



BARRINGTON

September 20, 2016

Robert Lauby
Associate Administrator for Railroad Safety and Chief Safety Officer
Federal Railroad Administration
1200 New Jersey Avenue, SE
Washington DC 20590

**RE: Grade Crossing Inventory Update - Quiet Zone Update
Crossing No. 260515D**

Dear Mr. Lauby:

As required by 49 CFR 222.47(a), the Village of Barrington has performed an inspection of the Quiet Zone located at Crossing No. 260515D. Enclosed please find a completed U.S. DOT Crossing Inventory Form, completed on 9/20/2016.

The Supplementary Safety Measures that were installed in 2011 as part of the Quiet Zone conform to the requirements of 49 CFR Part 222, Appendix A, as of the date of our inspection on September 20, 2016.

Please feel free to contact us with any questions you may have.

Thank you,

Jeff Ende, P.E.
Village Engineer

VILLAGE HALL
200 S. HOUGH ST.
BARRINGTON, IL 60010
(847) 304-3400

PRESIDENT & BOARD
MANAGER'S OFFICE
TEL (847) 304-3444
FAX (847) 304-3490

COMMUNITY AND
FINANCIAL SERVICES
TEL (847) 304-3400
FAX (847) 381-7506

DEVELOPMENT SERVICES
TEL (847) 304-3460
FAX (847) 381-1056

PUBLIC WORKS
300 N. RAYMOND AVE.
BARRINGTON, IL 60010
TEL (847) 381-7903
FAX (847) 382-3030

PUBLIC SAFETY
400 N. NORTHWEST HWY.
BARRINGTON, IL 60010

POLICE
TEL (847) 304-3300
FAX (847) 381-2165

FIRE
TEL (847) 304-3600
FAX (847) 381-1889

CC: Rob Robinson
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2300 S. Dirkson Parkway
Springfield, IL 62764

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Federal Railroad Administration
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Chicago, IL 60606

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Homewood, IL 60430

U. S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION
FEDERAL RAILROAD ADMINISTRATION

OMB No. 2130-0017

Instructions for the initial reporting of the following types of new or previously unreported crossings: For public highway-rail grade crossings, complete the entire inventory Form. For private highway-rail grade crossings, complete the Header, Parts I and II, and the Submission Information section. For public pathway grade crossings (including pedestrian station grade crossings), complete the Header, Parts I and II, and the Submission Information section. For Private pathway grade crossings, complete the Header, Parts I and II, and the Submission Information section. For grade-separated highway-rail or pathway crossings (including pedestrian station crossings), complete the Header, Part I, and the Submission Information section. For changes to existing data, complete the Header, Part I Items 1-3, and the Submission Information section, in addition to the updated data fields. Note: For private crossings only, Part I Item 20 and Part III Item 2.K. are required unless otherwise noted. An asterisk * denotes an optional field.

A. Revision Date (MM/DD/YYYY) 09 / 20 / 2016	B. Reporting Agency <input type="checkbox"/> Railroad <input type="checkbox"/> Transit <input type="checkbox"/> State <input checked="" type="checkbox"/> Other	C. Reason for Update (Select only one) <input type="checkbox"/> Change in Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed <input type="checkbox"/> Re-Open <input type="checkbox"/> Date Change Only <input type="checkbox"/> Change in Primary Operating RR <input type="checkbox"/> No-Train Traffic <input checked="" type="checkbox"/> Quiet Zone Update <input type="checkbox"/> Admin. Correction	D. DOT Crossing Inventory Number <div style="font-size: 24pt; font-weight: bold;">260515D</div>
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Part I: Location and Classification Information

1. Primary Operating Railroad WISCONSIN CENTRAL LTD (ALSO RAILWAY) [WC]		2. State ILLINOIS		3. County LAKE	
4. City / Municipality <input checked="" type="checkbox"/> In <input type="checkbox"/> Near BARRINGTON		5. Street/Road Name & Block Number HOUGH STREET (Street/Road Name) * (Block Number)		6. Highway Type & No. ILL59	
7. Do Other Railroads Operate a Separate Track at Crossing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Specify RR			8. Do Other Railroads Operate Over Your Track at Crossing? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Specify RR UP, CN		
9. Railroad Division or Region <input type="checkbox"/> None CHICAGO TERM		10. Railroad Subdivision or District <input type="checkbox"/> None LEITHTON		11. Branch or Line Name <input type="checkbox"/> None MAIN	
12. RR Milepost 0049.80 (prefix) (nnnn.nnn) (suffix)		13. Line Segment * SC00061818		14. Nearest RR Timetable Station * BARRINGTON	
15. Parent RR (if applicable) <input type="checkbox"/> N/A		16. Crossing Owner (if applicable) <input type="checkbox"/> N/A WC		17. Crossing Type <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	
18. Crossing Purpose <input checked="" type="checkbox"/> Highway <input type="checkbox"/> Pathway, Ped. <input type="checkbox"/> Station, Ped.		19. Crossing Position <input checked="" type="checkbox"/> At Grade <input type="checkbox"/> RR Under <input type="checkbox"/> RR Over		20. Public Access (if Private Crossing) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
21. Type of Train <input checked="" type="checkbox"/> Freight <input type="checkbox"/> Intercity Passenger <input type="checkbox"/> Commuter		22. Average Passenger Train Count Per Day <input type="checkbox"/> Less Than One Per Day <input checked="" type="checkbox"/> Number Per Day ⁰		23. Type of Land Use <input type="checkbox"/> Open Space <input type="checkbox"/> Farm <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Recreational <input type="checkbox"/> RR Yard	
24. Is there an Adjacent Crossing with a Separate Number? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Provide Crossing Number			25. Quiet Zone (FRA provided) <input type="checkbox"/> No <input checked="" type="checkbox"/> 24 Hr <input type="checkbox"/> Partial <input type="checkbox"/> Chicago Excused Date Established 2011		
26. HSR Corridor ID <input type="checkbox"/> N/A		27. Latitude in decimal degrees 42.1588616 (WGS84 std: nn.nnnnnnn)		28. Longitude in decimal degrees -88.1360945 (WGS84 std: -nnn.nnnnnnn)	
29. Lat/Long Source <input checked="" type="checkbox"/> Actual <input type="checkbox"/> Estimated		30.A. Railroad Use *		31.A. State Use *	
30.B. Railroad Use *		31.B. State Use *		30.C. Railroad Use *	
30.D. Railroad Use * MAIN		31.C. State Use *		30.D. Railroad Use *	
32.A. Narrative (Railroad Use) * REMOTE MONITORING SYSTEM -2 MULTI USE			32.B. Narrative (State Use) * REMOTE MONITORING SYSTEM -2 MULTI USE		
33. Emergency Notification Telephone No. (posted) 800-465-9239		34. Railroad Contact (Telephone No.) 715-345-2503		35. State Contact (Telephone No.) 217-782-0378	

Part II: Railroad Information

1. Estimated Number of Daily Train Movements				
1.A. Total Day Thru Trains (6 AM to 6 PM) 8	1.B. Total Night Thru Trains (6 PM to 6 AM) 7	1.C. Total Switching Trains 0	1.D. Total Transit Trains 0	1.E. Check if Less Than One Movement Per Day <input type="checkbox"/> How many trains per week? _____
2. Year of Train Count Data (YYYY) 2016		3. Speed of Train at Crossing 3.A. Maximum Timetable Speed (mph) ⁴⁵ 3.B. Typical Speed Range Over Crossing (mph) From ⁵ to ⁴⁵		
4. Type and Count of Tracks Main ¹ Siding _____ Yard _____ Transit _____ Industry _____				
5. Train Detection (Main Track only) <input checked="" type="checkbox"/> Constant Warning Time <input type="checkbox"/> Motion Detection <input type="checkbox"/> AFO <input type="checkbox"/> PTC <input type="checkbox"/> DC <input type="checkbox"/> Other <input type="checkbox"/> None				
6. Is Track Signaled? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		7.A. Event Recorder <input type="checkbox"/> Yes <input type="checkbox"/> No		7.B. Remote Health Monitoring <input type="checkbox"/> Yes <input type="checkbox"/> No

U. S. DOT CROSSING INVENTORY FORM

A. Revision Date (MM/DD/YYYY)		PAGE 2		D. Crossing Inventory Number (7 char.)	
Part III: Highway or Pathway Traffic Control Device Information					
1. Are there Signs or Signals? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2. Types of Passive Traffic Control Devices associated with the Crossing				
	2.A. Crossbuck Assemblies (count) 2	2.B. STOP Signs (R1-1) (count) 0	2.C. YIELD Signs (R1-2) (count) 0	2.D. Advance Warning Signs (Check all that apply; include count) <input type="checkbox"/> None <input checked="" type="checkbox"/> W10-1 ² <input type="checkbox"/> W10-3 <input type="checkbox"/> W10-11 <input type="checkbox"/> W10-2 <input type="checkbox"/> W10-4 <input type="checkbox"/> W10-12	
2.E. Low Ground Clearance Sign (W10-5) <input type="checkbox"/> Yes (count _____) <input checked="" type="checkbox"/> No	2.F. Pavement Markings <input checked="" type="checkbox"/> Stop Lines <input type="checkbox"/> Dynamic Envelope <input checked="" type="checkbox"/> RR Xing Symbols <input type="checkbox"/> None		2.G. Channelization Devices/Medians <input checked="" type="checkbox"/> All Approaches <input type="checkbox"/> Median <input type="checkbox"/> One Approach <input type="checkbox"/> None		2.H. EXEMPT Sign (R15-3) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.J. Other MUTCD Signs <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Specify Type <u>W10-9 (No Train Horn)</u> Count <u>5</u> Specify Type <u>R15-8 (Look)</u> Count <u>4</u> Specify Type <u>R8-8 (Do Not Stop on Tracks)</u> Count <u>5</u>			2.K. Private Crossing Signs (if private) <input type="checkbox"/> Yes <input type="checkbox"/> No	2.L. LED Enhanced Signs (List types) R8-8 Do Not Stop On Tracks - 4	
3. Types of Train Activated Warning Devices at the Grade Crossing (specify count of each device for all that apply)					
3.A. Gate Arms (count) Roadway ² Pedestrian ⁰	3.B. Gate Configuration <input checked="" type="checkbox"/> 2 Quad <input type="checkbox"/> Full (Barrier) Resistance <input type="checkbox"/> 3 Quad <input type="checkbox"/> Median Gates <input type="checkbox"/> 4 Quad	3.C. Cantilevered (or Bridged) Flashing Light Structures (count) Over Traffic Lane ² <input checked="" type="checkbox"/> Incandescent Not Over Traffic Lane _____ <input type="checkbox"/> LED		3.D. Mast Mounted Flashing Lights (count of masts) ² <input checked="" type="checkbox"/> Incandescent <input type="checkbox"/> LED <input type="checkbox"/> Back Lights Included <input type="checkbox"/> Side Lights Included	
3.F. Installation Date of Current Active Warning Devices: (MM/YYYY) _____ / _____ <input type="checkbox"/> Not Required			3.G. Wayside Horn <input type="checkbox"/> Yes Installed on (MM/YYYY) _____ / _____ <input checked="" type="checkbox"/> No		3.H. Highway Traffic Signals Controlling Crossing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.J. Non-Train Active Warning <input type="checkbox"/> Flagger/Flagman <input type="checkbox"/> Manually Operated Signals <input type="checkbox"/> Watchman <input type="checkbox"/> Floodlighting <input checked="" type="checkbox"/> None				3.K. Other Flashing Lights or Warning Devices Count ⁰ Specify type _____	
4.A. Does nearby Hwy Intersection have Traffic Signals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4.B. Hwy Traffic Signal Interconnection <input type="checkbox"/> Not Interconnected <input type="checkbox"/> For Traffic Signals <input type="checkbox"/> For Warning Signs	4.C. Hwy Traffic Signal Preemption <input type="checkbox"/> Simultaneous <input type="checkbox"/> Advance	5. Highway Traffic Pre-Signals <input type="checkbox"/> Yes <input type="checkbox"/> No Storage Distance * _____ Stop Line Distance * _____		6. Highway Monitoring Devices (Check all that apply) <input type="checkbox"/> Yes - Photo/Video Recording <input type="checkbox"/> Yes - Vehicle Presence Detection <input type="checkbox"/> None
Part IV: Physical Characteristics					
1. Traffic Lanes Crossing Railroad Number of Lanes ² <input type="checkbox"/> One-way Traffic <input checked="" type="checkbox"/> Two-way Traffic <input type="checkbox"/> Divided Traffic		2. Is Roadway/Pathway Paved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		3. Does Track Run Down a Street? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Crossing Surface (on Main Track, multiple types allowed) Installation Date * (MM/YYYY) _____ / _____ Width * _____ Length * _____ <input type="checkbox"/> 1 Timber <input type="checkbox"/> 2 Asphalt <input type="checkbox"/> 3 Asphalt and Timber <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 Composite <input type="checkbox"/> 10 Other (specify) _____					
6. Intersecting Roadway within 500 feet? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Approximate Distance (feet) ²⁰⁰ _____			7. Smallest Crossing Angle <input type="checkbox"/> 0° - 29° <input type="checkbox"/> 30° - 59° <input checked="" type="checkbox"/> 60° - 90°		8. Is Commercial Power Available? * <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Part V: Public Highway Information					
1. Highway System <input type="checkbox"/> (01) Interstate Highway System <input checked="" type="checkbox"/> (02) Other Nat Hwy System (NHS) <input type="checkbox"/> (03) Federal AID, Not NHS <input type="checkbox"/> (08) Non-Federal Aid		2. Functional Classification of Road at Crossing <input type="checkbox"/> (0) Rural <input checked="" type="checkbox"/> (1) Urban <input type="checkbox"/> (1) Interstate <input type="checkbox"/> (5) Major Collector <input type="checkbox"/> (2) Other Freeways and Expressways <input checked="" type="checkbox"/> (3) Other Principal Arterial <input type="checkbox"/> (6) Minor Collector <input type="checkbox"/> (4) Minor Arterial <input type="checkbox"/> (7) Local		3. Is Crossing on State Highway System? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7. Annual Average Daily Traffic (AADT) Year <u>2015</u> AADT <u>17400</u>		8. Estimated Percent Trucks <u>7</u> %		9. Regularly Used by School Buses? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Average Number per Day <u>5</u>	
				4. Highway Speed Limit <u>30</u> MPH <input checked="" type="checkbox"/> Posted <input type="checkbox"/> Statutory	
				5. Linear Referencing System (LRS Route ID) *	
				6. LRS Milepost *	
				10. Emergency Services Route <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Submission Information - This information is used for administrative purposes and is not available on the public website.					
Submitted by <u>Jeffrey M. Ende, Village Engineer</u> Organization <u>Village of Barrington</u> Phone <u>847-304-3464</u> Date <u>9/20/2016</u>					
Public reporting burden for this information collection is estimated to average 30 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, a federal agency may not conduct or sponsor, and a person is not required to, nor shall a person be subject to a penalty for failure to comply with, a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for information collection is 2130-0017. Send comments regarding this burden estimate or any other aspect of this collection, including for reducing this burden to: Information Collection Officer, Federal Railroad Administration, 1200 New Jersey Ave. SE, MS-25 Washington, DC 20590.					