

U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION
FEDERAL RAILROAD ADMINISTRATION

OMB Control No. 2130-0017
Expires: 3/31/2003

A. Initiating Agency <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State	B. Crossing (max. 7) 260485N	C. Reason for Update <input checked="" type="checkbox"/> Changes in Existing Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed Crossing or Abandoned	D. Effective Date (MM/DD/YYYY) 08/18/2006
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Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char.) or) EJE		2. State (2 char.) IL	3. County (max. 20 char.) LAKE
4. Railroad Division or Region (max. 14) JOLIET	5. Railroad Subdivision or District (max. 14) WESTERN SUB	6. Branch or Line Name (max. 15) MAINLINE	7. RR Milepost (max. 7 char.) (nnnnn.nn) 0065.62
8. RR I.D. No. (max. 10 char.)	9. Nearest RR Timetable Station (max. 15) (optional) RONDOUT	10. Parent RR (max. 4) (if applicable)	11. Crossing Owner (RR or Company name) (if applicable) EJE
12. City (max. 16 char.) (check <input type="checkbox"/> In one) <input checked="" type="checkbox"/> Near LIBERTYVILLE		13. Street or Road Name (max. 17 char.) ARCADIA ROAD	STATE SUPPLIED INFORMATION
14. Highway Type & No. (max. 7) TR 5446	15. ENS Sign Installed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	16. Quiet Zone <input checked="" type="checkbox"/> No <input type="checkbox"/> Partial <input type="checkbox"/> 24 hr <input type="checkbox"/> Unknown	21. HSR Corridor ID (2 char.)
17. Crossing Type (choose one) <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Pedestrian	18. Crossing Position <input checked="" type="checkbox"/> At Grade <input type="checkbox"/> RR Under <input type="checkbox"/> RR Over	19. Type of Passenger Service <input type="checkbox"/> AMTRAK <input type="checkbox"/> AMTRAK & Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> None	20. Average Passenger Count Per Day 0
22. County Map Ref. No. (max. 10)		23. Latitude (max. 10 char., 42.2793010)	
24. Longitude (max. 11 char., -087.8954010)		25. Lat/Long Source <input type="checkbox"/> Actual <input checked="" type="checkbox"/> Estimated	
26. Is There an Adjacent Crossing With a Separate Number? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Provide _____ (7 characters)			

27. PRIVATE CROSSING INFORMATION

27.A. Category (check one) <input type="checkbox"/> Recreational <input type="checkbox"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial	27.B. Public <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs Specify (max. 15) _____ <input type="checkbox"/> Signals Specify (max. 15) _____
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28.A. Railroad Use (max. 20)	29.A. State Use (max. 20)
28.B. Railroad Use (max. 20)	29.B. State Use (max. 20)
28.C. Railroad Use (max. 20)	29.C. State Use (max. 20)
28.D. Railroad Use (max. 20)	29.D. State Use (max. 20)

30. Narrative (max. 100)

31. Emergency Contact (Telephone No.) (847)-363-2131	32. Railroad Contact (Telephone No.) (815)-740-6742	33. State Contact (Telephone No.) (847)-705-4110
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MUST COMPLETE REMAINDER OF FORM FOR PUBLIC VEHICLE CROSSINGS AT GRADE

Part II: Railroad Information

1. Number of Daily Train Movements			
1.A. Total Trains 5	1.B. Total Switching Trains 2	1.C. Total Daylight Thru Trains (6 AM to 6 PM) 3	1.D. Check if Less Than One Movement Per <input type="checkbox"/>
2. Speed of Train at Crossing			
2 A. Maximum Time Table (mph) 45		2 B. Typical Speed Range Over (mph) from 5 to 45	
3. Type and Number of Tracks			
Main 1		Other 1 If Other, Specify (max. 10) SID/SPUR	
4. Does Another RR Operate a Separate Track at If Yes, Specify RR (max. 16 char.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Does Another RR Operate Over Your Track at Crossing? If Yes, Specify RR (max. 16 char.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No UP	

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B. Crossing Number(max. 7) 260485N	PAGE 2	D. Effective Date (MM/DD/YYYY) 08/18/2006
Part III: Traffic Control Device Information		
1. No Signs or Signals <input type="checkbox"/> Check if Correct	2. Type of Warning Device at Crossing Signs (specify number of each)	
	2.A. Crossbucks _____ 2 _____	2.B. Highway Stop Signs (R1-1) _____ 2 _____ 2.C. RR Advance Warning Signs (W10-1) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
2.E. Pavement <input type="checkbox"/> Stoppelines <input type="checkbox"/> RR Xing Symbols <input checked="" type="checkbox"/> None		2.F. Other Signs: (specify MUTCD type) Number _____ 2 Specify Type (max. 10 char.) _____ 2 TRACKS Number _____ Specify Type (max. 10 char.) _____
3. Type of Warning Device at Crossing Train Activated Devices (specify number of each)		
3.A. Gates	3.B. Four-quadrant (or full barrier) Gates <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.C. Cantilevered (or Bridged) Flashing Over Traffic (number) _____ Not Over Traffic (number) _____
		3.D. Mast Mounted Flashing Light(number) _____
		3.E. Number of Light Pairs _____ 0
3.F. Other Flashing Lights: Number _____ Specify Type(max. 9) _____		3.G. Highway Traffic Signals (number) _____
		3.H. Wigwags (number) _____
		3.J. Bells (number) _____
3.K. Other Train Activated Warning Devices: (specify) (max. 9 char.) _____		
4. Specify Special Warning Device NOT Train (max. 20 char.) _____		5. Channelization Devices With Gates <input type="checkbox"/> All Approaches <input type="checkbox"/> One Approach <input checked="" type="checkbox"/> None
6. Train Detection <input type="checkbox"/> Constant Warning Time <input type="checkbox"/> DC/AFO <input type="checkbox"/> Motion Detectors <input checked="" type="checkbox"/> None		7. Signalling for Train Operation: Is Track Equipped With Signals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Simultaneous Preemption <input type="checkbox"/> Advance Preemption
9. Reserved For Future Use	10. Reserved For Future Use	11. Reserved For Future Use
		12. Reserved For Future Use
Part IV: Physical Characteristics		
1. Type of Development <input type="checkbox"/> Open Space <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional		2. Smallest Crossing Angle <input type="checkbox"/> 0 - 29 <input checked="" type="checkbox"/> 30 - 59 <input type="checkbox"/> 60 - 90
3. Number of Traffic Lanes Crossing Railroad _____ 2 _____	4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	5. Is Highway Paved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6. Crossing Surface (on main line) <input checked="" type="checkbox"/> 1. Timber <input type="checkbox"/> 2. Asphalt <input type="checkbox"/> 3. Asphalt and Flange <input type="checkbox"/> 4. Concrete <input type="checkbox"/> 5. Concrete and Rubber <input type="checkbox"/> 6. Rubber <input type="checkbox"/> 7. Metal <input type="checkbox"/> 8. Unconsolidated <input type="checkbox"/> 9. Other (Specify) _____		
7. Does Track Run Down a Street? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8. Nearby Intersecting Highway? <input type="checkbox"/> Less than 75 feet <input checked="" type="checkbox"/> 75 to 200 feet <input type="checkbox"/> 200 to 500 feet <input type="checkbox"/> N/A	
	Is it Signalized? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	10. Is Commercial Power Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	11. Space Reserved For _____
Part V: Highway Information		
1. Highway System <input type="checkbox"/> Interstate <input type="checkbox"/> Federal Aid, Not NHS <input type="checkbox"/> Nat. Hwy System (NHS) <input checked="" type="checkbox"/> Non Federal Aid		2. Is Crossing on State Highway System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		3. Functional Classification of Road at Crossing _____ 19 _____
		4. Posted Highway _____ 0 _____
5. Annual Average Daily Traffic (AADT) Year 2004 AADT 000275		6. Estimate Percent _____ 02 _____
		7. Average Number of School Over Crossing per School Day _____ 0 _____

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