

1. Name of Reporting Railroad Union Pacific Railroad Company [UP]				1a. Alphabetic Code UP				1b. Railroad Accident/Incident No. 0420TO011			
2. Name of Other Railroad or Other Entity with Consist Involved				2a. Alphabetic Code				2b. Railroad Accident/Incident No.			
3. Name of Railroad or Other Entity Responsible for Track Maintenance (single entry) Union Pacific Railroad Company [UP]				3a. Alphabetic Code UP				3b. Railroad Accident/Incident No. 0420TO011			
4. U. S. DOT Grade Crossing Identification Number				5. Date of Accident/Incident month day year 0 4 0 8 2020				6. Time of Accident/Incident 6:10 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>			
7. Type of Accident/ Incident (single entry in code box)		1. Derailment 2. Head on collision 3. Rear end collision		4. Side collision 5. Raking collision 6. Broken train collision		7. Hwy-rail crossing 8. RR grade crossing 9. Obstruction		10. Explosion-detonation 11. Fire/violent rupture 12. Other impacts		13. Other (describe in narrative) 01	
8. Cars Carrying HAZMAT N/A		9. HAZMAT Cars Damaged/ Derailed N/A		10. Cars Releasing HAZMAT N/A		11. People Evacuated N/A		12. Subdivision DALLAS SUB			
13. Nearest City/ Town FORT WORTH		14. Milepost (to nearest tenth) 248.5		15. State Abbr. TX		Code 48		16. County TARRANT			
17. Temperature (F) (specify if minus) 73 ° F		18. Visibility (single entry) 1. Dawn 3. Dusk 2. Day 4. Dark Code 1		19. Weather (single entry) 1. Clear 3. Rain 5. Sleet 2. Cloudy 4. Fog 6. Snow Code 2		20. Type of Track 1. Main 3. Siding 2. Yard 4. Industry Code 2					
21. Track Name/ Number YARD 517		22. FRA Track Class (1-9, X) 1		23. Annual Track Density (gross tons in millions) 1		24. Time Table Direction 1. North 3. East 2. South 4. West Code 4					
25. Type of Equipment Consist (single entry)		1. Freight train 2. Passenger train-Pulling 3. Commuter train-Pulling 4. Work train		5. Single car 6. Cut of cars 7. Yard/switching 8. Light loco(s)		9. Maint./inspect. car A. Spec. MoW Equip. B. Passenger Train-Pushing C. Commuter Train-Pushing		D. EMU E. DMU Code 8		26. Was Equipment Attended? 1. Yes 2. No Code Y	
27. Train Number/Symbol MDAF		28. Speed (recorded speed if available) R - Recorded E - Estimated 003 MPH Code E		30. Type of Territory (enter codes that apply) Signalization (Mandatory) 1. Signaled 2. Not Signaled Method of Operation/Authority for Movement (Mandatory) 1. Signal Indication 2. Direct Train Control 3. Yard/Restricted Limits 4. Block Register Territory 5. Other Than Main Track Supplemental/Adjunct Codes (Mandatory*) K-Restricted Speed or Equivalent * Mandatory to the extent that all applicable codes are entered		30a. Remotely Controlled Locomotive? 0 = Not a remotely controlled operation 1 = Remote control portable transmitter 2 = Remote control tower operation 3 = Remote control portable transmitter - more than one remote control transmitter Code 0					
29. Trailing Tons (gross tonnage, excluding power units) 0		31. Principal Car/Unit (1) First involved (derailed, struck, etc) UP007813 (2) Causing (if mechanical, cause reported) 000		a. Initial and Number 001 b. Position in Train 000		c. Loaded (yes/no) 00 32. If any railroad employee(s) tested for drug/alcohol use, enter the number that were positive in the appropriate box. Alcohol 00 Drugs 00					
33. Was this consist transporting passengers? (y/n) No		34. Locomotive Units (Exclude EMU, DMU, and Cab Car Locomotives.) (1) Total in Train 5 (2) Total Derailed 1		a. Head End 5 b. Manual 0 c. Remote 0 d. Manual 0 e. Remote 0		35. Cars (Include EMU, DMU, and Cab Car Locomotives.) (1) Total in Equipment Consist 0 (2) Total Derailed 0		a. Freight 0 b. Pass. 0 c. Freight 0 d. Pass. 0 e. Caboose 0			
36. Equipment Damage This Consist \$ 55,841		37. Track, Signal, Way, & Structure Damage \$ 728		38. Primary Cause Code M507		39. Contributing Cause Code					
Number of Crew Members				Length of Time on Duty							
40. Engineers/ Operators 1		41. Firemen		42. Conductors 1		43. Brakemen		44. Engineer/Operator Hrs: 10 Mins: 10		45. Conductor Hrs: 10 Mins: 10	
Casualties to:		46. Railroad Employees		47. Train Passengers		48. Others		49a. Special Study Block A OTH		49b. Special Study Block B 000-000-000	
Fatal		0		0		0					
Nonfatal		0		0		0					
50. Latitude 32.728907				51. Longitude -97.367135							
52. Narrative Description (Be specific, and continue on separate sheet if necessary) MANAGER WAS NOTIFIED THE MDAFW-07 POWER WAS ON THE GROUND ON THE SERVICE TRACK LEAD AT THE DERAIL. THE LEAD UNIT UP7813, HAD 5 AXLES ON THE GROUND. CREW SAID THE DERAIL WAS DOWN WHEN THEY PULLED IN AND WHEN THE CONDUCTOR GOT ON THE REAR MOTOR AFTER LINING THE 105 SWITCH BACK, THEY WENT WESTWARD AND DERAILED. FINAL INVESTIGATION FOUND THAT DERAIL WAS DOWN PER TIR ON THE LOCOMOTIVE AND A YARD CAMARA THAT WAS POINTED AT THE DERAIL. SIGNAL DEPARTMENT INSPECTED THE DERAIL AND FOUND IT WAS WORKING AS INTENDED. IT DOES NOT HAVE THE RECORDING DEVICE TO SEE THE SIGNALS THAT THE DERAIL RECEIVED FROM THE SWITCH IN THE FOREMAN'S OFFICE. WHEN THE FOREMAN GOT CALLED ON THE RADIO HE HAD A MEMBER OF THE MECHANICAL TEAM LOOK AT THE SWITCH TO VERIFY IT WAS IN THE DOWN POSITION. AT THE END OF THE INVESTIGATION, IT COULDN'T BE DETERMINED IF THE MECHANICAL FOREMAN PUT THE DERAIL UP OR IF THE SIGNAL COMPONENTS HAD AN ISSUE, RESULTING IN THE DERAIL IN THE DERAILING POSITION.											
53. Typed/Printed Name & Title of Preparer				54. Signature				55. Date			
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 time 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 matter 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 information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.											