

DEPARTMENT OF TRANSPORTATION
FEDERAL RAILROAD ADMINISTRATION (FRA)

INSPECTION REPORT

OMB Approval No.: 2130-0509

Inspector's Name Sherwood, Daniel				Inspector's Signature				Inspector's ID No. M3005		Report No. 13		Date yy mm dd 2025 02 20		
Railroad/Company Name & Address BNSF RAILWAY COMPANY Great Falls MT						R/C R	Division SYSTEM		RR/Co. Representative (Receipt Acknowledged) Name David Johnson Title Mechanical Foreman Email david.johnson122807@bnsf.com Signature _____					
						RR/Co. Code BNSF	Subdivision SYSTEM							
From: City GREAT FALLS			Codes 0530		Destination City & County				Codes		From Latitude			
State MT			30		City						From Longitude			
County CASCADE			C013		County						To Latitude			
Mile Post: From To				Inspection Point GREAT FALLS YARD						To Longitude				
Activity Code:		215	224	229D	231	232	232X						CARS	
Units:		82	83	1	83	82	1					82		
Sub Units:		0	0	0	0	0	1					0		

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
1	PPRX	172022	T	231	0138	A11				N	N	1	231

Description
Top operating platform continuous barrier not provided at opening without side ladders.

Seal Applied		Seal Removed		Hazard Class		UN/NA ID	

Violation Recommended ☐ Yes ☒ No Latitude: Longitude:

Written Notification to FRA of Remedial Action is: ☐ Required ☒ Optional Railroad Action Code Date(mm/dd/yyyy): Comments on back?

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
2	BNSF	563722	FB	232	0103	F3				N	N	1	232

Description
(L2) brake shoe worn to backing plate.

Seal Applied		Seal Removed		Hazard Class		UN/NA ID	

Violation Recommended ☐ Yes ☒ No Latitude: Longitude:

Written Notification to FRA of Remedial Action is: ☐ Required ☒ Optional Railroad Action Code Date(mm/dd/yyyy): Comments on back?

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(Continuation)

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Inspector's ID No. M3005	Report No. 13	Report Date 2/20/2025
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
3	WFRX	856312	CH	232	0103	F3				N	N	1	232

Description
(L2) brake shoe worn to backing plate.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is:	<input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
4	GACX	62988	CH	215	0301	A1				N	N	1	215

Description
(Right-side) build date painted over.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is:	<input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
5	WFRX	898016	CH	215	0301	A1				N	N	1	215

Description
(Right-side) build date painted over.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is:	<input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
6	BNSF	480048	CH	215	0301	A1				N	N	1	215

Description
(Left-side) build date painted over.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is:	<input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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(Continuation)

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Inspector's ID No. M3005	Report No. 13	Report Date 2/20/2025
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
7										N	N	0	232X

Description - [** Comment to Railroad/Company **]

Inspected one train for securement of unattended equipment, no exceptions taken.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is:	<input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	<input type="text"/>	Date(mm/dd/yyyy):	<input type="text"/>	Comments on back?
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