

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. 58		Date yy mm dd 2025 06 12		
Railroad/Company Name & Address BNSF RAILWAY COMPANY  Havre MT						R/C R		Division SYSTEM		RR/Co. Representative (Receipt Acknowledged)				
						RR/Co. Code BNSF		Subdivision SYSTEM		Name Christopher Romero				
						Title Zone Superintendent								
						Email christopher.romero@BNSF.com								
Signature														
From: City HAVRE			Codes 0580		Destination City & County				Codes		From Latitude			
State MT			30		City						From Longitude			
County HILL			C041		County						To Latitude			
Mile Post: From			To		Inspection Point HAVRE READY TRACKS						To Longitude			
Activity Code:	224	229D	231	232X										
Units:	4	4	4	1										
Sub Units:	0	0	0	2										

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
1	BNSF	5926	EMF	229	0093	C1				N	N	2	229D

Description  
(Both-side) emergency fuel cut off decals faded.

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										N	N	0	232X

Description - [\*\* Comment to Railroad/Company \*\*]  
 Inspected recently serviced locomotive 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:	
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?	