

### 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) <b>328047F</b>	C. Reason for Update <input type="checkbox"/> Changes in existing data <input type="checkbox"/> New Crossing <span style="color: red; font-weight: bold; font-size: 1.2em;">X</span> <span style="background-color: yellow; padding: 2px;">Closed Crossing or Abandoned</span>	D. Effective Date (MM/DD/YYYY) <b>1/20/2012</b>
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**Part I: Location and Classification Information**

1. Railroad Oper. Co. (code (max. 4 char) or name) <b>NS</b>	2. State (2 char) <b>IL</b>	3. County (max 20 char) <b>MADISON</b>	
4. Railroad Division or Region (max 14 char) <b>ILLINOIS</b>	5. Railroad Subdivision or District (max 14 char) <b>NW</b>	6. Branch or Line Name (max 25 char) <b>A&amp;E</b>	7. RR Milepost (max 7 char) (nnnn.nm) <b>AE 10.3</b>
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 checked="" type="checkbox"/> In one) <input type="checkbox"/> Near <b>GRANITE CITY</b>		13. Street or Road Name (max 17 char) <b>22ND STREET</b>	STATE SUPPLIED INFORMATION
14. Highway Type & No. (max 7 char)		15. ENS Sign Installed (1-800) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	21. HSR Corridor ID (2 char) <b>0</b>
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	22. County Map Ref.No. (max 10 char) <b>0</b>
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.nnnnnn) <b>0</b>
26. Is there an Adjacent Crossing With a Separate Number? <input type="checkbox"/> Yes <input type="checkbox"/> No   If Yes, Provide Number _____ (7 characters)		24. Longitude (max 10 char, nn.nnnnnn) <b>0</b>	
27. PRIVATE CROSSING INFORMATION		25. Lat/Long Source <input type="checkbox"/> Actual <input type="checkbox"/> Estimated	

27.A. Category (check one) <input type="checkbox"/> Recreational <input type="checkbox"/> Farm <input type="checkbox"/> Residential	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.) <b>8009464744</b>	32. Railroad Contact (Telephone No.) <b>8009464744</b>	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 <b>10</b>	1.B. Total Switching Trains <b>10</b>	1.C. Total Daylight Thru Trains (6AM to 6PM) <b>0</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>15</b>			
2.B. Typical Speed Range Over Crossing (mph) From <b>0</b> to <b>10</b>			
3. Type and Number of Tracks			
Main <b>1</b> Other <b>2</b> If Other, Specify (max 10 char) <b>SIDING</b>			
4. Does Another RR Operate a Separate Track at Crossing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   If Yes, Specify RR (max 16 chars) <b>CR</b>		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)	

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B. Crossing Number (max 7 char) <b>328047F</b>	<b>CROSSING PAGE 2 INVENTORY FORM</b>	D. Effective Date (MM/DD/YYYY) <b>1/20/2012</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.C. RR Advance Warning Signs (W10-1) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	
2.E. Pavement Markings <input type="checkbox"/> Stoplines <input checked="" type="checkbox"/> RR Crossing Symbols <input type="checkbox"/> None		2.A. Crossbucks <u>3</u>	2.B. Highway Stop Signs (R1-1) <u>0</u>	2.F. Other Signs: (specify MUTCD type) Number <u>0</u> Specify Type (max 10 char) _____ Number <u>0</u> Specify Type (max 10 char) _____			
3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each)							
3.A. Gates <u>0</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) <u>1</u> Not Over Traffic Lane (number) <u>0</u>		3.D. Mast Mounted Flashing Lights (number) <u>4</u>	3.E. Number of Flashing Light Pairs <u>6</u>		
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>2</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 checked="" type="checkbox"/> Constant Warning Time <input type="checkbox"/> Motion Detection		7. Signalling for Train Operation Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Traffic Light Interconnection/Preemption <input checked="" type="checkbox"/> Not Interconnected <input type="checkbox"/> Simultaneous Preemption <input type="checkbox"/> Advance Preemption <input type="checkbox"/> N/A			
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 type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional				2. Smallest Crossing Angle <input type="checkbox"/> 0° - 29° <input type="checkbox"/> 30° - 59° <input checked="" type="checkbox"/> 60° - 90°			
3. Number of Traffic Lanes Crossing Railroad <u>2</u>		4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Is Highway Paved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
6. Crossing Surface (on main line) <input type="checkbox"/> 1. Timber <input checked="" type="checkbox"/> 2. Asphalt <input type="checkbox"/> 3. Asphalt and Flange <input type="checkbox"/> 4. Concrete <input type="checkbox"/> 5. Concrete and Rubber <input type="checkbox"/> 6. Rubber <input type="checkbox"/> 7. Metal <input type="checkbox"/> 8. Unconsolidated <input type="checkbox"/> 9. Other (Specify) _____							
7. Does Track Run Down a Street? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Nearby Intersecting Highway? <input type="checkbox"/> Less than 75 feet <input type="checkbox"/> 75 to 200 feet <input type="checkbox"/> 200 to 500 feet <input checked="" type="checkbox"/> N/A Is it signalized? <input type="checkbox"/> Yes <input type="checkbox"/> No					
9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest rail) <input type="checkbox"/> Yes <input 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 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 <u>19</u>		4. Posted Highway Speed <u>0</u>	
5. Annual Average Daily Traffic (AADT) Year _____ AADT <u>1500</u>		6. Estimate Percent Trucks <u>0</u>		7. Average Number of School Buses Over Crossing per Day _____			

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