DEPARTMENT OF			N	DAI	T FOI	IDMEN	ፕ 	TOF	NT/INCI	nen	т D БРО	рт			ON.	MB Approval	No. 2130-0500	
FEDERAL RAILROAD ADMINISTRATION RAIL EQUIPMENT ACCIDE 1. Name of Reporting Railroad								יקו לודי	1a. Alphabetic Code					OMB Approval No: 2130-0500 1b. Railroad Accident/Incident No.				
TRINITY RAILW		e itreei							TRE				20002					
2. Name of Other Railroa			t Involv	ed			-		2a. Alphabetic Code				2b. Railroad Accident/Incident No.					
3. Name of Railroad or O	ther Entity Respons	sible for Tr	ack Mais	ntenance	(single ent	ry)			3a. Alphal	etic Co	de			3b. Railroad Accident/Incident No.				
TRINITY RAILW	VAY EXPRESS	<u> 5 [TRE]</u>							TRE				20002					
4. U. S. DOT Grade Cros	ssing Identification 1	Number							Date of Accident/Incident month day year				6. Time of	f Accident/In	_			
				598338					0	1	2 8	202	20	7:35		AM X	РМ	
7. Type of Accident/		erailment	-1		4. Side collision 7. Hwy-r								13. Ot			Code		
Incident (single entry in code box)		ead on collis ear end colli			5. Raking collision 8. RR grad 6. Broken train collision 9. Obstruc								re		describe in) arrative)		07	
8. Cars Carrying	9. HAZMAT Cars				10. Ca			0. Cars Releasing			11. People			12. Subdiv				
HAZMAT		Damage Deraile				HAZ	HAZMAT			Evacuated								
N/A 13. Nearest					N/A	14 Miles	N/A 14. Milepost (to			70 15. State Code 16. County				SYSTEM				
City/						1 .	nearest (10			Abbr.								
	WORTH					tenth		13.17	TX		48	TARRA						
17. Temperature (F) (specify if minus)		18. Visibil	•	(single entry) 3. Dusk		Code	19. Weather		gle entry) 3. Rain		5. Sleet		Code	20. Type of 1. Main		dino	Code	
(specy) y	53 ° F	2. Day		4. Dark		1	2. Clo		4. Fog		6. Snow		2	2. Yard		dustry	1	
21. Track Name/						FRA Track	-	Code			k			1	Table Directi		Code	
Number MAIN TRACK					'	Class (1-9, X	.)	5	Density (gross tons in millions)					1. North 3.East 2. South 4. West 3				
25. Type of Equipment	1. Freight train		5. Single		9. Maint./ins	•		EMU			Was Equipmen	nt			Γrain Numbe			
Consist (single entry)	Passenger train-l Commuter train-	-	6. Cut o		A. Spec. Mo			DMU	Code		Attended? 1. Yes	2. No	Co	ode TRI	E			
(single entry)	Commuter train- Work train	_		_	U	er Train-Pushi er Train-Push	_		C		I. res	2. 100		Y	-			
28. Speed (recorded spe	eed	Cod		30. Type of T			es that appl	ly)	_ ·						lled Locomot			
if available)				Signalization					1 0 = Not a remotely controlled operation 1 = Remote control portable transmitter								-	
R - Recorded E - Estimated 047 MPH R 1. Signaled 2. Not Signaled Method of Operation/Authority for Movement (Mand																		
29. Trailing Tons (gross tonnage, 1. Signal Indication 2. Direct Train Control 3. Yard/Res																		
excluding power uni	ts)			 Block Reg Supplementa 	-	tory 5. Off Codes (Mana	ther Than M ndatory*)	1ain 11a	rack Q-Traffic Control System/CTC					more than one remote control transmitter Code				
		178				nt that all app		les are e	ntered					<u> </u>			0	
31. Principal Car/Unit		a. Initial	and Nur	mber	b. Positio	on in Train	c.	. Loaded	d (yes/no)	3	32. If any railro			_	1			
(1) First involved (derailed, struck, etc.	c)								were positive in			tive in the app	appropriate box. Alcohol			ohol	Drugs	
		T	RE001	1007		001			Y									
	echanical,					000				3:	33.Was this cor	nsist transport	ing pas	sengers? ()	y/n)		Yes	
34. Locomotive Units		a. Head	\neg	Mid Tı	rain 'rain		Rear End	\neg	35. Cars				Loa	aded	En	npty	103	
(Exclude EMU, DMU, an	ıd Cab Car	End	b.		c. Remote	d. Manual		mote			U, and Cab Ca	ar a. F	reight	b. Pass.	c. Freight	d. Pass.	e. Caboose	
Locomotives.)		+-	+			+	+				pment Consist			-		-	+ 0	
(1) Total in Train		1	+	0	0	0	0	-	. ,				0	3	0	0	0	
(2) Total Derailed		0	27 Tra	0 ack, Signal, W	O Jav	0	0	_	(2) Total 38. Primary C		d		0	0 39. Contributi	0	0	0	
36. Equipment Damage This Consist			l .	Structure Dar		\$	1,500		Code	ause	1	. = 5.6.4		Code Code	ng Cause			
	\$ 13,878	Number of	of Crew I	Members		•		-+				M304 Length	h of Tir	me on Duty		M	303	
40. Engineers/	41. Firemen			nductors	\Box	43. Brakemer	n		44. Engineer/0	Operator	r			45. Conductor	r			
Operators 1	İ		ł	1					Hrs:	03	Mins:	30		Hrs:	03	Mins:	30	
Casualties to:	46. Railroad Emplo	oyees	47. Tra	ain Passengers	,	48. Others			49a. Special Study Block A				49b.	49b. Special Study Block B				
Fatal	0			0		0			- CWR 000-									
Nonfatal	0			0		1							0-000-000					
50. Latitude 32.762426								51. Longitude				-97.301755						
52. Narrative Description	(Be specific	, and conti	nue on s	separate sheet		ry)												
AT APPROXIMATEL TRACK AT THE CRO THE SEMI TRAILER	OSSING AND WA	AS STRUC	CK. TH	IE DRIVER	OF THE T	TRUCK WA	AS NOT IN	NJURE	D. THIRD P.	ARTY	VEHICLE T							

3. Typed/Printed Name &		55. Date
Title of Preparer	54. Signature	
NOTE. This report is part of the reporting railroad's accident report pursuant to t	he accident reports statute and, as such shall not "be admitted as evidend	e or used for any nurnose 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.