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)* _____/_____/_____	**B. Reporting Agency** ☐ Railroad ☐ Transit ☐ State ☐ Other	**C. Reason for Update** *(Select only one)* ☐ Change in Data ☐ New Crossing ☐ Closed ☐ No Train Traffic ☐ Quiet Zone Update ☐ Re-Open ☐ Date Change Only ☐ Change in Primary Operating RR ☐ Admin. Correction	**D. DOT Crossing Inventory Number**

Part I: Location and Classification Information

1. Primary Operating Railroad	**2. State**	**3. County**

4. City / Municipality ☐ In ☐ Near	**5. Street/Road Name & Block Number** *(Street/Road Name)* | *(Block Number)*	**6. Highway Type & No.**

7. Do Other Railroads Operate a Separate Track at Crossing? ☐ Yes ☐ No If Yes, Specify RR	**8. Do Other Railroads Operate Over Your Track at Crossing?** ☐ Yes ☐ No If Yes, Specify RR

9. Railroad Division or Region ☐ None	**10. Railroad Subdivision or District** ☐ None	**11. Branch or Line Name** ☐ None	**12. RR Milepost** *(prefix)* | *(nnnn.nnn)* | *(suffix)*

13. Line Segment *	**14. Nearest RR Timetable Station** *	**15. Parent RR** *(if applicable)* ☐ N/A	**16. Crossing Owner** *(if applicable)* ☐ N/A

17. Crossing Type ☐ Public ☐ Private	**18. Crossing Purpose** ☐ Highway ☐ Pathway, Ped. ☐ Station, Ped.	**19. Crossing Position** ☐ At Grade ☐ RR Under ☐ RR Over	**20. Public Access** *(if Private Crossing)* ☐ Yes ☐ No	**21. Type of Train** ☐ Freight ☐ Intercity Passenger ☐ Commuter ☐ Transit ☐ Shared Use Transit ☐ Tourist/Other	**22. Average Passenger Train Count Per Day** ☐ Less Than One Per Day ☐ Number Per Day_____

23. Type of Land Use
☐ Open Space ☐ Farm ☐ Residential ☐ Commercial ☐ Industrial ☐ Institutional ☐ Recreational ☐ RR Yard

24. Is there an Adjacent Crossing with a Separate Number? ☐ Yes ☐ No If Yes, Provide Crossing Number _____	**25. Quiet Zone** *(FRA provided)* ☐ No ☐ 24 Hr ☐ Partial ☐ Chicago Excused Date Established _____

26. HSR Corridor ID ☐ N/A	**27. Latitude in decimal degrees** *(WGS84 std: nn.nnnnnnn)*	**28. Longitude in decimal degrees** *(WGS84 std: -nnn.nnnnnnn)*	**29. Lat/Long Source** ☐ Actual ☐ Estimated

30.A. Railroad Use *	**31.A. State Use** *
30.B. Railroad Use *	**31.B. State Use** *
30.C. Railroad Use *	**31.C. State Use** *
30.D. Railroad Use *	**31.D. State Use** *
32.A. Narrative *(Railroad Use)* *	**32.B. Narrative** *(State Use)* *

33. Emergency Notification Telephone No. *(posted)*	**34. Railroad Contact** *(Telephone No.)*	**35. State Contact** *(Telephone No.)*

Part II: Railroad Information

1. Estimated Number of Daily Train Movements

1.A. Total Day Thru Trains *(6 AM to 6 PM)*	1.B. Total Night Thru Trains *(6 PM to 6 AM)*	1.C. Total Switching Trains	1.D. Total Transit Trains	1.E. Check if Less Than One Movement Per Day ☐ How many trains per week? _____

2. Year of Train Count Data *(YYYY)*	3. Speed of Train at Crossing 3.A. Maximum Timetable Speed *(mph)* _____ 3.B. Typical Speed Range Over Crossing *(mph)* From _____ to _____

4. Type and Count of Tracks

Main _____ Siding _____ Yard _____ Transit _____ Industry _____

5. Train Detection *(Main Track only)*
☐ Constant Warning Time ☐ Motion Detection ☐AFO ☐ PTC ☐ DC ☐ Other ☐ None

6. Is Track Signaled? ☐ Yes ☐ No	7.A. Event Recorder ☐ Yes ☐ No	7.B. Remote Health Monitoring ☐ Yes ☐ No

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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? ☐ Yes ☐ No

2. Types of Passive Traffic Control Devices associated with the Crossing

2.A. Crossbuck Assemblies *(count)*	2.B. STOP Signs *(R1-1)* *(count)*	2.C. YIELD Signs *(R1-2)* *(count)*	2.D. Advance Warning Signs *(Check all that apply; include count)* ☐ None
			☐ W10-1 _____ ☐ W10-3 _____ ☐ W10-11 _____ ☐ W10-2 _____ ☐ W10-4 _____ ☐ W10-12 _____

2.E. Low Ground Clearance Sign *(W10-5)*	2.F. Pavement Markings	2.G. Channelization Devices/Medians	2.H. EXEMPT Sign *(R15-3)*	2.I. ENS Sign *(I-13)* Displayed
☐ Yes *(count_____)* ☐ No	☐ Stop Lines ☐ Dynamic Envelope ☐ RR Xing Symbols ☐ None	☐ All Approaches ☐ Median ☐ One Approach ☐ None	☐ Yes ☐ No	☐ Yes ☐ No

2.J. Other MUTCD Signs ☐ Yes ☐ No	2.K. Private Crossing Signs *(if private)*	2.L. LED Enhanced Signs *(List types)*
Specify Type _____ Count _____ Specify Type _____ Count _____ Specify Type _____ Count _____	☐ Yes ☐ No	

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)*	3.B. Gate Configuration	3.C. Cantilevered *(or Bridged)* Flashing Light Structures *(count)*	3.D. Mast Mounted Flashing Lights *(count of masts)* _____	3.E. Total Count of Flashing Light Pairs
Roadway _____ Pedestrian _____	☐ 2 Quad ☐ 3 Quad ☐ 4 Quad ☐ Full *(Barrier)* Resistance ☐ Median Gates	Over Traffic Lane _____ ☐ Incandescent Not Over Traffic Lane _____ ☐ LED	☐ Incandescent ☐ LED ☐ Back Lights Included ☐ Side Lights Included	

3.F. Installation Date of Current Active Warning Devices: *(MM/YYYY)*	3.G. Wayside Horn	3.H. Highway Traffic Signals Controlling Crossing	3.I. Bells *(count)*
_____/_____ ☐ Not Required	☐ Yes Installed on *(MM/YYYY)* _____/_____ ☐ No	☐ Yes ☐ No	

3.J. Non-Train Active Warning	3.K. Other Flashing Lights or Warning Devices
☐ Flagging/Flagman ☐ Manually Operated Signals ☐ Watchman ☐ Floodlighting ☐ None	Count _____ Specify type _____

4.A. Does nearby Hwy Intersection have Traffic Signals?	4.B. Hwy Traffic Signal Interconnection	4.C. Hwy Traffic Signal Preemption	5. Highway Traffic Pre-Signals	6. Highway Monitoring Devices *(Check all that apply)*
☐ Yes ☐ No	☐ Not Interconnected ☐ For Traffic Signals ☐ For Warning Signs	☐ Simultaneous ☐ Advance	☐ Yes ☐ No Storage Distance * _____ Stop Line Distance * _____	☐ Yes - Photo/Video Recording ☐ Yes – Vehicle Presence Detection ☐ None

Part IV: Physical Characteristics

1. Traffic Lanes Crossing Railroad	2. Is Roadway/Pathway Paved?	3. Does Track Run Down a Street?	4. Is Crossing Illuminated? *(Street lights within approx. 50 feet from nearest rail)*
☐ One-way Traffic ☐ Two-way Traffic ☐ Divided Traffic Number of Lanes _____	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

5. Crossing Surface *(on Main Track, multiple types allowed)* Installation Date * *(MM/YYYY)* _____/_____ Width * _____ Length * _____
☐ 1 Timber ☐ 2 Asphalt ☐ 3 Asphalt and Timber ☐ 4 Concrete ☐ 5 Concrete and Rubber ☐ 6 Rubber ☐ 7 Metal
☐ 8 Unconsolidated ☐ 9 Composite ☐ 10 Other *(specify)* _____

6. Intersecting Roadway within 500 feet?	7. Smallest Crossing Angle	8. Is Commercial Power Available? *
☐ Yes ☐ No If Yes, Approximate Distance *(feet)* _____	☐ 0° – 29° ☐ 30° – 59° ☐ 60° - 90°	☐ Yes ☐ No

Part V: Public Highway Information

1. Highway System	2. Functional Classification of Road at Crossing	3. Is Crossing on State Highway System?	4. Highway Speed Limit
☐ (01) Interstate Highway System ☐ (02) Other Nat Hwy System (NHS) ☐ (03) Federal AID, Not NHS ☐ (08) Non-Federal Aid	☐ (0) Rural ☐ (1) Urban ☐ (1) Interstate ☐ (5) Major Collector ☐ (2) Other Freeways and Expressways ☐ (3) Other Principal Arterial ☐ (6) Minor Collector ☐ (4) Minor Arterial ☐ (7) Local	☐ Yes ☐ No	_____ MPH ☐ Posted ☐ Statutory

5. Linear Referencing System *(LRS Route ID)* *

6. LRS Milepost *

7. Annual Average Daily Traffic *(AADT)*	8. Estimated Percent Trucks	9. Regularly Used by School Buses?	10. Emergency Services Route
Year _____ AADT _____	_____ %	☐ Yes ☐ No Average Number per Day _____	☐ Yes ☐ No

Submission Information - *This information is used for administrative purposes and is not available on the public website.*

Submitted by _____ Organization _____ Phone _____ Date _____