

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. 119		Date yy mm dd 2022 08 08		
Railroad/Company Name & Address BNSF RAILWAY COMPANY 1135 1st Street Havre MT 59501						R/C R		Division SYSTEM		RR/Co. Representative (Receipt Acknowledged) Name Jack Murray Title General Foreman Email jack.murray2@bnsf.com Signature _____				
						RR/Co. Code BNSF		Subdivision SYSTEM						
From: City BUTTE			Codes 0180		Destination City & County				Codes		From Latitude			
State MT			30		City						From Longitude			
County SILVER BOW			C093		County						To Latitude			
Mile Post: From To				Inspection Point BUTTE YARD						To Longitude				
Activity Code:	215	224	229D	231	232	232X							CARS	
Units:	14	17	3	17	14	4							14	
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	2643	EMF	229	0045	C1				N	N	1	229D
Description Oil on #3 traction motor lead cables													
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	4808	EMF	229	0119	E1				N	N	1	229D
Description Front and 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?	

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(Continuation)

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Inspector's ID No. M3003	Report No. 119	Report Date 8/8/2022
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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										N	N	0	232X

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

Inspected 3 cuts of cars and 1 locomotive consist 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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