

# U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

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

A. Initiating Agency <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State <div style="text-align: center; font-size: 1.2em; font-weight: bold;">289151R</div>	B. Crossing Number (max. 7 char.) <div style="text-align: center; font-size: 1.2em; font-weight: bold;">289151R</div>	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) <div style="text-align: center; font-weight: bold;">01/08/2009</div>
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## Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char.) or name) <b>IC</b>		2. State (2 char.) <b>IL</b>	3. County (max. 20 char.) <b>COLES</b>
4. Railroad Division or Region (max. 14 char.) <b>NORTHERN REG.</b>	5. Railroad Subdivision or District (max. 14 char.) <b>CHAMPAIGN</b>	6. Branch or Line Name (max. 15 char.) <b>MAINLINE</b>	7. RR Milepost (max. 7 char.) (nnnnn.nn) <b>0180.20</b>
8. RR I.D. No. (max. 10 char.) <b>180-2</b>	9. Nearest RR Timetable Station (max. 15 char.) (optional) <b>MATTOON</b>	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 <b>MATTOON</b>		13. Street or Road Name (max. 17 char.) <b>020N</b>	STATE SUPPLIED INFORMATION 21. HSR Corridor ID (2 char.)
14. Highway Type & No. (max. 7 char.) <b>TR271A</b>	15. ENS Sign Installed (1-800) <input type="checkbox"/> Yes <input type="checkbox"/> No	16. Quiet Zone <input checked="" type="checkbox"/> No <input type="checkbox"/> Partial <input type="checkbox"/> 24 hr <input type="checkbox"/> Unknown	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 checked="" type="checkbox"/> AMTRAK <input type="checkbox"/> AMTRAK & Other <input type="checkbox"/> Other <input type="checkbox"/> None	20. Average Passenger Train Count Per Day <b>6</b>
23. Latitude (max. 10 char., nn.nnnnnn) <b>39.3822710</b>		24. Longitude (max. 11 char., nnn.nnnnnn) <b>-088.4236300</b>	
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"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs Specify (max. 15 char.) _____ <input type="checkbox"/> Signals Specify (max. 15 char.) _____
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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.) <b>(800)-995-7908</b>	32. Railroad Contact (Telephone No.)	33. State Contact (Telephone No.)
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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>25</b>	1.B. Total Switching Trains <b>1</b>	1.C. Total Daylight Thru Trains (6 AM to 6 PM) <b>10</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 Speed (mph) <b>79</b>			
2 B. Typical Speed Range Over Crossing (mph) from <b>40</b> to <b>79</b>			
3. Type and Number of Tracks			
Main <b>1</b> Other <b>0</b> If Other, Specify (max. 10 char.) _____			
4. Does Another RR Operate a Separate Track at Crossing? If Yes, Specify RR (max. 16 char.)		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		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>ATK</b>	

# U.S. DOT CROSSING INVENTORY FORM

B. Crossing Number (max. 7 char.) <b>289151R</b>		<b>PAGE 2</b>			D. Effective Date (MM/DD/YYYY) <b>01/08/2009</b>	
<b>Part III: Traffic Control Device Information</b>						
1. No Signs or Signals <input type="checkbox"/> Check if Correct	2. Type of Warning Device at Crossing - <b>Signs</b> (specify number of each)					
	2.A. Crossbucks _____ <b>0</b> _____	2.B. Highway Stop Signs (R1-1) _____	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 Xing Symbols <input checked="" 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 - <b>Train Activated Devices</b> (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. Cantilevered (or Bridged) Flashing Lights: Over Traffic Lane (number) _____ Not Over Traffic Lane (number) _____		3.D. Mast Mounted Flashing Lights (number) <u>2</u>	3.E. Number of Flashing Light Pairs <u>4</u>	
3.F. Other Flashing Lights: Number _____ Specify Type (max. 9 char.) _____			3.G. Highway Traffic Signals (number)	3.H. Wigwags (number)	3.J. Bells (number) <u>1</u>	
3.K. Other Train Activated Warning Devices: (specify) (max. 9 char.) _____						
4. Specify Special Warning Device 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 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. Signalling for Train Operation: Is Track Equipped With Signals? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8. Traffic Light Interconnection/Preemption <input checked="" 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
<b>Part IV: Physical Characteristics</b>						
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 _____ <b>1</b> _____		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 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		11. Space Reserved For Future		
<b>Part V: Highway Information</b>						
1. Highway System <input type="checkbox"/> Interstate <input type="checkbox"/> Federal Aid, Not NHS <input type="checkbox"/> Nat. Hwy System (NHS) <input checked="" type="checkbox"/> Non Federal Aid		2. Is Crossing on State Highway System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3. Functional Classification of Road at Crossing _____ <b>09</b> _____	4. Posted Highway Speed _____ <b>0</b> _____		
5. Annual Average Daily Traffic (AADT) Year <b>2004</b> AADT <b>000059</b>		6. Estimate Percent Trucks _____ <b>00</b> _____	7. Average Number of School Buses Over Crossing per School Day _____ <b>0</b> _____			

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.



Arne Skrodal  
Signal Design Officer  
Signals & Communications

Canadian National Railway  
17641 South Ashland Avenue  
Homewood, Illinois 60430-1339

708-332-3271  
708-332-3514 Fax

January 9, 2009  
179/3

RECEIVED  
JAN 14 2009

Illinois Commerce Commission  
RAIL SAFETY SECTION

Mr. David Lazarides  
Director of Processing and Information  
Transportation Division  
Illinois Commerce Commission  
527 East Capitol Ave.  
Springfield, IL 62701

T08-0007

6-12790

Dear Mr. Lazarides:

The automatic flashing light signals with gates controlled by constant warning time circuitry at 020N / TR 271A (DOT-289 151R), near Mattoon (Etna), Coles County, Illinois were placed in service on January 8, 2009.

This is to certify that the warning devices operate as intended and were installed in accordance with Illinois Commerce Commission Order No. T08-0007 dated January 30, 2008 and was authorized by X-Resolution 12790 dated October 2, 2008.

Attached is the U.S. DOT Crossing Inventory Form, covering the above mentioned signal work.

Sincerely,

*Arne Skrodal*

cc: Mr. Charles J. Ingersoll, P.E.  
Engineer of Local Roads and Streets  
Illinois Department of Transportation  
2300 South Dirksen Parkway  
Springfield, IL 62764

DOCKETED

JAN 14 2009

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