

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

# INSPECTION REPORT

OMB Approval No.: 2130-0509

|   |                   |                   |              |   |                           |                      |       |                             |                   |   |                   |                                |               |  |
|---|-------------------|-------------------|--------------|---|---------------------------|----------------------|-------|-----------------------------|-------------------|---|-------------------|--------------------------------|---------------|--|
| Inspector's Name<br>Jackson, Dave   |                   |                   |              | Inspector's Signature                             |                           |                      |       | Inspector's ID No.<br>M3003 |                   | Report No.<br>120   |                   | Date<br>yy mm dd<br>2023 08 08 |               |  |
| Railroad/Company Name & Address<br>MONTANA RAIL LINK<br>2800 Shannon Road<br><br>Laurel MT 59044                                  |                   |                   |              |   |                           | R/C<br>R             |       | Division<br>SYSTEM          |                   | RR/Co. Representative (Receipt Acknowledged)<br>Name Mark Turner<br>Title General Mechanical Foreman<br>Email mturner@mtrail.com<br>Signature _____ |                   |                                |               |  |
|   |                   |                   |              |   |                           | RR/Co. Code<br>MRL   |       | Subdivision<br>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 MAIN TRACK & TRACK-3 |                           |                      |       |                             |                   | To Longitude  |                   |                                |               |  |
| Activity Code:  |                   | 215               | 224          | 229D  | 231                       | 232                  |       |                             |                   |   |                   |                                | CARS          |  |
| Units:  |                   | 110               | 115          | 5   | 115                       | 110                  |       |                             |                   |   |                   |                                | 110           |  |
| Sub Units:  |                   | 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              | 5635              | EMF          | 229   | 0043                      | A2                   |       |                             | L WEST MAIN       | N   | N                 | 1                              | 229D          |  |
| Description<br>Excessive (White, Grey) exhaust smoke coming from locomotive @ idie.   |                   |                   |              |   |                           |                      |       |                             |                   |   |                   |                                |               |  |
| 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              | 668523            | H            | 215   | 0301                      | A1                   |       |                             | L WEST MAIN       | N   | N                 | 1                              | 215           |  |
| Description<br>Left side car I.D. faded out to the point it is not 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? |                                |               |  |

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

# INSPECTION REPORT

(Continuation)

OMB Approval No.: 2130-0509

|                             |                   |                         |
|-----------------------------|-------------------|-------------------------|
| Inspector's ID No.<br>M3003 | Report No.<br>120 | Report Date<br>8/8/2023 |
|-----------------------------|-------------------|-------------------------|

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/USC | Defect | Subrule | Speed | Class | Train #/Site | SNFR* | RCL** | # of Occ.*** | Activity Code |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|--------------|-------|-------|--------------|---------------|
| 3    | BNSF              | 5806              | EMF       | 229        | 0045   | D8      |       |       | L WEST T-3   | N     | N     | 1            | 229D          |

**Description**

Front MU cable in contact with cut lever, knuckle pin & the outer sheeting is damaged.

|              |              |              |          |
|--------------|--------------|--------------|----------|
| 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    | BN                | 535552            | H         | 224        | 0103   | C       |       |       | L WEST T-3   | N     | N     | 1            | 224           |

**Description**

Left side retroreflective sheeting 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? |
|--|--|----------------------|-------------------|-------------------|

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/USC | Defect | Subrule | Speed | Class | Train #/Site | SNFR* | RCL** | # of Occ.*** | Activity Code |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|--------------|-------|-------|--------------|---------------|
| 5    | BN                | 535552            | H         | 215        | 0301   | A1      |       |       | L WEST T-3   | N     | N     | 1            | 215           |

**Description**

Left side build date 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? |
|--|--|----------------------|-------------------|-------------------|

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/USC | Defect | Subrule | Speed | Class | Train #/Site | SNFR* | RCL** | # of Occ.*** | Activity Code |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|--------------|-------|-------|--------------|---------------|
| 6    | HPJX              | 7016              | H         | 215        | 0301   | A1      |       |       | L WEST T-3   | N     | N     | 1            | 215           |

**Description**

Right side build date 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.<br>M3003 | Report No.<br>120 | Report Date<br>8/8/2023 |
|-----------------------------|-------------------|-------------------------|

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/USC | Defect | Subrule | Speed | Class | Train #/Site | SNFR* | RCL** | # of Occ.*** | Activity Code |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|--------------|-------|-------|--------------|---------------|
| 7    | WFRX              | 973881            | H         | 215        | 0301   | A1      |       |       | L WEST T-3   | N     | N     | 1            | 215           |

**Description**

Left side car I.D. & build date both 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? |
|--|--|----------------------|-------------------|-------------------|

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/USC | Defect | Subrule | Speed | Class | Train #/Site | SNFR* | RCL** | # of Occ.*** | Activity Code |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|--------------|-------|-------|--------------|---------------|
| 8    | BNSF              | 672568            | H         | 232        | 0103   | F3      |       |       | L WEST T-3   | N     | N     | 1            | 232           |

**Description**

L-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 |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|--------------|-------|-------|--------------|---------------|
| 9    | BNSF              | 670685            | H         |            |        |         |       |       | L WEST T-3   | N     | N     | 0            |               |

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

Left side "RIFD" tag missing.

|              |              |              |          |
|--------------|--------------|--------------|----------|
| 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   | MQRX              | 41869             | H         |            |        |         |       |       | L WEST T-3   | N     | N     | 0            |               |

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

B-L Spring nest has (1) spring shifted out of 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? |
|--|--|----------------------|-------------------|-------------------|

# INSPECTION REPORT

(Continuation)

OMB Approval No.: 2130-0509

|                    |            |             |
|--------------------|------------|-------------|
| Inspector's ID No. | Report No. | Report Date |
| M3003              | 120        | 8/8/2023    |

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/<br>USC | Defect | Subrule | Speed | Class | Train #/Site | SNFR* | RCL** | # of<br>Occ.*** | Activity<br>Code |
|------|-------------------|-------------------|-----------|----------------|--------|---------|-------|-------|--------------|-------|-------|-----------------|------------------|
| 11   | BN                | 534965            | H         |                |        |         |       |       | L WEST T-3   | N     | N     | 0               |                  |

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

B-L Spring nest has (1) broken coil spring.

|              |              |              |          |
|--------------|--------------|--------------|----------|
| 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<br>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? |
|---|-----------------------------------|--|----------------------|----------------------|-------------------|----------------------|-------------------|