FEDERAL KAILKOAD	ADMINISTRATIO	.\	KA	IL EQU	IPWIENI A	ACCIDE	MI/INCH	JENI	KEI OI	<u> </u>			OIV	ib Appiovai	NO: 2130-0300			
1. Name of Reporting Ra	ilroad		1a. Alphabetic Code					1b. Railroad Accident/Incident No.										
Union Pacific Rail			UP						1120НО024									
2. Name of Other Railro	ad or Other Entity w		2a. Alphabetic Code						2b. Railroad Accident/Incident No.									
Name of Railroad or C	Other Entity Respons	try)	3a. Alphabetic Code						3b. Railroad Accident/Incident No.									
Union Pacific Rail	, ,	-57	UP															
				5. Date of	Accident/	Incident			1120HO024 6. Time of Accident/Incident									
4. U. S. DOT Grade Cros			mon		day	yea		0.45 AM PM X										
7. Type of Accident/	1. Der	railment	4. S	ide collision		7. Hwy-rail	crossing	1	2 4 10. Expl	osion-detor	20 ation	7.43						
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. Broken train collision						9. Obstructi		12. Other impact				12. Subdi	narrative)	12				
8. Cars Carrying       9. HAZMAT Cars       10. Car         HAZMAT       Damaged/       H.						AT		Evacuated				12. Subui	VISIOII					
N/A Derailed				N/A		N/A				//A		SEAB						
13. Nearest				11/12	14. Milepost		15. State			Code 16. County			SEABROOK IND LD					
City/					nearest tenth)			Abbr.		TIADD	IADDIC							
Town LA PO		18. Visibilit	ty (single entry)	·)		0.4 Weather (sin				HARR	Code	20. Type		Code				
(specify if minus)			1. Dawn 3. Dusk		1. Clear		3. Rain	5	5. Sleet			1. Mai		ding	1			
21. Track Name/	<b>73</b> ° F	2. Day	4. Dark	22.1	FRA Track	2. Cloudy	4. Fog	og 6. Snow  3. Annual Track		2		2. Yar		dustry	Code			
21. Irack Name/ Number					Class (1-9, X)	Cod						24. Time Table Direction Code 1. North 3.East						
YARD 013					,	1	in m	sity (gro. villions)	ss tons			2. South 4. West <b>4</b>						
25. Type of Equipment	spect. car	D. EMU	26. Was Equipment					27. Train Number/Symbol										
Consist (single entry)	Passenger train-F     Commuter train-	-	<ol> <li>Cut of cars</li> <li>Yard/switching</li> </ol>	A. Spec. Mo B. Passenger	r Train-Pushing	E. DMU	Code	Code Attended?		2. No	ı c	ode LH	U0					
(	4. Work train	-	-		er Train-Pushing		7				,	Y						
28. Speed (recorded sp	eed	Code	7.1		(enter codes th	nat apply)							otely Control					
if available) R - Recorded			Signalization  1. Signaled	on (Mandate d 2. Not S		2						0 = Not a remotely controlled operation 1 = Remote control portable transmitter						
E - Estimated	004 MPH	E	"		-	Movement (Mandatory) 5							2 = Remote control tower operation					
	oss tonnage,		1 -			n Control 3. Yard/Restricted Limits							3 = Remote control portable transmitter -					
excluding power un	its)			legister Territo	•	Other Than Main Track L-Special Instructions							more than one remote control transmitter Code					
	Codes (Mandato it that all applica	oplicable codes are entered						Cont	ioi transmitte	r	3							
31. Principal Car/Unit		a. Initial a	nd Number	b. Position		c. Loaded (yes/no) 32. If any railroad employee(s) tes						ed for drug/al	cohol use, ent	er the number	-			
(1) First involved								were positive in the appropriate					e box. Alcohol Drugs					
(derailed, struck, etc	EXISTORACIO		002		Y													
(2) Causing (if me	echanical,	DOV	WX072830	+	002	+	33.Was this consist tr			sist transpo	rting pa	ssengers ? (	? (y/n)					
cause reported)				000										No				
		a. Head			Rear End		35. Cars (Include FM)	II DMII	DMU, and Cab Car		Lo Freight	b. Pass.	Empty c. Freight   d. Pass		e. Caboose			
(Exclude EMU, DMU, and Cab Car Locomotives.)		End	b. Manual c. Remote		d. Manual	e. Remote	Locomotives.				ricigiii	b. Fass.	c. Preight	u. rass.	e. Caboose			
(1) Total in Train		1	0	0	0	0	(1) Total i	n Equipment Consist			1	0	0	0	0			
(2) Total Derailed		0	0	0	0	0	(2) Total Derailed			0	0 0 0		0	0				
36. Equipment Damage 37. 1			37. Track, Signal, V			38. Primary Ca	use				39. Contributing Cause							
This Consist   \$ 9,871			& Structure Da	amage \$	ş 1,7	714		:	M411		Code							
·	Number of Crew										th of Ti	ne on Duty						
40. Engineers/	· I I		42. Conductors	onductors 43. Brakemer			44. Engineer/C	/Operator				45. Conductor						
Operators 2			0			Hrs: 05 Mins:			45		Hrs:	Hrs: Mins:						
Casualties to:	46. Railroad Emplo	yees 4	47. Train Passenger	:s 4	48. Others		49a. Special Study Block A				49b.	o. Special Study Block B						
Fatal	0	0		0		0		CWID			000-000-000							
Nonfatal	0	0		0		0		CWR			000	0-000-000						
50. Latitude		51. Longitude						-95.03	8908									
52. Narrative Description THE HUMP TOWER 12 AND INSTEAD WI PULLED WAS LINEI CURVE.	STATED THERE ENT TO BOWL 13	E WERE TV 3 IN ERRO	OR, MAKING A	THE GROUN JOINT. THE	ND IN BOWL 1 ERE WAS A D	OOUBLE LIN	NED TO GO T	O BOW	L TRACK	2, WHICH	WEN	T CORREC	TLY. THE N	NEXT CAR	UTLX672228			
53. Typed/Printed Name								55. 1	Date									
Title of Preparer	54. 5	54. Signature																
	ort is part of the r	reporting r	ailroad's accide	nt report pu	rsuant to the a	accident reno	orts statute and	l as sucl	h chall not	"he admit	ted as	evidence or	used for an	v nurnose i	n 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.

FEDERAL RAILROAD ADMINISTRATION

RAIL EQUIPMENT ACCIDENT/INCIDENT REPORT

FEDERAL RAILROAD	ADMINISTRATION	R	RAIL EQUIPMENT ACCIDENT/INCIDENT REPORT										OMB Approval No: 2130-0500							
1. Name of Reporting Railroad						1a. Alphabetic Code							1b. Rai	1b. Railroad Accident/Incident No.						
Union Pacific Railroad Company [UP]							UP							1120НО024						
2. Name of Other Railroa			2a. Alphabetic Code						2b. Railroad Accident/Incident No.											
2 Now of Boileand or O	2-1 Patity Bospons	"-1. for Tro	1-34 sintenance	/-iala an	1			2a Alphoba	···· C				2L Dail	1 A poidor	· /r - sl.dont N	<del>,</del>				
3. Name of Railroad or O			:k Maintenance	(single en	try)			3a. Alphabe	etic C	ode			3b. Railroad Accident/Incident No.							
Union Pacific Rail								UP 5. Date of A	Accid	dent/Incident				HO024 e of Accident	/Incident	—				
4. U. S. DOT Grade Cros	sing Identification N	Jumber	1					mon		day	year	r								
								1	1 1 2 4 2				9:45		PM X					
7. Type of Accident/ Incident (single		railment ad on collisi		Side collision Raking collision			crossing						Other (describe in	, )	ı	Code				
entry in code box)		ar end collisi		Broken train co		8. RR grade crossing 11. Fire/violent r 9. Obstruction 12. Other impact						uic 		L	12					
8. Cars Carrying	ç	9. HAZMA				Cars Releasing			11. Pe	-			12. Sub	odivision						
HAZMAT		Damaged Derailed			HAZMAT				Evacuated											
N/A 13. Nearest				N/A			N/A ilepost (to 15. S			Code N		SEA		-						
City/				14. Mi			nepost (10 nearest		15. State Code 16 Abbr.											
Town LA PO							nth) 0.4				HARR									
17. Temperature (F)	] 1	<ol> <li>Visibilit</li> <li>Daw</li> </ol>		•	Code 1	Code 19. Weather (sing 1. Clear		ngle entry) 3. Rain	**			Code	20. Type of Track 1. Main 3. Siding				Code			
(specify if minus)	<b>73</b> ° F	1. Daw 2. Day			4		Cloudy	<ol> <li>Kain</li> <li>Fog</li> </ol>		<ol><li>Sleet</li><li>Snow</li></ol>		2	1. M 2. Y		Industry		2			
21. Track Name/				22.	FRA Track		Cod	de 23. Annua					24. Tim	ne Table Dire	ection		Code			
Number				1 '	Class (1-9, X)	)	Ι,	Dens	Density (gross tons in millions)					1. North 3.East 2. South 4. West 1						
YARD 013 25. Type of Equipment	Freight train		5. Single car	9. Maint./in:	ispect, car	Б	D. EMU	ın mı	s) . Was Equipmen	27. Train Number/Symbol										
Consist	2. Passenger train-P	Pulling 6	6. Cut of cars	A. Spec. Mo	-	E	E. DMU	G 1.		Attended?							l			
(single entry)	Commuter train-     Work train	_	7. Yard/switching		er Train-Pushin	-		Code 5		1. Yes 2.		1	ode N				l			
28. Speed (recorded spe	4. Work train	Code	8. Light loco(s).	of Territory	ter Train-Pushi (enter codes		nlv)	3				1 1	<del></del>	emotely Cont	rolled Locon	notive?	,			
if available)	sea .	1	1 71	ation (Manda									30a. Remotely Controlled Locomotive?  0 = Not a remotely controlled operation							
R - Recorded	002 MPH		1. Signal		Signaled	2							1 = Remote control portable transmitter							
E - Estimated  29. Trailing Tons (gro	oss tonnage,	E			•	Movement (Mandatory) 5 n Control 3. Yard/Restricted Limits							l l	= Remote coi = Remote coi						
excluding power uni			-	Register Territ		Other Than Main Track  L-Special Instructions								3 = Remote control portable transmitter - more than one remote						
		48		ental/Adjunct C										ontrol transmi	tter		Code			
a. B I Coullet		_		tory to the exter								13 1 days		1 mate	0					
31. Principal Car/Unit (1) First involved		a. Initiai ai	and Number	ber b. Position in Train c. Loaded					32. If any railroad employee(s) tested were positive in the appropriate					d for drug/alcohol use, enter the number that box. Alcohol Drugs						
(derailed, struck, etc	z)																3.25			
(C) C wine (C)		UT'	LX672228	72228 001			Y			22 XX	* * * * * * * * * *		0	seangers 2 (v/n)						
(2) Causing (if me cause reported)	echanical,				000				1	33.Was this con	sist transpor	ting pa	ssengers :	(y/n)		ı	No			
34. Locomotive Units		a. Head	M:	d Train		Rear End		35. Cars	_			Lc	oaded	1	Empty	+				
(Exclude EMU, DMU, an	ıd Cab Car	End			d. Manual e. Rer		Remote	(Include EMU Locomotives.)		, DMU, and Cab Car a.			b. Pass.	. c. Freigl	Freight d. Pass. e		Caboose			
Locomotives.)		<del></del>			+	_							+	0 0		+				
(1) Total in Train		0	0	0	0	+	0	1	(1) Total in Equipment Consist			1	0	0	0	+	0			
(2) Total Derailed		0	0	0	0		0	(2) Total Derailed			0	0	0	0		0				
36. Equipment Damage This Consist		]3	<ol> <li>Track, Signal &amp; Structure</li> </ol>	Domono	Λ		38. Primary Cau Code	use				<ol><li>Contrib</li><li>Code</li></ol>	outing Cause							
\$ 15,085			Crew Members	°   \$ 0							M411	t of Ti	me on Duty							
40. Engineers/	41. Firemen		42. Conductors		43. Brakemen			44 Engineer/Or	44. Engineer/Operator 45											
Operators					TJ. 214	James III			Hrs: Mins:					7.602	Mins					
O Complete to	TO D. A. Donal.			0								1 401	Hrs:	: D1 .l-D	IVIIIIS		$\overline{}$			
Casualties to:	46. Railroad Emplo	yees 4	47. Train Passeng	ers	48. Others	hers 49a. Spe			. Special Study Block A 49b. S					udy Block B						
Fatal	0		0	0 0			0 CWP					100	0-000-000	n.						
Nonfatal	onfatal <b>0</b>		0	0			CWR 000-					J-UUU-UUU	,							
D. Latitude			29.684352			51. Longitude							-95.0	38908						
52. Narrative Description	(Re specific.	and contin	ue on separate si		mil								*25.0	30700						
THE HUMP TOWER: 12 AND INSTEAD WE PULLED WAS LINED CURVE.	STATED THERE ENT TO BOWL 13	E WERE TV 3 IN ERRO	WO CARS ON OR, MAKING	THE GROU A JOINT. TH	ND IN BOW IERE WAS A	A DOUB	BLE LIN	NED TO GO TO	O BO	OWL TRACK	2, WHICH	WEN	T CORRE	CTLY. THI	E NEXT CA	AR UT	TLX672228			
53. Typed/Printed Name &													55	5. Date						
Title of Preparer					5	54. Signature														
	ort is part of the r	reporting r	ailroad's accid	ent report pr	irsuant to the	e accide	ent repo	orts statute and	l, as s	such shall not	"be admit	ted as	evidence o	or used for	any purpos	e in a	ny 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.