

DEPARTMENT OF TRANSPORTATION
FEDERAL RAILROAD ADMINISTRATION (FRA)

INSPECTION REPORT

OMB Approval No.: 2130-0509

Inspector's Name Gehrke, Howard A.				Inspector's Signature				Inspector's ID No. 31030		Report No. 27		Date yy mm dd 2025 04 24		
Railroad/Company Name & Address BNSF - Havre Havre MT						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 HELENA				Codes 0590		Destination City & County				Codes		From Latitude		
State MT				30		City						From Longitude		
County LEWIS AND CLARK				C049		County						To Latitude		
Mile Post: From To				Inspection Point HELENA YARD						To Longitude				
Activity Code:	232X	232	231	224	223	MREC	229D							
Units:	1	6	6	6	6	6	6							
Sub Units:	3	0	0	0	0	12	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	8134	EMF	229	0075	D3			CARTER TRACK	N	N	2	229D

Description
L-2 wheel shelled-out spot 3 1/2 or more.
L-2 wheel shelled-out spot 2 1/2 or more.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID

Violation Recommended ☐ Yes ☒ No Latitude: Longitude:

Written Notification to FRA of Remedial Action is: ☐ Required ☒ 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	3780	EMF	229	0119	C1			CATER TRACKS	N	N	1	229D

Description
Sand on front walkway. (slipping hazard)

Seal Applied	Seal Removed	Hazard Class	UN/NA ID

Violation Recommended ☐ Yes ☒ No Latitude: Longitude:

Written Notification to FRA of Remedial Action is: ☐ Required ☒ 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. 31030	Report No. 27	Report Date 4/24/2025
-----------------------------	------------------	--------------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
3	BNSF	6572	EMF	229	0119	C1			CARTER TRACKS	N	N	1	229D

Description
Left rear walkway with oil on it. (slipping hazard)

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?
--	--	----------------------	----------------------	-------------------	----------------------	-------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
4	BNSF	3275	EMF	229	0119	C1			CARTER TRACKS	N	N	1	229D

Description
Front compartment entrance with hose on floor. (tripping hazard)

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?
--	--	----------------------	----------------------	-------------------	----------------------	-------------------