

DEPARTMENT OF TRANSPORTATION
FEDERAL RAILROAD ADMINISTRATION (FRA)

INSPECTION REPORT

OMB Approval No.: 2130-0509

Inspector's Name Voigt, Jordan				Inspector's Signature				Inspector's ID No. M3004		Report No. 42		Date		
												yy 2021	mm 03	dd 29
Railroad/Company Name & Address MONTANA RAIL LINK Missoula MT						R/C R		Division SYSTEM		RR/Co. Representative (Receipt Acknowledged) Name Matt Olson Title Mechanical Foreman Email Signature _____				
						RR/Co. Code MRL		Subdivision SYSTEM						
From: City MISSOULA				Codes 0830		Destination City & County				Codes		From Latitude		
State MT				30		City						From Longitude		
County MISSOULA				C063		County						To Latitude		
Mile Post: From To				Inspection Point MISSOULA COUNTY								To Longitude		
Activity Code:	215	224	231	232	232X	TCL						CARS		
Units:	27	27	27	27	1	6						27		
Sub Units:	0	0	0	0	2	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	BCAX	529	CH	224	0103	C				N	N	1	224

Description
 ReflectORIZATION obscured (right side).

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	BCAX	529	CH	215	0301	A1				N	N	1	215

Description
 Built date obscured (right side).

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. M3004	Report No. 42	Report Date 3/29/2021
-----------------------------	------------------	--------------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
3	LAFX	60611	CH	224	0103	C				N	N	1	224

Description
Reflectorization obscured (right side).

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	CRDX	21562	CH	224	0103	C				N	N	1	224

Description
Reflectorization obscured (left side).

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	CRDX	21562	CH	215	0301	A1				N	N	1	215

Description
Build date obscured (left side).

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	CBFX	317127	CH	231	0136	C2				N	N	1	231

Description
Handhold has insufficient clearance (BR end).

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. M3004	Report No. 42	Report Date 3/29/2021
-----------------------------	------------------	--------------------------

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

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

Inspected two cuts of cars 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	<input type="text"/>	Date(mm/dd/yyyy):	<input type="text"/>	Comments on back?
---	--	----------------------	----------------------	-------------------	----------------------	-------------------