FEDERAL RAILROAD	ADMINISTRAT	ΓΙΟΝ		RA	IL EQU	JIPMEN	NT AC	CCIDE	ENT/INC	IDEN	IT REF	POR	T				OMB Ap	proval !	No: 2130-0500		
1. Name of Reporting Ra	ilroad								1a. Alph						1b. Rail	road Accide	ent/Incide	nt No.			
Tazewell & Peoria Railroad, Inc. [TZPR]								TZPR						Т7Р	TZP2710100						
2. Name of Other Railroad or Other Entity with Consist Involved								2a. Alphabetic Code							TZP271019O 2b. Railroad Accident/Incident No.						
									•						TDX						
Toledo, Peoria & 3. Name of Railroad or C					(single e	ntrv)			TPW 3a. Alphabetic Code							TPW270919D 3b. Railroad Accident/Incident No.					
					(single c) /										36. Rainfoad Accident/Incident No.					
Tazewell & Peoria Railroad, Inc. [TZPR]								TZPR 5. Date of Accident/Incident							<u>2710190</u>						
4. U. S. DOT Grade Cros	sing Identification	on Number								of Accid		nt ay	ı yea	ar.	6. Time	of Acciden	t/Incident	-	_		
									1	2	0	8		 019	3:00		AM	Ш	$_{\mathrm{PM}}$ X		
7. Type of Accident/	1.	Derailment		4. S	de collisio	1	7.	Hwy-rail	crossing			_	sion-deto			Other			Code		
Incident (single	single 2. Head on collision 5. Raking collision					8. RR grade crossing			11. Fire/violent rupture					(describe in)							
entry in code box)	3.	3. Rear end collision 6. Broken train collision					9. Obstruction			12. Other impacts					narrative)				01		
8. Cars Carrying					10. Cars Releasing			11. People					12. Subdivision								
HAZMAT	HAZMAT Damaged/ Derailed				HAZ			ZMAT		Evacuate		ated									
N/A	Derain	eu		N/A	N/A				N/					SOU	SOUTHERN						
13. Nearest						14. Milepost (to			15. Sta		Code 16. County			у							
City/							arest	5 0		bbr.			DEOD	T .							
Town BART 17. Temperature (F)	18. Visib	ility	(single entry)	Code 19. Weather (2)							PEOR	LA Code	20. Typ	20. Type of Track						
(specify if minus)		1. D:	•	3. Dusk	,	Code		Clear	3. Rain		5. Sleet			Couc	1. M		. Siding		Code		
(- Y 35 5)	47 ° F	2. Da		4. Dark		2		Cloudy	4. Fog		6. Snow			1	2. Ya		. Industry	,	1		
21. Track Name/		•			22	. FRA Track	:	Co	ode 23. An	nual Tra	ıck				24. Tim	e Table Dir	ection		Code		
Number						Class (1-9,	X)	1	D	ensity	aross tons				1. No	orth 3	.East		I		
SINGLE MAIN T								1	in	in millions) (gross tons 10.50			0	2. South 4. West				2			
25. Type of Equipment	-			ngle car	9. Maint./i	-		D. EMU		26.	Was Equip				27	. Train Nun	nber/Sym	bol			
Consist	Passenger tra Commutants	_		t of cars rd/switching	-	1oW Equip.		E. DMU	Code		Attended	1?	2 No		Code						
(single entry)	Commuter tr Work train	ain-Pulling		ght loco(s).		er Train-Pus iter Train-Pu					1. Yes		2. No	'	Code						
28. Speed (recorded sp		Co		30. Type of			des that a	nnlv)	ı					'	30a. Re	motely Con	trolled Lo	comoti	ve?		
if available)		1			on (Mana					_						Not a remo					
R - Recorded 1. Signaled 2. Not Signaled						2							1 =	1 = Remote control portable transmitter							
E - Estimated 000 MPH Method of Operation/Authority for Mo					Moveme	ent (Mandatory) 3						2 =	2 = Remote control tower operation								
	oss tonnage,			1				Control 3. Yard/Restricted Limits							3 = Remote control portable transmitter -						
excluding power un	its)			1		itory 5. C			rack							re than one					
		0			-	Codes (Ma									COI	ntrol transm	ıtter		Code		
21. Delevie I Conflict			1 1 8		_	ent that all ap on in Train	pplicable	_			22. If		1 1	- (-) 4-	-t - 1 f 1 /	.111					
31. Principal Car/Unit (1) First involved		a. Initia	i and N	umber	b. Positi	on in Train		c. Load	led (yes/no)						sted for drug/a ate box	1	Alcohol	numbe	Drugs		
(derailed, struck, etc	:)							were positive in the appropriate						ate box.	S DOX. Alcohol Drugs						
						000															
(2) Causing (if me	echanical,										33.Was thi	is cons	ist transpo	orting p	assengers?	(y/n)					
cause reported)						000															
		a. Head						1	35. Cars		DMU, and Cab Car a.			oaded	l î		D	. Colores			
(Exclude EMU, DMU, and Cab Car Locomotives.)		End		o. Manual c. Remo		d. Manual e.		Remote	Locomotives					Freigh	b. Pass.	c. Freig	nt d. I	Pass.	e. Caboose		
				0				•	(1) Total	Lin Eon	inmont Co.			_							
(1) Total in Train		0	0		0	0	0		(1) 100	ipment Cor			0	0	0		0	0			
(2) Total Derailed		0		0	0	0		0	(2) Tota	l Derail	ed			0	0	0		0	0		
36. Equipment Damage			1	rack, Signal, V	•				38. Primary	Cause					39. Contrib	uting Cause					
This Consist	\$	0		& Structure D	amage	\$	41,000)	Code		1	7	Γ108		Code		1				
		-	of Crev	w Members	-						-			gth of T	Time on Duty						
40. Engineers/	41. Firemen		42. C	Conductors		43. Brakem	nen		44. Engineer	/Operate	or				45. Conduc	tor					
Operators									Hrs:		М	lins:			Hrs:		ı.	Ains:			
		_										iiis.						IIIIs.			
Casualties to:	46. Railroad Employees 47.			47. Train Passengers 48.			48. Others			49a. Special Study Block A				49	49b. Special Study Block B						
Fatal	0		0		0			отн				000-000-000									
Nonfatal											ОТН										
U				0																	
50. Latitude				40.6287	34				51. Longitud	le					-89.6	52911					
52. Narrative Description AFTER TPW CREW GONE INTO EMERG OF THE TRAIN TO B	RECEIVED A ENCY. UPON	TRACK W.	ARRA ION, T	THE REAR 2	ART THE	TZPR AN	AD DER	AILED													
53. Typed/Printed Name	&														55	. Date					
Tid. of Door							54. Sigr	nature													

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 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.