

U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION
FEDERAL RAILROAD ADMINISTRATION (FRA)

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

A. Initializing Agency <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State	B. Crossing Number (max 7 char) 724806D	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) 8/13/2007
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Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char) or name) NS	2. State (2 char) IL	3. County (max 20 char) JEFFERSON	
4. Railroad Division or Region (max 14 char) ILLINOIS	5. Railroad Subdivision or District (max 14 char) WEST	6. Branch or Line Name (max 25 char)	7. RR Milepost (max 7 char) (nnnn.nn) 79.63 W
8. RR I.D. No. (max 10 char)	9. Nearest RR Timetable Station (max 15 char) (if applicable)	10. Parent RR (max 4 char) (if applicable)	11. Crossing Owner (RR or Company name) (if applicable)
12. City (max 16 char) (check <input type="checkbox"/> In one) <input checked="" type="checkbox"/> Near DIX	13. Street or Road Name (max 17 char) CR 2000 N	STATE SUPPLIED INFORMATION	
14. Highway Type & No. (max 7 char) CR2000N	15. ENS Sign Installed (1-800) <input type="checkbox"/> Yes <input type="checkbox"/> No	16. Quiet Zone <input 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 only) <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 type="checkbox"/> None	20. Average Passenger Train Count Per Day
22. County Map Ref.No. (max 10 char)			
23. Latitude(max 10 char, nn.nnnnnn)			
24. Longitude(max 10 char, nn.nnnnnn)			
25. Lat/Long Source <input type="checkbox"/> Actual <input type="checkbox"/> Estimated			
26. Is there an Adjacent Crossing With a Separate Number? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Provide Number _____ (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 Access <input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input type="checkbox"/> No	27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs <input type="checkbox"/> Signals Specify (max 15 chars) _____ Specify (max 15 chars) _____
28.A. Railroad Use (max 20 char)	29.A. State Use (max 20 char)	
28.B. Railroad Use (max 20 char)	29.B. State Use (max 20 char)	
28.C. Railroad Use (max 20 char)	29.C. State Use (max 20 char)	
28.D. Railroad Use (max 20 char)	29.D. State Use (max 20 char)	
30. Narrative (max 100 char)		
31. Emergency Contact (Telephone No.)	32. Railroad Contact (Telephone No.)	33. State Contact (Telephone No.)

MUST COMPLETE REMAINDER OF FORM FOR PUBLIC VEHICLE CROSSINGS AT GRADE

Part II: Location and Classification Information

1. Number of Daily Train Movements			
1.A. Total Trains 15	1.B. Total Switching Trains 0	1.C. Total Daylight Thru Trains (6AM to 6PM) 8	1.D. Check if Less Than One Movement Per Day <input type="checkbox"/>
2. Speed of Train at Crossing			
2.A. Maximum Time Table Speed (mph) 50			
2.B. Typical Speed Range Over Crossing (mph) From 30 to 45			
3. Type and Number of Tracks Main 1 Other 0 If Other, Specify (max 10 char) _____			
4. Does Another RR Operate a Separate Track at Crossing? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Specify RR (max 16 chars) _____		5. Does Another RR Operate Over Your Track at Crossing? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Specify RR (max 16 chars) _____	

Form FRA F 6180.71 (11/99)

T05-0015
X-12281

DOCKETED

AUG 15 2007

8/13/2007

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B. Crossing Number (max 7 char) 724806D		PAGE 2			D. Effective Date (MM/DD/YYYY) 8/13/2007	
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.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.A. Crossbucks <u>2</u>	2.B. Highway Stop Signs (R1-1) <u>0</u>			
2.E. Pavement Markings <input type="checkbox"/> Stoppelines <input type="checkbox"/> RR Crossing Symbols <input checked="" type="checkbox"/> None			2.F. Other Signs: (specify MUTCD type) Number <u>0</u> Specify Type (max 10 char) _____ Number <u>0</u> Specify Type (max 10 char) _____			
3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each)						
3.A. Gates <u>2</u>		3.B. Four-quadrant (or full barrier) Gates <input type="checkbox"/> Yes <input type="checkbox"/> No	3.C. Cantilevered (or Bridged) Flashing Lights Over Traffic Lane (number) <u>0</u> Not Over Traffic Lane (number) <u>0</u>		3.D. Mast Mounted Flashing Lights (number) <u>2</u>	3.E. Number of Flashing Light Pairs
3.F. Other Flashing Lights Number <u>0</u> Specify Type (max 9 char) _____			3.G. Highway Traffic Signals (number) <u>0</u>	3.H. Wiegands (number) <u>0</u>	3.J. Bells (number) <u>1</u>	
3.K. Other Train Activated Warning Devices: (specify) (max 9 char) _____						
4. Specify Special Warning Devices NOT Train Activated (max 20 char) _____				5. Channelization Devices with Gates <input type="checkbox"/> All Approaches <input type="checkbox"/> One Approach <input type="checkbox"/> None		
6. Train Detection <input type="checkbox"/> Constant Warning Time <input type="checkbox"/> DC/AFO <input checked="" type="checkbox"/> Motion Detection <input type="checkbox"/> Other <input type="checkbox"/> None		7. Signalling for Train Operation Is Track Equipped with Train Signals? <input checked="" type="checkbox"/> Yes <input 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 type="checkbox"/> 30° - 59° <input checked="" type="checkbox"/> 60° - 90°		
3. Number of Traffic Lanes Crossing Railroad <u>2</u>		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 type="checkbox"/> 1. Timber <input checked="" 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 type="checkbox"/> 75 to 200 feet <input type="checkbox"/> 200 to 500 feet <input checked="" type="checkbox"/> N/A Is it signalized? <input type="checkbox"/> Yes <input type="checkbox"/> No				
9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest rail) <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 Future Use		
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 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		4. Posted Highway Speed
5. Annual Average Daily Traffic (AADT) Year _____ AADT <u>200</u>		6. Estimate Percent Trucks <u>5</u>		7. Average Number of School Buses Over Crossing per Day		

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