DEPARTMENT OF SECOND SE				AIL EO	UI	PMENT	ΓΑΟ	CIDE	NT/INC	CID	EN'	T REPOI	RT				OM	B Approval	No: 2130-0500	
1. Name of Reporting Railroad										1a. Alphabetic Code						1b. Railroad Accident/Incident No.				
WISCONSIN CENTRAL LTD. [WC]							WC	wc						992648						
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. Alı	3a. Alphabetic Code						3b. Railroad Accident/Incident No.					
WISCONSIN CEI	WISCONSIN CENTRAL LTD. [WC]								WC	WC:						992648				
4. U. S. DOT Grade Crossing Identification Number							5. Dat	Date of Accident/Incident						6. Time of Accident/Incident						
	ong racialiteation i	·······································							0	mon	th 3	2 7	1 -	ear 2019	11	:00	A	м	$_{\mathrm{PM}}$ X	
7. Type of Accident/	1. De	railment	4.	Side collision	on		7.	Hwy-rail	crossing			10. Expl	osion-det	tonation	1	3. Other	r		Code	
Incident (single 2. Head on collision entry in code box) 3. Rear end collision				 Raking collision Broken train collision 							•			-		(describe in) narrative)			1.0	
entry in code box) 8. Cars Carrying		9. HAZMA		Broken tran	n con	10. Cars R			on	T	11. Pec		er impacts	5	12. 8	<i>narr</i> Subdivisi			12	
HAZMAT Damaged/					HAZMAT				Evacuated											
N/A		Derailed	i	N/A			N/A			N/A			I/ A	MA			MATTESON			
13. Nearest				17/21			14. Milepost (to			15. State Code			16. County		171	MATTERON				
City/						neare				Abbı	i.									
Town JOLIE		10 37:-7:1	ten Zalanda an	>		tenth		0.51		IL		17	WIL		20.7	S 67	F1-		C- 1-	
17. Temperature (F) (specify if minus)		 Visibil Day 		•	C	Code 1		itner (<i>su</i> Clear	ngle entry) 3. Rain			5. Sleet		Code		Type of T Main	1 rack 3. Sic	ling	Code	
(speedy y minus)	41 ° F	2. Day				4		Cloudy	4. Fog			6. Snow		3		Yard	4. Inc		2	
21. Track Name/	-			2		RA Track		Co	de 23. A	nnua	al Trac	:k	I		24. 7	ime Tab	ble Direction	on	Code	
Number					Cl	lass (1-9, X)				Dens	sity (g	ross tons				North	3.Eas			
TRACK JN03	1 Fraight train		5. Single car	0 Maint	linen	oot oor		D EMIL		in mi			56.	97	2	South	4. We		2	
21 11				ngle car 9. Maint./inspec t of cars A. Spec. MoW							26. Was Equipment Attended?					27. Train Number/Symbol				
(single entry)	Commuter train- Work train	-Pulling	7. Yard/switching 8. Light loco(s).	B. Passer	nger 7	Train-Pushii Train-Pushi	ng		Cod	e		1. Yes	2. No		ode 7	L522				
28. Speed (recorded sp		Code		of Territory		(enter codes		pply)	1 -							Remotel	ly Controll	ed Locomo	tive?	
if available)		L	1 **	ntion (Man						2						0 = Not a remotely controlled operation				
R - Recorded	001 MPH		1. Signa			gnaled												l portable ti		
E - Estimated 29. Trailing Tons (gro	001 MPH oss tonnage,	E				hority for M Direct Train				5								l tower ope I portable ti		
excluding power uni	-		1	Register Te				n Main Ti		J111110	.5						an one rem	-	ansimuci -	
	, I			-		des (Mana										control	transmitter		Code	
		0	* Mandat	ory to the ex	ktent	that all appl	icable	codes are	entered										0	
31. Principal Car/Unit		a. Initial	and Number	b. Posi	ition i	in Train		c. Loade	ed (yes/no)	3	2. If any railro	ad emplo	yee(s) test	ed for dr	ug/alcoh	ol use, ente	er the numb	er that	
(1) First involved											were positive in the appropriate be			e box.	box. Alcohol		ohol	Drugs		
(derailed, struck, etc)			XX620724	620724			003			Y										
(2) Causing (if mechanical,			AAU2U124			003			33.Was this c			3.Was this con	onsist transporting passer			engers ? (y/n)				
cause reported)		GG	GCX001267			002			Y										No	
34. Locomotive Units (Exclude EMU, DMU, an	ıd Cab Car	a. Head End	Mi b. Manual	d Train c. Remot	te	d. Manual	ear End e.	l Remote				U, and Cab Car		Lo a. Freight	aded b. Pa	ss. c	Em . Freight	pty d. Pass.	e. Caboose	
.ocomotives.) (1) Total in Train		1	0	0		0		0	Locomoti			pment Consist		4	0		0	0	0	
· · · · · · · · · · · · · · · · · · ·		_							-						_				+	
(2) Total Derailed 0			27 Touris Circuit	W	0 0			(2) Total Derailed 38. Primary Cause				0	39. Cont		0	0	0			
36. Equipment Damage This Consist			 Track, Signal & Structure 				Δ		Code	y Ca	use				39. Con	_	Cause			
	\$ 30,00				\$		0						E27C	-1 C701						
40. Engineers/	41. Firemen		Crew Members 42. Conductors		1/2	3. Brakemen			44. Engine	or/O	norotos	.	Le	ngth of Ti	45. Cond					
Operators	41. Firemen		42. Conductors		43	ь. Бтакешен				ei/O										
1			1		+				Hrs:		04	Mins:	50	0	Hrs	:	04	Mins:	50	
Casualties to:	46. Railroad Employees 47. Tra		47. Train Passen	rain Passengers 4		48. Others			49a. Speci	49a. Special Study Block A				49b.	49b. Special Study Block B					
Fatal	0		0			0			ОТН				000	00-000-000						
Nonfatal 0			0	0			0													
50. Latitude 41.540698					51			51. Longitude					-88	-88.076474						
52. Narrative Description ASSIGNMENT L5229 GGCX 1267 TO BUCK	1-27 (GTW4903)	WAS IN T		OF KICKI			O TR	ACK JN	03 WHEN	CAF	RS GP	LX75764 AN	D GGC	X 1267 C0	OUPLE	D WITI	H SOXX 6	520724 CA	USING	

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.