DEPARTMENT OF TRANSPORTATION FEDERAL RAILROAD ADMINISTRATION (FRA)

INSPECTION REPORT

OMB Approval No.: 2130-0509

Inspector's Name Inspector's Signature							re		Iı			Inspector's ID No Report		No					
Sumoski, Charles J.												85	938 35			уу 2016	mm 04	dd 03	
Railroad/Company Name & Address								R/C						o Representative (Receipt Acknowledged)					
AMTRAK								R		SYSTEM Nan									
								RR/Co											
								Code		Suburrision			Title	Supervisor, C&S					
Wilmington DE						ATK		PHIL-WASH MAIN			Email								
								MAIN			Signature								
From:	Cours among Destination (1)							& County	County Codes From Latitud						tude				
City	CHESTER	L		12	270						codes								
State PA					2							From Longitude							
County DELAWARE					045	County								To Latitude					
Mile Post: From To					Inspection Point									To Longit	ude				
Activity Code:		TCSO	RWP																
Units:		1	1																
Sub Units:		0	2																
Item Initials/Milepo		ost Equi	pment/Track #	Type/Kin	d 49 CFI	R/ Defe	ct Subr	ule		Spe	ed Cla	ISS TI	rain #/Site		SNFR*	* RCL**	# of	Activity	
			L	51	USC					1								Code	
1	1													N	N	0			
	Description - [** Comment to Railroad/Company **]																		
Responded to Amtrak No. 89 train accident in Chester PA. Met with other FRA personal on site and coordinated efforts to gather evidence pertaining to the accident scene. Met with the signal supervisor and the acting ADE signals on site and coordinated request for signal records, dispatcher playback of incident timeline, radio and																			
phone	conversation																		
phone conversations between the dispatcher and all involved field employees, and downloads from wayside data recorder. Set up schedule for testing of affected signal equipment. Contacted the NTSB signal investigator and coordinated activities with him and discussed testing procedures for the following day, he was in transit to the site via air																			
travel.	cted the NTS.	B signal inv	estigator and	coordinat	ed activi	ties with	nim and	1 discusse	ea te	sting pro	cedures	s for	the followi	ing day, n	e was i	in transit t	o the site	via air	
Seal Applied Sea			al Removed	lemoved				Hazard Class				Ľ	JN/NA ID						
Violation Recommended Yes			✓ No	No Latitude:								Loi	Longitude:						
Written	Notification to)	Required	. 🗔 -		Railroad	Action Co	ode 🕅			te(mm/d	d/www	n).			Comm	ents on ba	1.9	
FRA o	f Remedial A	Action is:	i 🖌 Opt	tional						te(mm/d	u/yyy	y).			Comme	ans on ba			

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Inspector's ID No		Report No Report Date														
85938		35 4/3/201		5												
Item Initials/Milepo		ost Equipm	ent/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule		Speed	Class	Train #/Site	5	SNFR*		# of Occ ***	Activity Code
2													Ν	N	0	TCSO
Description - [** Comment to Railroad/Company **] Inspected crash site, debris field and train consist for any signal related relevance. Inspected Amtrak locomotive No. 627 and made a photo copy of the MAP 101 (cab signal daily departure test) and the Periodic Inspection Report. Inspected all Cab Signal and Acses bypass switches and verified they were properly sealed. Inspected																
the Cab Signal and Acses air brake control valves and verified they were properly sealed.																
Seal A	pplied		Sea	ll Removed				Hazard Class				UN/NA ID				
Violation Recommend		ded	Yes Vo			Latitu			le:			ongitude:				
	n Notification to	-	Required	✔ Optio	nal	ilroad Acti	on Code		Date(n	nm/dd/y	ууу):			Comme	ents on ba	ck?