

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. 107		Date yy mm dd 2022 07 19		
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						To Longitude				
Activity Code:	215	229D	231	232	232X	224							CARS	
Units:	20	2	20	20	5	22							20	
Sub Units:	0	0	0	0	1	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	2643	EMF	229	0045	C1				N	N	1	229D

Description
 #3 traction motor leads covered in lube 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	BNSF	921016	F	215	0123	D2				N	N	1	215

Description
 B-end knuckle coupler thrower non-op

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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INSPECTION REPORT
(Continuation)

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Item 3	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC 232	Defect	Subrule	Speed	Class	Train #/Site	SNFR* N	RCL** N	# of Occ.*** 0	Activity Code 232X
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Description - [** Comment to Railroad/Company **]

Inspected 4 cuts of cars and one locomotive consist for 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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