

# HIGHWAY-RAIL GRADE CROSSING WARNING SYSTEM ACTIVATION FAILURE REPORT

OMB Approval No.: 2130-0534

Public reporting burden for this information collection is estimated to average 10 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 respond 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 this information collection is 2130-0534. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection, including suggestions for reducing this burden to: Information Collection Officer, Federal Railroad Administration, 1200 New Jersey Ave., S.E., Washington D.C. 20590.

Each railroad shall submit a report of each activation failure to FRA within 15 days after the failure occurs. Copies of this form may be obtained from the Federal Railroad Administration's web site at [www.fra.dot.gov](http://www.fra.dot.gov)

An activation failure means the failure of an active highway-rail grade crossing warning system to indicate the approach of a train at least 20 seconds prior to the train's arrival at the crossing, or to indicate the presence of a train occupying the crossing, unless the crossing is provided with an alternative means of active warning to highway users of approaching trains. (This failure indicates to the motorist that it is safe to proceed across the railroad tracks when, in fact, it is not safe to do so.)

A train means one or more locomotives, with or without cars.

Email to: <a href="mailto:fra.af/fp.reporting@dot.gov">fra.af/fp.reporting@dot.gov</a>	Name of Railroad	RR Code
	Region/Division (Optional)	
	Reporting Employee (Signature/Title)	Date Signed
	DOT Crossing Number	
	Accident/Incident Involved? <input type="checkbox"/> Yes <input type="checkbox"/> No (Defined in 49 CFR Section 225.5)	

## CLASSIFICATION

Current Active Warning Devices (Check all that apply)

1  Gates    2  Cantilevered Flashing Lights    3  Flashing Lights    4  Wig Wags    5  Hwy. Traffic Signals    6  Bell

7  Other (Describe)

## LOCATION

Street/Road	County/Parish	City	State	RR Mile Post
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## CORRECTIVE ACTION

Failure Reported/Discovered	Repairs Completed
Date (mm/dd/yy)   Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Date (mm/dd/yy)   Time <input type="checkbox"/> AM <input type="checkbox"/> PM

<p>Cause of Failure Codes (Primary &amp; Secondary Required) <input type="checkbox"/> <input type="checkbox"/></p> <p><b>1 Power</b>  a Commercial  b Railroad  c Batteries  d Chargers/Transformers  e Power Surge  f Lightning (Fuses, Arresters)  g Loose Connections/Frayed Wires  h Other</p> <p><b>2 Rail</b>  a Rusty  b Contaminants on Rail  c Contaminants on Train Wheels  d Broken Rail  e Shorted Rail  f Track Connections  g Other</p> <p><b>3 Equipment</b>  a Relays  b Motion Detector  c Constant Warning Time Device  d Other Train Detection (e.g. AFO)  e Shunts/Couplers  f Crossing Controller  g Lamps  h Cable, Wiring Harness, or Grounds  i Other</p> <p><b>4 Human Factor</b>  a Interference  b Vandalism  c Design  d Testing  e Maintenance Procedures  f Communications Procedures  g Adjustments  h Other</p>	Provide a Brief Explanation of Failure:
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