	UND TRA	IN WAS	

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

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.