

# U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION

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

<b>A. Initiating Agency</b> <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State <div style="text-align: center; font-size: 1.2em; font-weight: bold;">261007S</div>	<b>B. Crossing</b> (max. 7)	<b>C. Reason for Update</b> <input checked="" type="checkbox"/> Changes in Existing Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed Crossing or Abandoned	<b>D. Effective Date</b> (MM/DD/YYYY) 07/18/2008
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### Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char.) or) <b>EJE</b>		2. State (2 char.) <b>IL</b>		3. County (max. 20 char.) <b>WILL</b>	
4. Railroad Division or Region (max. 14) <b>JOLIET</b>		5. Railroad Subdivision or District (max. 14) <b>WESTERN SUB</b>		6. Branch or Line Name (max. 15) <b>ILLINOIS RIVER</b>	
7. RR Milepost (max. 7 char.) (nnnnn.nn) <b>0015.16</b>		8. RR I.D. No. (max. 10 char.)		9. Nearest RR Timetable Station (max. 15 (optional)) <b>CATON FARM</b>	
10. Parent RR (max. 4 (if applicable))		11. Crossing Owner (RR or Company name) (if applicable) <b>EJE</b>			
12. City (max. 18 char.) (check <input type="checkbox"/> In one) <input checked="" type="checkbox"/> Near <b>JOLIET</b>		13. Street or Road Name (max. 17 char.) <b>THEODORE</b>		<b>STATE SUPPLIED INFORMATION</b>	
14. Highway Type & No. (max. 7) <b>TR 79</b>		15. ENS Sign Installed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		16. Quiet Zone <input checked="" type="checkbox"/> No <input type="checkbox"/> Partial <input type="checkbox"/> 24 hr <input type="checkbox"/> Unknown	
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 <b>0</b>		21. HSR Corridor ID (2 char.)		22. County Map Ref. No. (max. 10)	
23. Latitude (max. 10 char., <b>41.5502700</b> )		24. Longitude (max. 11 char., <b>-088.2383300</b> )		25. Lat/Long Source <input checked="" type="checkbox"/> Actual <input 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"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Recreational <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)    **REMOTE MONITORING SYSTEM, 2 PED CROSSINGS WITH GATES**

31. Emergency Contact (Telephone No.) <b>(815)-727-6191</b>	32. Railroad Contact (Telephone No.) <b>(815)-740-6742</b>	33. State Contact (Telephone No.) <b>(847)-705-4110</b>
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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 <b>4</b>	1.B. Total Switching Trains <b>0</b>	1.C. Total Daylight Train Movements (6 AM to 6 PM) <b>3</b>	1.D. Check if Less Than One Movement Per Day <input type="checkbox"/>
2. Speed of Train at Crossing			
2 A. Maximum Time Table (mph) <b>25</b>			
2 B. Typical Speed Range Over (mph) from <b>5</b> to <b>25</b>			
3. Type and Number of Tracks			
Main <b>1</b> Other <b>0</b> If Other, Specify (max. 10) _____			
4. Does Another RR Operate a Separate Track at Crossing? 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

X-12663

T07-0051

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B. Crossing Number (max. 7) <b>261007S</b>	<b>PAGE 2</b>	D. Effective Date (MM/DD/YYYY) <b>07/18/2008</b>
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## 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)	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 checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
2.E. Pavement <input checked="" type="checkbox"/> Stoplines <input checked="" type="checkbox"/> RR Xing Symbols <input type="checkbox"/> None		2.F. Other Signs: (specify MUTCD type) Number _____ Specify Type (max. 10 char.) _____ Number _____ 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 checked="" type="checkbox"/> No	3.C. Canilevered (or Bridged) Flashing Over Traffic (number) <u>2</u> Not Over Traffic (number) _____	3.D. Mast Mounted Flashing Lights (number) <u>4</u>	3.E. Number of Light Pairs <u>8</u>
3.F. Other Flashing Lights: Number _____ Specify Type (max. 9) _____		3.G. Highway Traffic Signs (number) _____	3.H. Wigwags (number) _____	3.J. Bells (number) <u>2</u>
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 checked="" type="checkbox"/> All Approaches <input type="checkbox"/> One Approach <input type="checkbox"/> None		
6. Train Detection <input checked="" type="checkbox"/> Constant Warning Time <input type="checkbox"/> DC/AFO <input type="checkbox"/> Motion Detectors <input type="checkbox"/> Other <input type="checkbox"/> None		7. Signaling 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 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>4</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 type="checkbox"/> 2. Asphalt <input type="checkbox"/> 3. Asphalt and Flange <input type="checkbox"/> 4. Concrete <input type="checkbox"/> 5. Concrete and Rubber <input checked="" 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? Is it Signalized? <input type="checkbox"/> Less than 75 feet <input type="checkbox"/> 75 to 200 feet <input checked="" type="checkbox"/> 200 to 500 feet <input type="checkbox"/> N/A <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 checked="" 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 <u>16</u>	4. Posted Highway <u>0</u>
5. Annual Average Daily Traffic (AADT) Year <u>2004</u> AADT <u>005000</u>		6. Estimate Percent <u>00</u>	7. Average Number of School Over Crossing per School Day <u>0</u>	

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including the 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.

ELGIN, JOLIET & EASTERN RAILWAY



EXECUTIVE DEPARTMENT

One North Buchanan Street

Gary, IN 46402

(219) 883-4327, FAX (219) 883-4315 K. L. Hay, Safety, Quality & Administrative Manager

July 18, 2008

RECEIVED

JUL 24 2008

ILLINOIS COMMERCE COMMISSION  
RAIL SAFETY SECTION

Mr. Michael Stead  
Railroad Safety Program Administrator  
Illinois Commerce Commission  
527 E. Capitol Ave.  
Springfield, IL 62794-9280

T07-0051

RE: U.S. DOT Crossing Inventory

Dear Mr. Stead:

Attached is the FRA F 6180.71 form giving notice of changes in existing data.

Crossing Number  
261007S

Location  
Joliet

Street/Highway  
Theodore

Respectfully,

Ken L. Hay  
Safety, Quality &  
Administrative Manager

KLH/mw  
Attachments

cc: G. Hodgin

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