

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

# INSPECTION REPORT

OMB Approval No.: 2130-0509

Inspector's Name Jackson, Dave				Inspector's Signature				Inspector's ID No. M3003		Report No. 34		Date yy mm dd 2020 03 03			
Railroad/Company Name & Address BNSF RAILWAY COMPANY  Gillette WY						R/C R		Division SYSTEM		RR/Co. Representative (Receipt Acknowledged) Name Trent Posten Title Assistant General Foreman Email trent.posten@bnsf.com / sean.vosahlo@bnsf.com Signature _____					
						RR/Co. Code BNSF		Subdivision SYSTEM							
From: City LAUREL			Codes 0700		Destination City & County				Codes		From Latitude				
State MT			30		City						From Longitude				
County YELLOWSTONE			C111		County						To Latitude				
Mile Post: From To				Inspection Point LAUREL WEST INTERCHANGE YARD								To Longitude			
Activity Code:	215	229D	231	232	232X	224							CARS		
Units:	70	3	73	70	1	73							70		
Sub Units:	0	0	0	0	0	0							0		

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
1	BNSF	8100	EMF	231	0138	A11			LAUREL WEST T2	N	N	1	231
Description REAR CONTINUOUS BARRIER NOT IN PLACE.													
Seal Applied			Seal Removed			Hazard Class			UN/NA ID				
Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						Latitude:			Longitude:				
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?		

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
2	BNSF	495344	CH	224	0103	C			LAUREL WEST T2	N	N	1	224
Description RIGHT SIDE REFLECTORIZATION PAINTED OVER.													
Seal Applied			Seal Removed			Hazard Class			UN/NA ID				
Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						Latitude:			Longitude:				
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?		

**DEPARTMENT OF TRANSPORTATION**  
FEDERAL RAILROAD ADMINISTRATION (FRA)

# INSPECTION REPORT

(Continuation)

OMB Approval No.: 2130-0509

Inspector's ID No. M3003	Report No. 34	Report Date 3/3/2020
-----------------------------	------------------	-------------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
3	BNSF	482632	CH	215	0301	A1			LAUREL WEST T2	N	N	1	215

Description  
LEFT SIDE CAR I.D. NUMBER DAMAGED, NOT FULLY READABLE.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

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?
--	--	----------------------	-------------------	-------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
4	BNSF	483240	CH	232	0103	F3			LAUREL WEST T2	N	N	1	232

Description  
R-3 BRAKE SHOE WORN TO THE BACKING PLATE.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

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?
--	--	----------------------	-------------------	-------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
5	BNSF	496718	CH	232	0103	F3			LAUREL WEST T2	N	N	1	232

Description  
R-1 BRAKE SHOE WORN TO THE BACKING PLATE.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

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?
--	--	----------------------	-------------------	-------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
6	BNSF	496718	CH	232	0103	F3			LAUREL WEST T2	N	N	1	232

Description  
R-2 BRAKE SHOE WORN TO THE BACKING PLATE.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

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?
--	--	----------------------	-------------------	-------------------

**DEPARTMENT OF TRANSPORTATION**  
FEDERAL RAILROAD ADMINISTRATION (FRA)

# INSPECTION REPORT

(Continuation)

OMB Approval No.: 2130-0509

Inspector's ID No. M3003	Report No. 34	Report Date 3/3/2020
-----------------------------	------------------	-------------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
7	BNSF	481426	CH	232	0103	F3			LAUREL WEST T2	N	N	1	232

Description  
R-4 BRAKE SHOE WORN TO THE BACKING PLATE.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

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?
--	--	----------------------	-------------------	-------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
8	BNSF	490533	CH	232	0103	F3			LAUREL WEST T2	N	N	1	232

Description  
R-4 BRAKE SHOE BROKEN.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

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?
--	--	----------------------	-------------------	-------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
9	BNSF	497024	CH	215	0103	A1			LAUREL WEST T2	N	N	1	215

Description  
L-1 WHEEL FLANGE THICKNESS 7/8".

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

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?
--	--	----------------------	-------------------	-------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
10	BNSF	479729	CH	232	0103	F3			LAUREL WEST T2	N	N	1	232

Description  
R-1 BRAKE SHOE WORN TO THE BACKING PLATE.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

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?
--	--	----------------------	-------------------	-------------------

**DEPARTMENT OF TRANSPORTATION**  
FEDERAL RAILROAD ADMINISTRATION (FRA)

**INSPECTION REPORT**  
(Continuation)

OMB Approval No.: 2130-0509

Inspector's ID No. M3003	Report No. 34	Report Date 3/3/2020
-----------------------------	------------------	-------------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
11	BNSF	476470	CH	215	0103	A1			LAUREL WEST T2	N	N	1	215

Description  
R-2 WHEEL FLANGE THICKNESS 7/8".

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

Written Notification to FRA of Remedial Action is:	<input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	<input type="text"/> <input type="text"/> <input type="text"/>	Date(mm/dd/yyyy):	<input type="text"/>	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
12	BNSF	496573	CH						LAUREL WEST T2	N	N	0	

Description - [\*\* Comment to Railroad/Company \*\*]  
R-4 WHEEL FLANGE @ A.A.R. LIMITS 15/16 INCH.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
--------------	--------------	--------------	----------

Violation Recommended	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
-----------------------	---	-----------	------------

Written Notification to FRA of Remedial Action is:	<input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	<input type="text"/> <input type="text"/> <input type="text"/>	Date(mm/dd/yyyy):	<input type="text"/>	Comments on back?
--	--	----------------------	--	-------------------	----------------------	-------------------