DEPARTMENT OF TRANSPORTATION

FEDERAL RAILROAD	ADMINISTRATIO	N	R	AIL EQ	UIPME	NT A	CCIDE	ENT/IN	CIDE	NT REPOR	Г			ON	IB Approval	No: 2130-0500	
1. Name of Reporting Ra		1a. Alphabetic Code						1b. Railro	1b. Railroad Accident/Incident No.								
Union Pacific Rai		UP						1120L	1120LA008								
2. Name of Other Railro		2a. Alphabetic Code					2b. Railroad Accident/Incident No.										
Amtrak (National		АТК						165782									
3. Name of Railroad or C					entry)		3a. Alphabetic Code						3b. Railroad Accident/Incident No.				
Union Pacific Rai		UP					1120LA008										
		5. Date of Accident/Incident						6. Time of Accident/Incident									
4. U. S. DOT Grade Crossing Identification Number							month day year					10.58 AM PM X					
745839Y 7. Type of Accident/ 1. Derailment 4. Side collision							1 1 0 8 2020 7. Hwy-rail crossing 10. Explosion-detonation						10:58 13. Ot			Code	
• •					king collision 7. Hwy-fail c								(describe in)			Code	
<i>entry in code box</i>) 3. Rear end collision				Broken trair	9. Obstruction			•			pacts		narrative)		07		
8. Cars Carrying							Cars Releasing		11.	People			12. Subdivision				
HAZMAT Damaged/ Derailed							HAZMAT		F	Evacuated							
N/A N					V/A N/A				N/A 15. State Code 16.			SANTA BARBARA SUB					
						ilepost	(to	15. 5	State Abbr.	5. County	у						
City/ Town OXNARD						earest enth)	402.9		CA 06		VENTUR	A					
17. Temperature (F) 18. Visibility			ility (single en	y (single entry) Co			19. Weather (single		CA	Code			20. Type of Track			Code	
(specify if minus)	0	1. Da					. Clear	3. Rair		5. Sleet	1		1. Main		•	1	
21. Track Name/	52 ^o F	2. Da	iy 4. Da		4		. Cloudy	4. Fog	Annual T	6. Snow	2	2	2. Yard		dustry	Code	
21. Track Name/ 22. FRA Track Number Class (1-9,													24. Time Table Direction Code 1. North 3.East				
SINGLE MAIN T	FRACK					, ,	3 in millio			(gross tons ons) 1.50			2. South 4. West 2			2	
25. Type of Equipment 1. Freight train 5. Single car 9. Maint./inspect. car							D. EMU		2	6. Was Equipment			27. Train Number/Symbol				
Consist (single entry)	 Passenger train- Commuter train 	-	 Cut of cars Yard/switchin 	-	MoW Equip		E. DMU	Co	de	Attended? 1. Yes	2. No 1	Cod	le				
(single entry)	4. Work train	-r unnig	8. Light loco(s).		uter Train-Pu	0				1. 105	2.10	000					
28. Speed (recorded sp	need	Co		of Territory		odes that	apply)	•					30a. Rem	otely Control	led Locomo	tive?	
if available) Signalization (Mandatory)										1			0 = Not a remotely controlled operation				
R - Recorded 1. Signaled 2. Not Signaled E - Estimated 000 MPH Method of Operation/Authority for							ont (Ma	undatomi)	1				 1 = Remote control portable transmitter 2 = Remote control tower operation 				
29. Trailing Tons (gr		in Control 3. Yard/Restricted Limits						3 = Remote control portable transmitter -									
excluding power un	-		an Main T			affic Control System	/CTC			than one rer	-						
	landatory						contr	control transmitter Code									
		0		tory to the ex													
31. Principal Car/Unit (1) First involved		a. Initial	and Number	b. Posi	tion in Train		c. Loaded (yes/no) 32. If any railroad employee(s) tested were positive in the appropriate l									er that Drugs	
(derailed, struck, etc)									were positive in the ap			ppropriate box. Alcohol Dru				Diugs	
				000	000												
(2) Causing <i>(if mechanical,</i>			000						33.Was this consist tra			sporting passengers ? (y/n)			1		
cause reported) 34. Locomotive Units		o Hood	M	id Troin	000			35. Cars				Loaded Empty					
(Exclude EMU, DMU, and Cab Car		a. Head End	b. Manual	Mid Train Manual c. Remot		Rear Er d. Manual e		(Include	(Include EMU, DMU, and Cab Car		a. Frei	a. Freight		c. Freight	d. Pass.	e. Caboose	
Locomotives.)				_				Locomotives.)									
(1) Total in Train		0	0	0 0		0 0		(1) Total in Equipr		quipment Consist	0		0	0	0	0	
(2) Total Derailed		0	0	0		0 0		(2) T	(2) Total Derailed		0		0	0	0	0	
36. Equipment Damage 37. T			37. Track, Signa	. Track, Signal, Way,				38. Prima	38. Primary Cause			39. Contributing Cause					
This Consist \$ 0			& Structure Damage \$			93,86	8	Code	Code M30			2 Code					
· · · · · · · · · · · · · · · · · · ·		Number of	Crew Members							112	Length of Time			ne on Duty			
40. Engineers/ 41. Firemen			42. Conductors		43. Brakemen			44. Engineer/Operator				45. Conductor					
Operators 0		0					Hrs:	Hrs: Mins:				Hrs: Mins:					
Casualties to:	46. Railroad Employees 47. T		47. Train Passen	gers	48. Others	8. Others			49a. Special Study Block A			49b. Special Study Block B					
Fatal									CWR			000-000-000					
	0		0	0		0											
Nonfatal	al O		0	0		0											
50. Latitude 34.21913						51			51. Longitude				-119.17	6828			
52. Narrative Description AMT785-08, LEAD U	1		inue on separate s ED WITH A VE			T 402.9 (OF THE :	SANTA BA	ARBAR#	A SUBDIVISION.	ATK EQU	IPME	ENT COST	= \$4,426			
53. Typed/Printed Name &													55. Date				
Title of Preparer						54. Signature											
NOTE: This rep	port is part of the n for damages gro			-	•		-				e admitted	as ev	vidence or	used for an	y purpose	in any suit	
This collection of info		-	•								n is estima	ted to	average 2	hours per	response, i	ncluding the	

Ins concertion or information is mandatory under 49 CFR 225, and is used by FRA to monitor national rati safety. Public reporting burden is estimated to average 2 nours 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 information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.