DEPARTMENT OF				пъоп	IDMFN	r <u>۸</u> ԸԸՄԸ	FNT/I	NCT	DEN	ու ըննվ	эт			ON	√R Δpproval	1 No. 2130-0500	
Name of Reporting Ra		-		L EQU	II IVIIII I	ACCID		NT/INCIDENT REPORT 1a. Alphabetic Code					OMB Approval No: 2130-0500 1b. Railroad Accident/Incident No.				
		rrmj					U	*									
2. Name of Other Railro			Involved						betic Co	ode				0820HO006 2b. Railroad Accident/Incident No.			
								•									
3. Name of Railroad or O	Other Entity Respons	sible for Trac	ck Maintenance	(single entr	ry)		3a.	Alphal	betic Co	ode			3b. Railroa	ad Accident/I	ncident No.		
Union Pacific Rail	* *			-			U	•					0820H	0820НО006			
									f Accide	lent/Incident			6. Time of Accident/Incident				
4. U. S. DOT Grade Cros	sing Identification i	Number							onth	day	1 *	ear		,		PM X	
7 True of Assident/	1 De	erailment		ide collision		7 Hwy-r		0	8	0 7		2020	11:06 13. Ot		AM 🔲	Code	
7. Type of Accident/ Incident (single		erailment ead on collisio		ide collision aking collision	on	•	ail crossing ide crossing			 Explosion-detonation Fire/violent rupture 				ner describe in)		Coue	
entry in code box)		ar end collisi		6. Broken train collision 9. Obstruc										arrative)		01	
8. Cars Carrying		9. HAZMAT			10. Cars R	-	ng		11. Ped	•			12. Subdivision				
HAZMAT		Damaged Derailed			HAZ	HAZMAT			Evacuated								
13		Deraneu		3			N/A					HOUS	TON EAS	ST BELT	SU		
13. Nearest					14. Milepo	15	15. State Code 16.			16. Coun	ıty						
City/ Town HOUS	TON				neare tenth		2	TX		48	HARI	RIS					
17. Temperature (F)		18. Visibilit	ity (single entry))										20. Type of Track			
(specify if minus)	0	1. Daw		1		1. Clear	3. Ra			5. Sleet			1. Maii		-	1	
-: m + xx -/	82 ° F	2. Day	4. Dark		4	2. Cloudy			1.00	6. Snow		2	2. Yard		dustry	2	
21. Track Name/ Number					FRA Track Class (1-9, X)		Code 23	-	ual Trac nsity				24. Time '	Table Directi th 3.Eas		Code	
YARD 008							1	in r	nillions	(gross tons s)			2. South 4. West 1			1	
25. Type of Equipment	1. Freight train		5. Single car	9. Maint./insp	spect. car	D. EMU				. Was Equipment	t		27. Train Number/Symbol				
Consist	2. Passenger train-l	-		A. Spec. Mo		E. DMU		Code		Attended?	2 N.	Co	de YBS3				
(single entry)	Commuter train- Work train		-	_	r Train-Pushir er Train-Pushi	0		7		1. Yes	2. No	Coo		,,,			
28. Speed (recorded sp		Code			(enter codes									otely Control	led Locomo	tive?	
if available)		1	1 71	on (Mandate				2					1	Not a remotely			
R - Recorded	006 мрн	,	1. Signaled		-			2						Remote contro	•		
E - Estimated 29. Trailing Tons (green)		l R			•	Iovement (M Control 3. Ya		5 ad Limi					1	Remote contro Remote contro			
excluding power uni	oss tonnage, iits)			egister Territo		control 3. Ya ner Than Main				ricted Speed or l	Equivale	ent		than one ren		.allsimuci -	
	1	40		-	Codes (Mand					-	•			rol transmitte		Code	
		2,249	* Mandatory	y to the exten	it that all appl	licable codes as	re entered									11	
31. Principal Car/Unit		a. Initial a	and Number	b. Position	n in Train	c. Loa	ided (yes						for drug/alcohol use, enter the number that				
(1) First involved									were positive in the appropr			appropriate	ate box. Alcohol			Drugs	
(derailed, struck, etc	:)	_{II}	P001604		001						00 00			oo.			
(2) Causing (if mechanical,			1 001004	+					33.Was this consist transporting p			porting pass					
cause reported)					000											No	
34. Locomotive Units		a. Head	Mid T		_ I	ear End	35. Ca		ит DM	IU, and Cab Car		Load	1		ipty L d Poss	Caboosa	
(Exclude EMU, DMU, an Locomotives.)	ıd Cab Car	End	b. Manual	c. Remote	d. Manual	e. Remote		notives.		U, and Cao Cai	a	a. Freight	b. Pass.	c. Freight	d. Pass.	e. Caboose	
(1) Total in Train		2	0	0	0	0	(1)	Total	in Equi	ipment Consist		13	0	18	0	0	
(2) Total Derailed		+	-		+	0	- ` `				-+		0	6	0		
		1 2	37. Track, Signal, W	Vov	0		(2) Total Derailed 38. Primary Cause			0	39. Contributing Cause						
36. Equipment Damage This Consist			 Track, Signal, W Structure Da 			2 151	38. Prin	•	ause	1		ر	39. Contributi Code	ing Cause			
	\$ 31,279			, mage 3	\$ 3	3,454				!	H607	- de se Tim					
40. Engineers/	41. Firemen		Crew Members 42. Conductors		43. Brakemen		44 Fn(ringer/(Operator	OF.	Len	ngth of Tim	ne on Duty 45. Conductor	<u> </u>			
Operators	41. Filemen				i. Diakemen				Эрегаю					Г			
2		\longrightarrow	0	\longrightarrow			Hr	s:		Mins:	36	<u>. </u>	Hrs:		Mins:		
Casualties to:	46. Railroad Employees 47. Train Passengers		s 4	48. Others			49a. Special Study Block A 49b. S				Special Study	Block B					
Fatal	0		0			\top					\top						
Nonfotal						- OTH	OTH 000-				-000-000						
U			0	0 0			+										
50. Latitude 29.769704				04		51. Lon	51. Longitude				-95.291	-95.291933					
52. Narrative Description	(ue on separate shee														
YBS39R-07 DERAILE PROPERLY SWEPT,							E SWITC	HING	. DET	ERMINATIO)N WAS	MADE T	HAT THE I	RCL ZONE	HAD NOT	f BEEN	
I KOI EKLI DILL 1,	RESCEILIGE.	A NU.1 1	MU SWII CII, C.	1001110111	Il District	VIII.											

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.