

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) 724749S | 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) 1/16/2008 |
|---|---|--|--|

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) WAYNE | |
| 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) 99.36 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 KEENES | 13. Street or Road Name (max 17 char) | STATE SUPPLIED INFORMATION | |
| 14. Highway Type & No. (max 7 char) TR 40 | 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.nnnnnnn) | |
| 24. Longitude(max 10 char, nn.nnnnnnn) | | 25. Lat/Long Source <input type="checkbox"/> Actual <input type="checkbox"/> Estimated | |

26. Is there an Adjacent Crossing With a Separate Number?
 Yes No If Yes, Provide Number _____ (7 characters)

27. PRIVATE CROSSING INFORMATION

| | | |
|--|--|---|
| 27.A. Category (check one) <input type="checkbox"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Recreational <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 | 1.B. Total Switching Trains | 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 15 to 50 | | | |
| 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) | |

W

RAD-ms

T06-0031
RD

T05-0014
X-12280

**U.S. DOT
CROSSING INVENTORY
FORM PAGE 2**

| | | |
|---|---------------------------------------|--|
| B. Crossing Number (max 7 char) 724749S | CROSSING INVENTORY FORM PAGE 2 | D. Effective Date (MM/DD/YYYY) 1/16/2008 |
|---|---------------------------------------|--|

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) 0 | 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 type="checkbox"/> No <input type="checkbox"/> Unknown |
| 2.E. Pavement Markings <input type="checkbox"/> Stoplines <input type="checkbox"/> RR Crossing Symbols <input checked="" type="checkbox"/> None | | 2.F. Other Signs: (specify MUTCD type) Number 0 Specify Type (max 10 char) _____ Number 0 Specify Type (max 10 char) _____ | | |
| 3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each) | | | | |
| 3.A. Gates 2 | 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) 0 Not Over Traffic Lane (number) 0 | 3.D. Mast Mounted Flashing Lights (number) 2 | 3.E. Number of Flashing Light Pairs _____ |
| 3.F. Other Flashing Lights Number 0 Specify Type (max 9 char) _____ | | 3.G. Highway Traffic Signals (number) 0 | 3.H. Wigwags (number) 0 | 3.J. Bells (number) 1 |
| 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 type="checkbox"/> Motion Detection <input type="checkbox"/> Other <input type="checkbox"/> None | | 7. Signalling for Train Operation Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input type="checkbox"/> No | | 8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input 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 checked="" type="checkbox"/> Open Space <input 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 2 | 4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | 5. Is Highway Paved <input type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> No | | 10. Is Commercial Power Available? <input 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 75 | | 6. Estimate Percent Trucks 5 | | 7. Average Number of School Buses Over Crossing per Day _____ | |

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including this time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

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) 534414C | 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) 1/16/2008 |
|---|--|--|---|

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) KANKAKEE | |
| 4. Railroad Division or Region (max 14 char) DEARBORN | 5. Railroad Subdivision or District (max 14 char) 503123 | 6. Branch or Line Name (max 25 char) STREATOR SEC | 7. RR Milepost (max 7 char) (nnnn.nn) KS 114.3 |
| 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 one) <input type="checkbox"/> In <input checked="" type="checkbox"/> Near UNION HILL | 13. Street or Road Name (max 17 char) CR W 1300 S | STATE SUPPLIED INFORMATION | |
| 14. Highway Type & No. (max 7 char) TR 36 | 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 | 22. County Map Ref.No. (max 10 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 |
| 23. Latitude (max 10 char, nn.nnnnnnn) | | | |
| 24. Longitude (max 10 char, nn.nnnnnnn) | | | |
| 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"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Recreational <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 | 1.B. Total Switching Trains | 1.C. Total Daylight Thru Trains (6AM to 6PM) 7 | 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) 45 | | | |
| 2.B. Typical Speed Range Over Crossing (mph) From 45 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) | |

T06-0031
DSD

T06-0030
X-12417

**U.S. DOT
CROSSING PAGE 2
INVENTORY
FORM**

| | | |
|---|---|--|
| B. Crossing Number (max 7 char) 534414C | CROSSING PAGE 2 INVENTORY FORM | D. Effective Date (MM/DD/YYYY) 1/16/2008 |
|---|---|--|

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 <u>2</u> | | 2.B. Highway Stop Signs (R1-1) <u>0</u> | | 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 type="checkbox"/> No <input type="checkbox"/> Unknown | | |
| 2.E. Pavement Markings <input type="checkbox"/> Stoppelines <input type="checkbox"/> RR Crossing Symbols <input type="checkbox"/> None | | | | 2.F. Other Signs: (specify MUTCD type) Number <u>2</u> Specify Type (max 10 char) <u>YIELD</u> 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. Wigwags (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 type="checkbox"/> Motion Detection <input type="checkbox"/> Other <input type="checkbox"/> None | | | 7. Signalling for Train Operation Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | 8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input 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 checked="" type="checkbox"/> Open Space <input 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>1</u> | | | 4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | 5. Is Highway Paved <input type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> No | | | 10. Is Commercial Power Available? <input 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>50</u> | | | 6. Estimate Percent Trucks <u>5</u> | | 7. Average Number of School Buses Over Crossing per Day _____ | | |

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including this time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

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) 724728Y | 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) 1/16/2008 |
|---|--|---|---|

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) WAYNE | |
| 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) | |
| 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 one) <input type="checkbox"/> In <input checked="" type="checkbox"/> Near SIMS | | 13. Street or Road Name (max 17 char) 1400 EAST RD. | |
| 14. Highway Type & No. (max 7 char) FAS2822 | | 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 | |
| 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 | | 21. HSR Corridor ID (2 char) | | 22. County Map Ref.No. (max 10 char) | |
| 23. Latitude(max 10 char, nn.nnnnnnn) | | 24. Longitude(max 10 char, nn.nnnnnnn) | | 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"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Recreational <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) | | 28.B. Railroad Use (max 20 char) | | 28.C. Railroad Use (max 20 char) | |
| 29.A. State Use (max 20 char) | | 29.B. State Use (max 20 char) | | 29.C. State Use (max 20 char) | |
| 29.D. State Use (max 20 char) | | 29.E. State Use (max 20 char) | | 29.F. 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 | 1.B. Total Switching Trains | 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 15 to 50 | | | |
| 3. Type and Number of Tracks Main 1 Other 1 If Other, Specify (max 10 char) SIDING | | | |
| 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) | |

T06-0031
--DSA

T06-0006
X-12416

W RAD.ms

U.S. DOT

CROSSING INVENTORY FORM PAGE 2

| | | |
|---|---------------------------------------|--|
| B. Crossing Number (max 7 char) 724728Y | CROSSING INVENTORY FORM PAGE 2 | D. Effective Date (MM/DD/YYYY) 1/16/2008 |
|---|---------------------------------------|--|

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) 0 | 2.C. RR Advance Warning Signs (W10-1) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| 2.E. Pavement Markings <input type="checkbox"/> Stoppines <input type="checkbox"/> RR Crossing Symbols <input checked="" type="checkbox"/> None | | 2.F. Other Signs: (specify MUTCD type) Number 2 Specify Type (max 10 char) YIELD Number 0 Specify Type (max 10 char) | | |
| 3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each) | | | | |
| 3.A. Gates 2 | 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) 0 Not Over Traffic Lane (number) 0 | 3.D. Mast Mounted Flashing Lights (number) 2 | 3.E. Number of Flashing Light Pairs |
| 3.F. Other Flashing Lights Number 0 Specify Type (max 9 char) | | 3.G. Highway Traffic Signals (number) 0 | 3.H. Wigwags (number) 0 | 3.J. Bells (number) 1 |
| 3.K. Other Train Activated Warning Devices: (specify) (max 9 char) | | | | |
| 4. Specify Special Warning Devices NOT Train Activated (max 20 char) CREW FLAG | | | 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 type="checkbox"/> Motion Detection <input type="checkbox"/> Other <input type="checkbox"/> None | | 7. Signalling for Train Operation Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input type="checkbox"/> No | | 8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input 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 1 | 4. Are Truck Pullout Lanes Present? <input checked="" type="checkbox"/> Yes <input 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 type="checkbox"/> No | | 10. Is Commercial Power Available? <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | 3. Functional Classification of Road at Crossing | 4. Posted Highway Speed |
| 5. Annual Average Daily Traffic (AADT) Year _____ AADT 175 | | 6. Estimate Percent Trucks 5 | | 7. Average Number of School Buses Over Crossing per Day | |

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including this time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

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) 480052P | 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) 1/16/2008 |
|---|--|--|---|

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) MONTGOMERY | |
| 4. Railroad Division or Region (max 14 char) ILLINOIS | 5. Railroad Subdivision or District (max 14 char) NW | 6. Branch or Line Name (max 25 char) BROOKLYN | 7. RR Milepost (max 7 char) (nnn.nn) D 434.6 |
| 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 LITCHFIELD | 13. Street or Road Name (max 17 char) N. 14TH. AVE. | STATE SUPPLIED INFORMATION | |
| 14. Highway Type & No. (max 7 char) TR 215A | 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.nnnnnnn) | |
| 24. Longitude(max 10 char, nn.nnnnnnn) | | 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 | 1.B. Total Switching Trains | 1.C. Total Daylight Thru Trains (6AM to 6PM) 11 | 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) 60 | | | |
| 2.B. Typical Speed Range Over Crossing (mph) From 15 to 40 | | | |
| 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) | |

706-0031
DSD

706-0032
X-12412

W DSD-MS

**U.S. DOT
CROSSING INVENTORY
FORM PAGE 2**

| | | |
|---|---------------------------------------|--|
| B. Crossing Number (max 7 char) 480052P | CROSSING INVENTORY FORM PAGE 2 | D. Effective Date (MM/DD/YYYY) 1/16/2008 |
|---|---------------------------------------|--|

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 type="checkbox"/> No <input type="checkbox"/> Unknown | |
| 2.E. Pavement Markings <input type="checkbox"/> Stoppings <input type="checkbox"/> RR Crossing Symbols <input checked="" type="checkbox"/> None | | 2.A. Crossbucks <u>2</u> | | 2.B. Highway Stop Signs (R1-1) <u>0</u> | | 2.F. Other Signs: (specify MUTCD type) Number <u>2</u> Specify Type (max 10 char) <u>ONE TRACK</u> 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. Wigwags (number) <u>0</u> | |
| 3.I. 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 type="checkbox"/> Motion Detection <input type="checkbox"/> Other <input type="checkbox"/> None | | 7. Signalling for Train Operation Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input type="checkbox"/> No | | 8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input 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 checked="" type="checkbox"/> Open Space <input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| 6. Crossing Surface (on main line) <input type="checkbox"/> 1. Timber <input type="checkbox"/> 2. Asphalt <input checked="" 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 checked="" 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 checked="" type="checkbox"/> Less than 75 feet <input 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 type="checkbox"/> No | | | | | |
| 9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest rail) <input type="checkbox"/> Yes <input type="checkbox"/> No | | 10. Is Commercial Power Available? <input 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>400</u> | | 6. Estimate Percent Trucks <u>1</u> | | 7. Average Number of School Buses Over Crossing per Day _____ | | | |

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including this time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

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) 724672G | 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) 1/16/2008 |
|---|--|--|---|

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) CLINTON | |
| 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) (nnn.nn) 53.18 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 HOFFMAN | 13. Street or Road Name (max 17 char) RAKERS RD. | STATE SUPPLIED INFORMATION | |
| 14. Highway Type & No. (max 7 char) TR-142 | 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.nnnnnnn) | |
| 24. Longitude(max 10 char, nn.nnnnnnn) | | 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 | 1.B. Total Switching Trains | 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) 60 2.B. Typical Speed Range Over Crossing (mph) From 0 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) | |

T06-0031
DSD

T06-0035
X-1248

W

RAD.MS

**U.S. DOT
CROSSING INVENTORY
FORM**

PAGE 2

| | | |
|---|--------------------------------|--|
| B. Crossing Number (max 7 char) 724672G | CROSSING INVENTORY FORM | D. Effective Date (MM/DD/YYYY) 1/16/2008 |
|---|--------------------------------|--|

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | 2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown | |
| 2.E. Pavement Markings <input type="checkbox"/> Stoppines <input type="checkbox"/> RR Crossing Symbols <input checked="" type="checkbox"/> None | | 2.A. Crossbucks 2 | | 2.B. Highway Stop Signs (R1-1) 2 | | 2.F. Other Signs: (specify MUTCD type) Number 0 Specify Type (max 10 char) _____ Number 0 Specify Type (max 10 char) _____ | |
| 3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each) | | | | | | | |
| 3.A. Gates 2 | | 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) 0 Not Over Traffic Lane (number) 0 | | 3.D. Mast Mounted Flashing Lights (number) 0 | |
| 3.F. Other Flashing Lights Number 2 Specify Type (max 9 char) _____ | | | | 3.G. Highway Traffic Signals (number) 0 | | 3.H. Wigwags (number) 0 | |
| 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"/> Motion Detection | | <input type="checkbox"/> DC/AFO <input type="checkbox"/> Other <input type="checkbox"/> None | | 7. Signalling for Train Operation Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input type="checkbox"/> No | | 8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input 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 checked="" type="checkbox"/> Open Space <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional | | | | 2. Smallest Crossing Angle <input checked="" type="checkbox"/> 0° - 29° <input 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 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 checked="" type="checkbox"/> Less than 75 feet <input 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 type="checkbox"/> No | | | | | |
| 9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest rail) <input type="checkbox"/> Yes <input type="checkbox"/> No | | | 10. Is Commercial Power Available? <input 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 125 | | 6. Estimate Percent Trucks 5 | | 7. Average Number of School Buses Over Crossing per Day | | | |

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including this time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

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) 724792X | 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) 1/16/2008 |
|---|--|--|---|

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) MARION | |
| 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) 70.3 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 WALNUT HILL | 13. Street or Road Name (max 17 char) ONION TOWN RD. | STATE SUPPLIED INFORMATION | |
| 14. Highway Type & No. (max 7 char) TR 74 | 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.nnnnnnn) | |
| 24. Longitude(max 10 char, nn.nnnnnnn) | | 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 | 1.B. Total Switching Trains | 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 35 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) | |

W RAD.ms ASD TO6-0031 TO6-0061 X-12413

U.S. DOT

**CROSSING PAGE 2
INVENTORY
FORM**

| | | |
|---|---|--|
| B. Crossing Number (max 7 char) 724792X | CROSSING PAGE 2 INVENTORY FORM | D. Effective Date (MM/DD/YYYY) 1/16/2008 |
|---|---|--|

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | 2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown | |
| 2.E. Pavement Markings <input type="checkbox"/> Stoppines <input checked="" type="checkbox"/> RR Crossing Symbols <input type="checkbox"/> None | | 2.A. Crossbucks <u>2</u> | | 2.B. Highway Stop Signs (R1-1) <u>0</u> | | 2.F. Other Signs: (specify MUTCD type) Number <u>2</u> Specify Type (max 10 char) <u>YIELD</u> 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. Wigwags (number) <u>0</u> | |
| 3.I. 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 type="checkbox"/> Motion Detection <input type="checkbox"/> Other <input type="checkbox"/> None | | 7. Signaling for Train Operation Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input type="checkbox"/> No | | 8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input 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 checked="" type="checkbox"/> Open Space <input 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>1</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 type="checkbox"/> No | | 10. Is Commercial Power Available? <input 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>75</u> | | 6. Estimate Percent Trucks <u>5</u> | | 7. Average Number of School Buses Over Crossing per Day _____ | | | |

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including this time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

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) 479362M | 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) 1/16/2008 |
|---|--|--|---|

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) SANGAMON | |
| 4. Railroad Division or Region (max 14 char) ILLINOIS | 5. Railroad Subdivision or District (max 14 char) NW | 6. Branch or Line Name (max 25 char) SPRINGFIELD | 7. RR Milepost (max 7 char) (nnnn.nn) DH 428.7 |
| 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 BATES | 13. Street or Road Name (max 17 char) PATTON SCHOOL RD. | STATE SUPPLIED INFORMATION | |
| 14. Highway Type & No. (max 7 char) TR-68A | 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 | 22. County Map Ref.No. (max 10 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 |
| 23. Latitude (max 10 char, nn.nnnnnnn) | | | |
| 24. Longitude (max 10 char, nn.nnnnnnn) | | | |
| 25. Lat/Long Source <input type="checkbox"/> Actual <input type="checkbox"/> Estimated | | | |

26. Is there an Adjacent Crossing With a Separate Number?
 Yes No If Yes, Provide Number _____ (7 characters)

27. PRIVATE CROSSING INFORMATION

| | | |
|---|---|--|
| 27.A. Category (check one) <input type="checkbox"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Recreational <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) _____ |
|---|---|--|

| | |
|----------------------------------|-------------------------------|
| 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 | 1.B. Total Switching Trains | 1.C. Total Daylight Thru Trains (6AM to 6PM) 9 | 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) 60
 2.B. Typical Speed Range Over Crossing (mph) From 50 to 50

3. Type and Number of Tracks
 Main 1 Other 1 If Other, Specify (max 10 char) SIDING

| | |
|---|--|
| 4. Does Another RR Operate a Separate Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max 16 chars) _____ <input type="checkbox"/> No | 5. Does Another RR Operate Over Your Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max 16 chars) _____ <input type="checkbox"/> No |
|---|--|

T060031

T06-0083

X-12509

W

U.S. DOT

**CROSSING PAGE 2
INVENTORY
FORM**

D. Effective Date
(MM/DD/YYYY)
1/16/2008

B. Crossing Number (max 7 char)
479362M

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | 2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown | |
| | | 2.A. Crossbucks 2 | 2.B. Highway Stop Signs (R1-1) 0 | | | | |
| 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 2 Specify Type (max 10 char) TWO TRACK Number 0 Specify Type (max 10 char) | | | |
| 3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each) | | | | | | | |
| 3.A. Gates 2 | 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) 0 Not Over Traffic Lane (number) 0 | | 3.D. Mast Mounted Flashing Lights (number) 0 | 3.E. Number of Flashing Light Pairs | | |
| 3.F. Other Flashing Lights Number 2 Specify Type (max 9 char) OTHER LIG | | | 3.G. Highway Traffic Signals (number) 0 | 3.H. Wigwags (number) 0 | 3.J. Bells (number) 1 | | |
| 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"/> Motion Detection <input type="checkbox"/> DC/AFO <input type="checkbox"/> Other <input type="checkbox"/> None | | 7. Signalling for Train Operation Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input type="checkbox"/> No | | 8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input 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 checked="" type="checkbox"/> Open Space <input 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 1 | | 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 checked="" type="checkbox"/> Less than 75 feet <input 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 type="checkbox"/> No | | | | | |
| 9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest rail) <input type="checkbox"/> Yes <input type="checkbox"/> No | | 10. Is Commercial Power Available? <input 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 50 | | 6. Estimate Percent Trucks 8 | | 7. Average Number of School Buses Over Crossing per Day | | | |

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including this time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.