

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;">292694K</div>	B. Crossing Number (max. 7 char.) <div style="text-align: center; font-size: 1.2em; font-weight: bold;">292694K</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;">01/06/2010</div>
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Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char.) or name) IC		2. State (2 char.) IL	3. County (max. 20 char.) TAZEWELL	
4. Railroad Division or Region (max. 14 char.) NORTHERN REG.		5. Railroad Subdivision or District (max. 14 char.) PEORIA	6. Branch or Line Name (max. 15 char.) MAIN TRACK	
7. RR Milepost (max. 7 char.) (nnnnn.nn) 0019.55				
8. RR I.D. No. (max. 10 char.) 19-6-B	9. Nearest RR Timetable Station (max. 15 char.) (optional) GREEN VALLEY	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 GREEN VALLEY		13. Street or Road Name (max. 17 char.) WOODROW RD		STATE SUPPLIED INFORMATION
14. Highway Type & No. (max. 7 char.) TR223		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	
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 0
21. HSR Corridor ID (2 char.)		22. County Map Ref. No. (max. 10 char.)		23. Latitude (max. 10 char., nn.nnnnnnn) 40.4739690
24. Longitude (max. 11 char., nnn.nnnnnnn) -089.6439360		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.) (800)-995-7908	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 6	1.B. Total Switching Trains 2	1.C. Total Daylight Thru Trains (6 AM to 6 PM) 2	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) 40			
2 B. Typical Speed Range Over Crossing (mph) from 25 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? 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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B. Crossing Number (max. 7 char.) 292694K	PAGE 2	D. Effective Date (MM/DD/YYYY) 01/06/2010
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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 _____ 0		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 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 - Train Activated Devices (specify number of each)					
3.A. Gates _____ 2		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) _____ 2		3.E. Number of Flashing Light Pairs _____ 5		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) _____ 1	
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 type="checkbox"/> Yes <input checked="" 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					

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 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	

Part V: Highway Information

1. Highway System <input type="checkbox"/> Interstate <input type="checkbox"/> Federal Aid, Not NHS <input type="checkbox"/> Nat. Hwy System (NHS) <input checked="" type="checkbox"/> Non Federal Aid		2. Is Crossing on State Highway System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		3. Functional Classification of Road at Crossing _____ 09	4. Posted Highway Speed _____ 0
5. Annual Average Daily Traffic (AADT) Year 2003 AADT 000200		6. Estimate Percent Trucks _____ 05		7. Average Number of School Buses Over Crossing per School Day _____ 0	

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.

**ILLINOIS COMMERCE COMMISSION
TRANSPORTATION DIVISION / RAIL SAFETY SECTION**

PROJECT STATUS REPORT: T09-0029 RECEIVED

JAN 11 2010

TYPE: (CHECK ONE)

PROGRESS	<input type="checkbox"/>
COMPLETION	<input checked="" type="checkbox"/>

DATE | January 7, 2010

Illinois Commerce Commission
RAIL SAFETY SECTION

PROJECT INFORMATION:

Reporting Party:	Illinois Central Railroad Company
Docket/Order #; Date:	T09-0029, March 25, 2009
Status Reports Due:	30 Days from Order date - Temp. STOP signs (4/24/2009) 6 Months from Order date - Status (9/25/2009)
Ordered Completion Date:	12 months from Order date (3/25/2010)
Completion Report Due ¹ :	No more than 5 days after Completion Date (≤ 3/30/2010)
AAR/DOT#, Milepost:	292 694K, 19.55-B
Street, (in/near) City, County:	Woodrow Road/TR223, Near Green Valley, Tazewell Co.
Railroad Company:	Illinois Central Railroad Company

¹Completion reports involving changes to the railroad crossing must include an updated USDOT Inventory Form.

PROJECT MANAGER INFORMATION²:

Name:	Arne Skrodal
Title:	Engineer - Signal Planning
Representing:	Illinois Central Railroad Company (ICRR)
Street Address:	17641 South Ashland Avenue
City, State, Zip:	Homewood, Illinois 60430
Office Phone:	(708) 332-3271
Office Fax:	(708) 332-3514
Cellular Phone:	
E-Mail Address:	Arne.Skrodal@cn.ca

²Project Manager Information to be submitted by Roadway Authority and Railroad Company

DESCRIPTION OF IMPROVEMENT(S) ORDERED:

- Installation of Temporary STOP Signs, by ICRR
- Installation of automatic flashing light signals and gates, and CWT, by ICRR

STATUS OF WORK: The automatic flashing light signals with gates controlled by constant warning time circuitry were placed in service on January 6, 2010.

DOCKETED

JAN 11 2010

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T09-0029/SA 1380

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**ILLINOIS COMMERCE COMMISSION
TRANSPORTATION DIVISION / RAIL SAFETY SECTION**

Mail directed to the **Rail Safety Section** or the **Director of Processing and Information**, Transportation Bureau of the Commission should be addressed to:

Illinois Commerce Commission
527 East Capitol Avenue
Springfield, IL 62701-1827

If you have questions contact:

Joe VonDeBur, Rail Safety Specialist
Phone: (217) 557-1286
Email: jvondebu@icc.illinois.gov

A **Form 3** can be obtained from the Illinois Commerce Commission by calling 217/782-7660 or on the web at:

<http://www.icc.illinois.gov/forms/results.aspx?st=4>

The billing address for **Grade Crossing Protection Fund** reimbursement is:

SIGNAL WORK

Illinois Department of Transportation
Fiscal Control Unit
Bureau of Local Roads and Streets
2300 South Dirksen Parkway
Springfield, Illinois 62764

Sand Prairie Township
102 S Church
Green Valley, IL 61534

Information regarding the crossing inventory and the **United States Department of Transportation Inventory Form #6180.71** can be obtained on the web at:

<http://www.fra.dot.gov/us/content/801>

Submit Inventory forms to:

Federal Railroad Administration Office of Safety, MS25 1200 New Jersey Avenue SE Washington, DC 20590-0001	And	Chief of Data Services Illinois Department of Transportation 2300 S. Dirksen Parkway Springfield, IL 62764
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