DEPARTMENT OF		_	N	RAI	L EOU	IPMEN	JT A <i>(</i>	~CIDF	'NT/INCI	DEN	T REPO	RТ			O	MB Anproval	No: 2130-0500	
FEDERAL RAILROAD ADMINISTRATION RAIL EQUIPMENT ACCIDE 1. Name of Reporting Railroad							1a. Alphabetic Code					1b. Railroad Accident/Incident No.						
									UP					0820NC014				
Union Pacific Railroad Company [UP] 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)								3a. Alphabetic Code					3b. Railroad Accident/Incident No.					
Union Pacific Rail	road Company	z [[][P]							UP	•				0820NC014				
										5. Date of Accident/Incident				6. Time of Accident/Incident				
4. U. S. DOT Grade Cross	sing Identification N	umber		1					month day year					7.04 AM PM X				
7 Town of Assident/	1 Day	- 11 mont		750086				Hwy-rail	0 oroseina	8	0 9	202		7:04 13. Ot		AM L		
7. Type of Accident/ Incident (single		railment ad on collis	sion		le collision king collisior	n		RR grade							ner describe in)		Code	
entry in code box)		ar end colli			oken train col			Obstruction	•						arrative)		07	
8. Cars Carrying 9. HAZMAT Cars								11. People					12. Subdiv	vision				
HAZMAT		Damage				HA	AZMAT		Evacuated									
2		Derailed	d		N/A	\perp		N/A				WARM SPRINGS SUB						
13. Nearest							14. Milepost (to nearest			15. State Code 16. County Abbr.								
City/ Town MILPI	TAS					neo ten		12.4	CA		06	SANTA	CT.AR	? A				
17. Temperature (F)		18. Visibil	lity (s	single entry)	-	Code		eather (sin			00		ode	20. Type o	of Track		Code	
(specify if minus)	0	1. Dav	ıwn	3. Dusk	ı			Clear	3. Rain		5. Sleet	1		1. Mair		Siding	1	
	88 ° F	2. Day	y	4. Dark		3		Cloudy	4. Fog		6. Snow		1	2. Yard		ndustry	1	
21. Track Name/ Number						FRA Track Class (1-9, 2		Do	Doneity				24. Time Table Direction Code 1. North 3.East					
SINGLE MAIN T	RACK					.lass (1-2, 2	X)	1	in	Density (gross tons in millions) 3.10				2. South 4. West 2				
	Freight train		5. Single	car ç	9. Maint./insp	pect. car		D. EMU	'		Was Equipmen			27. Train Number/Symbol				
	2. Passenger train-l	_	6. Cut of		A. Spec. Mo			E. DMU	Code		Attended?		2.1	e LRO	0.5			
	 Commuter train- Work train 				B. PassengerC. Commuter		-		1 1		1. Yes	2. No	Code Y	e Lix	ŲS		l l	
28. Speed (recorded spe		Code	8. Light l	30. Type of T		(enter cod		annlu)	30a. Remotely Controlled Locomotive?							iva?		
if available)	;eu	1		Signalization			100 11	(PP13)	•					0 = Not a remotely controlled operation				
R - Recorded	***	_		1. Signaled	2. Not S		·							1 = Remote control portable transmitter				
E - Estimated	010 MPH	E		Method of O	-				· ·									
 Trailing Tons (grown excluding power unit 	oss tonnage,			 Signal Ind Block Reg 												_	ansmitter -	
excluding power am	18)			Supplemental	-									more than one remote control transmitter Code				
		2,251		* Mandatory	-				entered								0	
31. Principal Car/Unit		a. Initial	and Num	ıber	b. Position	in Train		c. Loade	ed (yes/no)	3	32. If any railro	ad employee(s) tested	for drug/alc	cohol use, e	nter the number	er that	
(1) First involved									were positive in the appropria				opriate l	te box. Alcohol Drugs				
(derailed, struck, etc)	,				204												
(2) Causing (if me	echanical,	 	<u>UP0099</u>	9911 001					33.Was this consist transporting pa				no nasse	ussengers? (y/n)				
cause reported)	cnumeus,					000					JJ. 11 40 4110 C	isist transport	ng paos	aigeis.	y/1.j		No	
34. Locomotive Units		a. Head	\top	Mid Tr	rain	Т	Rear End	d	35. Cars				Load	ed	E	mpty		
(Exclude EMU, DMU, an Locomotives.)	d Cab Car	End	b. N	Manual	c. Remote	d. Manu	al e.	Remote	(Include EM Locomotive		U, and Cab Ca	r a. Fr	eight	b. Pass.	c. Freight	d. Pass.	e. Caboose	
(1) Total in Train		2	+	0	0	0	+	0		•	pment Consist	2	1	0	24	0	0	
(2) Total Derailed 0			+	0 0		0	+	0	(2) Tota ¹	(2) Total Derailed		- 0	-+	0	0	0	0	
36. Equipment Damage			37 Trac	ck, Signal, Wa		1 0			38. Primary C			'		. Contributi		- 0		
This Consist				Structure Dan	•	e	94,068	R	Code	Juise	1			Code	ing Cuuse	i		
	\$ 528	Number of	of Crow N	Jambara			77,000					M303	of Time	on Duty				
40. Engineers/	41. Firemen		42. Cond			3. Brakem	en		44. Engineer/	Operato	r	Lengui		. Conductor	r			
Operators 1	TTT HOME		12. 000	1		J. Druncom	0.11		Hrs:	01	Mins:	49		Hrs:	01	Mins:	49	
Casualties to:	46. Railroad Employees		47. Trair	47. Train Passengers 4			48. Others			49a. Special Study Block A 4				49b. Special Study Block B				
Fatal	0		0			0			CWR 000				000-0	0-000-000				
Nonfatal 0			0 2				000				000-0							
				37.40413	7					51. Longitude				-121.900612				
52. Narrative Description LRQ50-09, LEAD UNI BRAKE APPLICATIO	T UP9911 WAS S	STRUCK I	BY AN S		ELING WI	EST ON I			PRESSWAY	. GAT	ES AND FLA	SHERS WEI	RE FU!	NCTIONIN	NG, CREW	V MADE AN	EMERGENC	

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.