DEPARTMENT OF FEDERAL RAILROAD			RA	IL EOU	IPMEN	T AC	CIDE	ENT/INCI	DEN	T REPOI	RT			ON	IB Approval	No: 2130-0500	
1. Name of Reporting Railroad							1a. Alphabetic Code					1b. Railroad Accident/Incident No.					
• •								UP	IID					0220TO026			
Union Pacific Railroad Company [UP] 2. Name of Other Railroad or Other Entity with Consist Involved									2a. Alphabetic Code				2b. Railroad Accident/Incident No.				
								711/33					INIDIIG	TDV			
Name of Railroad or O	ther Entity Respon	sible for Trac	k Maintenance	(single en	trv)			3a. Alpha		ode			3b. Railroa	d Accident/	Incident No.		
• • •																	
Union Pacific Rail	road Company	y [UP]							UP				0220TO026 6. Time of Accident/Incident				
4. U. S. DOT Grade Cros	sing Identification	Number						Date of Accident/Incident month day year									
								0	2	2 2	2020)	12:38		AM X	PM 🔲	
7. Type of Accident/	1. De	railment	4. Si	de collision		7.	Hwy-rail	crossing		10. Expl	osion-detonati	on	13. Ot	her		Code	
Incident (single 2. Head on collision 5. Raking collision 8. RR grade crossing 11. Fire/violent rupture (describe in)																	
entry in code box) 3. Rear end collision 6. Brok 8. Cars Carrying 9. HAZMAT Cars			roken train c	n train collision 9. Obstruction 10. Cars Releasing			on 12. Other impacts 11. People				narrative) 13						
HAZMAT Damaged/				HAZMAT				Evacuated									
Derailed				N/A			N/A			N/A			FT WORTH SUB				
N/A 13. Nearest				14. Milepost (to			15. State	15. State Code 16. County			FI WORTH SUB						
City/						irest		Ab		1							
Town HILLS	BORO				ten		197.4			48	HILL						
17. Temperature (F)		18. Visibilit)	Code			ngle entry)			Co	ode	20. Type o			Code	
(specify if minus)	39 ° F	1. Daw 2. Day	n 3. Dusk 4. Dark		4		Clear Cloudy	3. Rain 4. Fog		SleetSnow		1	1. Mair 2. Yard		ding dustry	1 1	
21. Track Name/	39 1	2. Day	4. Dark	22.	FRA Track	2. (Co		ual Trac			1		Fable Direct		Code	
Number					Class (1-9, X)								1. North 3.East				
SINGLE MAIN T							4	in millions) 50.50					2. South 4. West 1				
25. Type of Equipment Consist	Freight train Passenger train-		Single car Cut of cars	Maint./insA. Spec. Mo			D. EMU E. DMU		26.	Was Equipmen Attended?	t		27. 1	Train Numbe	r/Symbol		
(single entry)	Commuter train	-		B. Passenge			J. DIVIC	Code		1. Yes	2. No 1	Co	de IKC)2			
. 0	4. Work train	-	Light loco(s).	C. Commute		-		7				N	ſ				
28. Speed (recorded sp	eed	Code	30. Type of		(enter cod	les that ap	pply)						30a. Remo	otely Contro	led Locomo	tive?	
if available) Signalization (Mandatory)							1					0 = Not a remotely controlled operation					
R - Recorded E - Estimated	020 MPH	E	1. Signaled Method of	Operation/A	Signaled uthority for	Moveme	nt (Ma	ndatory) 1	1 = Remote control portable transmitter datory) 1 = Remote control tower operation								
	oss tonnage,	-		-				/Restricted Lin							ol portable ti		
excluding power uni	its)			egister Territ	•	ry 5. Other Than Main Track Q-Traffic Control System/CTC					em/CTC		more than one remote				
		497		tal/Adjunct C									contr	ol transmitte	r	Code	
21 D 1G #1.				y to the exter		plicable c	1			22.16 '1	1 1 7		16 1 /1			0	
31. Principal Car/Unit (1) First involved		a. Initiai ai	id Number	Number b. Position in Train c.				ded (yes/no) 32. If any railroad employee(s) tes were positive in the appropris					sted for drug/alcohol use, enter the number that ate box. Alcohol Drugs				
(derailed, struck, etc)																	
,			A513922	001													
	echanical,				000				3	33.Was this con	sist transportir	g pass	sengers? ()	i/n)		l Na	
34. Locomotive Units		a. Head	Mid 7	Para in	_	Rear End		35, Cars				Loa	ded	Fn	npty	No	
(Exclude EMU, DMU, an	ıd Cab Car	End		c. Remote	d. Manu		Remote		IU, DM	U, and Cab Car	a. Fre		b. Pass.	c. Freight	d. Pass.	e. Caboose	
Locomotives.)								Locomotives	5.)								
(1) Total in Train		1	0	0	0		0	(1) Total	in Equi	pment Consist	4		0	0	0	0	
(2) Total Derailed		0	0	0	0		0	(2) Total	Deraile	ed	0		0	0	0	0	
36. Equipment Damage		3	7. Track, Signal, V	Vay,	•			38. Primary C	ause		<u>. </u>	3	9. Contributi	ng Cause			
This Consist	\$ 0		& Structure Da	amage	\$	21,500		Code		1	H301		Code	1			
I		Number of	Crew Members	I								of Tin	ne on Duty				
40. Engineers/	41. Firemen	4	2. Conductors		43. Brakeme	en		44. Engineer/	Operato	or		4	5. Conductor				
Operators 0		0				Hrs: Mins:				Hrs: Mins:							
Casualties to:	46. Railroad Employees 47. Train Passengers		rs .	48. Others			49a. Special Study Block A				49b. S	9b. Special Study Block B					
Fatal													000-000-000				
ratai	0		0		0		CWR			000-							
Nonfatal	tal 0			0 0			333										
50. Latitude 32.027506 51. Longitude -97.129401																	
52. Narrative Description	(- 7 - 3 -		se on separate she														
INDUSTRY IKO SOU AND CARS RAN OVE										AL LEAD,ON	TO THE FT	woı	RTH SUB S	INGLE MA	IN. THE	MACHINE	
D CARD RAIL OVE	THE DERAIL			, 110 11	~ , ER, IE	**	.101101	- LINGILIVIE									

53. 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.