INITIAL RAIL EQUIPMENT ACCIDENT/INCIDENT RECORD

DEPARTMENT OF TRANSPORTATION

OMB No. 2130-0500

FEDERAL RAILROAD ADMINISTRATION (FRA)							IVID INO. A	<u> </u>	-0300
Date of Accident/Incident (YY/MM/DD)			2. Time of Accident/Incident				AM PM		
Name of Railroad				4. Incident Numbe	er				
5. Other Railroad or Entity					6. Incident Number				
7. Railroad or Other Entity Responsible for Track Maintenance					8. Incident Number				
Type of Accident/Incident (Dera									
10. Number of Hazmat Cars Damaged or Derailed				11. Number of Hazmat Cars Releasing Product					
12. Subdivision	13. Nearest City/Town			14. County			15. State		
16. Milepost (to nearest tenth) 17. Specific Site									
18. Speed Actual Estimated				19. Train/Job Number					
20. Type of Equipment (Freight, Passenger, Yard/Switching, etc.)				21. Type of Track (Main, Yard, Siding, Industry)					
22. Total Locomotive Units in Train 23. Total Locomotives Derailed				24. Total of Cars in Equipment Consist 25. Total Cars Derailed					
26. Equipment Damage (in dollars)				27. Track, Signal, Way & Structure Damage (in dollars)					
28. Primary Cause				29. Contributing Cause					
30. Casualties		Nonfatal	Fatal				Nonfatal	Fa	atal
Worker on duty – railroad employee				Worker on duty - co	ontractor				
Railroad employees not on duty				Contractor - other					
Passengers on trains				Worker on duty - volunteer					
Nontrespassers/on railroad property				Volunteer - other					
Trespassers				Nontrespassers/off railroad property					
31. Narrative Description (Be specific, and continue on separate sheet if necessary)									
32. Was this accident/incident repo	orted to the FRA?	Yes [☐ No						
33. Name of Railroad Official		34. Signat	_	35. Telephone N		Number	mber 36. Date initially signed/completed		
NOTE: This report is part of the re or used for any purpose in See 49 C.F.R. 225.7 (b).							as evidence		
								_	

This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety. Public reporting burden is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a matter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.