

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. 123		Date yy mm dd 2022 08 15		
Railroad/Company Name & Address BNSF RAILWAY COMPANY 107 1/2 N Sargent Glendive MT 59330						R/C R		Division SYSTEM		RR/Co. Representative (Receipt Acknowledged) Name Gabriel Schlosser Title General Foreman Email gabriel.schlosser@bnsf.com Signature _____				
						RR/Co. Code BNSF		Subdivision SYSTEM						
From: City FORSYTH				Codes 0430		Destination City & County				Codes		From Latitude		
State MT				30		City						From Longitude		
County ROSEBUD				C087		County						To Latitude		
Mile Post: From To				Inspection Point FORSYTH RAIL YARD								To Longitude		
Activity Code:	215	224	229D	231	232	232X							CARS	
Units:	40	42	2	42	40	5							40	
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	BNSF	5255	EMF	229	0067	A1				N	N	2	229D
Description Both L-4 & L-6 vertical shock leaking hydraulic oil.													
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	UTLX	682847	T							N	N	0	
Description - [** Comment to Railroad/Company **] B-R Spring nest has one coil spring shifted within the nest.													
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?		

INSPECTION REPORT

(Continuation)

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Inspector's ID No.	Report No.	Report Date
M3003	123	8/15/2022

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
3				232						N	N	0	232X

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

Inspected five cuts of rail equipment for securement of unattended equipment, no exceptions taken.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID

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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