

UNITED STATES OF AMERICA

NATIONAL TRANSPORTATION SAFETY BOARD

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Investigation of:

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SEPTA TROLLEY COLLISION
PHILADELPHIA, PENNSYLVANIA
JANUARY 4, 2017

Accident No.: DCA17FR003

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Interview of: GARY ANDERSON

SEPTA Headquarters
Philadelphia, Pennsylvania

Friday,
January 6, 2017

APPEARANCES:

RYAN FRIGO, Operations Group Chair
National Transportation Safety Board

GEORGETTA GREGORY, Chief, Railroad Division
National Transportation Safety Board

NICHOLAS WEBSTER, M.D., Medical Officer
National Transportation Safety Board

MIKE HOEPF, Human Performance Investigator
National Transportation Safety Board

STEPHEN JENNER, Ph.D., Human Performance Investigator
National Transportation Safety Board

TROY LLOYD, Lead Accident Investigator
Federal Transit Administration (FTA)

ELIZABETH BONINI, State Safety Oversight Manager
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SCOTT SAUER, Assistant General Manager, System Safety
Southeastern Pennsylvania Transportation Authority
(SEPTA)

JEFFREY ERINOFF, M.D., Medical Director
Southeastern Pennsylvania Transportation Authority
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WILL VERA, Vice President
Transport Workers Union (TWU) Local 234

TONY GOINS, Business Agent
Transport Workers Union (TWU) Local 234
(On behalf of Mr. Anderson)

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I N T E R V I E W

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2 MR. FRIGO: -- Group Chair for NTSB on this accident.

3 We are here today on January 6, 2017, at SEPTA Headquarters
4 in Philadelphia, Pennsylvania to conduct an interview with
5 Mr. Gary Anderson who works for SEPTA.

6 This interview is in conjunction with the NTSB's
7 investigation of a collision between two SEPTA trolleys in West
8 Philadelphia, on January 4, 2017. The NTSB accident reference
9 number is DCA17FR003.

10 Before we begin our interview and questions, let's go around
11 the table and introduce ourselves. Please spell your last name
12 and please identify who you are representing and your title. I
13 would remind everybody to speak clearly so we can get an accurate
14 recording. I'll lead off and then pass off to my right.

15 Again, my name is Ryan Frigo. The spelling of my last name
16 is F-r-i-g-o. I'm the Operations Group Chair for the NTSB on this
17 accident.

18 MS. GREGORY: I'm Georgetta Gregory, G-r-e-g-o-r-y, Chief of
19 the Railroad Division with the NTSB.

20 MR. SAUER: I'm Scott Sauer, S-a-u-e-r, Assistant General
21 Manager of System Safety for SEPTA.

22 MS. BONINI: Elizabeth Bonini, B-o-n-i-n-i, Pennsylvania
23 Department of Transportation, State Safety Oversight Manager.

24 DR. ERINOFF: I'm Jeffrey Erinoff, E-r-i-n-o-f-f. I'm the
25 Medical Director for SEPTA.

1 MR. VERA: I'm Will Vera, V-e-r-a, Vice President of Local
2 234.

3 MR. LLOYD: Troy Lloyd, L-l-o-y-d, Lead Accident
4 Investigator, Federal Transit Administration.

5 DR. WEBSTER: Dr. Nicholas Webster, W-e-b-s-t-e-r, NTSB
6 Medical Officer.

7 MR. HOEPF: Mike Hoepf, H-o-e-p-f, NTSB, Human Performance.

8 DR. JENNER: I'm Stephen Jenner, S-t-e-p-h-e-n, J-e-n-n-e-r,
9 with the NTSB, Human Performance.

10 MR. ANDERSON: Gary Anderson, Operator for SEPTA, A-n-d-e-r-
11 s-o-n.

12 MR. FRIGO: Mr. Anderson, do we have your permission to
13 record our discussion with you today?

14 MR. ANDERSON: Yes.

15 MR. FRIGO: And do you wish to have a representative with you
16 at this interview?

17 MR. ANDERSON: Yes.

18 MR. FRIGO: Can you please introduce yourself, sir?

19 MR. GOINS: Tony Goins, last name spelling, G-o-i-n-s,
20 Business Agent for TWU Local 234.

21 MR. FRIGO: Mr. Anderson, are you okay if we proceed on a
22 first name basis?

23 MR. ANDERSON: Yes.

24 MR. FRIGO: Thank you, Gary.

25 I just want to read a few bullets here into the record.

1 Q. Is that the 10 or the 15?

2 A. Mostly the 15. I do the 10 on weekends and the 15 weekdays.

3 Q. Okay. And have you been in that same division for the past 3
4 years or have you spent time in other locations around the system?

5 A. Yeah, same location.

6 Q. Same location. Okay. Thank you.

7 And if you could just, to the best of your recollection, on
8 the 4th, if you could just walk us through what time you came on
9 duty, anybody that you interacted with when you came on duty, and
10 when you left the -- I'll call it the barn, when you left the --
11 you know, when you left on your route.

12 A. The depot.

13 Q. Thank you.

14 A. Yeah, that day I had to make relief. So we make relief at 36
15 and Malvern. You know, we get on the trolley there. We don't
16 take it out of the depot. So I take somebody else's trolley.
17 They get off relief.

18 I'm not really sure as to what time that was that I was
19 supposed to -- it was close to 11:54, something like that, is kind
20 of in my mind. And then we have a pullout time, which we follow
21 the schedule, adhere to the schedule. I can't remember what time
22 that was but before we pulled out. What else?

23 Q. Do you talk to anybody before taking -- I know you mentioned
24 you take relief of someone else's trolley. Do you just step on
25 board that trolley or is there any --

1 A. Well, we make relief for the person who got off the trolley.

2 Q. Okay.

3 A. So he makes sure somebody showed up before he actually
4 departs. And so I drove up there to the relief part, to make, you
5 know -- and by that time, it was almost time for me to pull out.
6 So like 5 or 10 minutes before I had to depart.

7 Q. When you say you drove up there, was that your personal --

8 A. My own personal vehicle.

9 Q. Okay. And do you speak to any like a supervisor or a
10 dispatcher before taking relief?

11 A. Well, you have to show up at the depot to get your
12 assignment. And then you -- you have a check-in time to make the
13 run, and then we have a time -- they give us allowable time to go
14 to the relief point.

15 Q. Okay. So you check in at the depot and then you make your
16 way to 36 and Malvern?

17 A. Yes.

18 Q. Do you remember what time you showed up at the depot?

19 UNIDENTIFIED SPEAKER: That's 63rd.

20 MR. FRIGO: Thank you.

21 MR. ANDERSON: What did I say? 36.

22 UNIDENTIFIED SPEAKER: Yeah.

23 BY MR. FRIGO:

24 Q. Do you remember what time you showed up at the depot that
25 morning?

1 A. I think my relief -- my time was 11:30, 11:32 maybe.

2 Q. And who do you check in with when you're at the depot?

3 A. The dispatcher.

4 Q. And how does that happen? Do you sign any paperwork or --

5 A. Well, we got to come to the window within 5 minutes of that
6 time so we're on time, and then they give us our transfers and we
7 put on a schedule if we need to, and then we leave.

8 Q. Do you sign for the paperwork or -- do you --

9 A. No.

10 Q. -- sign anything?

11 A. No.

12 Q. Okay. So it's kind of a, hey, I'm here; I'm Mr. Anderson.
13 I'm here.

14 A. Yeah, and they do their checks in the back.

15 Q. Okay.

16 A. They do their own checks that you showed up, so -- to make
17 sure that the run was filled.

18 Q. And again, just so I can understand that morning, so this
19 check-in happens at the depot. That's when you report on duty.
20 And then how do you make your way from the depot to 63rd and
21 Malvern?

22 A. Well, I can choose to catch the bus or I can choose to drive.
23 So the bus is always -- you can't tell what time it's going to --
24 you got to walk up the street to get the bus. My car was right
25 outside. I can just ride up there and go. And I was going to get

1 off early enough to get a bus to go back and get my car.

2 Q. Okay. So -- okay. So that's why you drove from the depot to
3 the relief location. Then what -- when you were at the relief
4 location, what kind of conversation do you have with the operator
5 that's coming off duty?

6 A. Very minimal, just other than the condition of the trolley,
7 you know, or hey, if it's busy outside or if it's, you know --
8 because the trolley business is always there's a lot of, a lot of
9 -- every now and then you have a lot of traffic issues being
10 backed up or, you know. So he said it was a generally clear day
11 though, you know, it wasn't a lot of traffic out.

12 Q. Do you do any -- do you remember doing any pre-trip
13 inspection of the trolley?

14 A. Well, we normally do when we first come in. Like we have a
15 sheet, and this sheet is on there. You know, we normally do the
16 checks. But I normally do like my walkaround just to see, you
17 know -- when I asked him how the trolley was, he said it was in
18 good condition. Make sure it's -- you know, the doors is opening
19 and closing. The 10 trolley is generally a better trolley than
20 the 15, so --

21 Q. How come? Why is that?

22 A. It's air. It's an air trolley. You know, the 15 is
23 electric. So you have air pressure on the 10 trolley so it makes
24 stopping easier. You've got an air horn. You have a lot of extra
25 accessories that make your trip more effective.

1 Q. And the 10 -- the 10 is the trolley you were operating on the
2 day of the accident?

3 A. Yes.

4 Q. So when you came on -- when you relieved and you took over
5 operation of that trolley, how was it running that day? Was
6 everything normal?

7 A. It seemed fine. It seemed fine. Other than the seat -- you
8 know, I don't fit in the trolleys like I would like to fit in
9 them, you know. The trolleys either have the seats go back --
10 sometimes they don't go back enough so my legs was -- I ain't have
11 enough seat to go back so my legs can be parallel. So they was
12 more like on a V. So, you know -- but other than that, they go up
13 high enough so you can give yourself a little bit more leverage
14 for me to be comfortable.

15 Q. And everything was operating as normal --

16 A. Yeah.

17 Q. -- that you can recall?

18 How was the passenger loading that day? Do you remember?

19 A. Very light for me. Very light for me. The trolley had just
20 went down the street so there wasn't too many people there to --
21 by the time I left.

22 Q. Do you remember how many minutes ahead of you that the
23 trolley departed?

24 A. I can't tell. But like I say, we have a set time to leave,
25 so --

1 Q. Okay.

2 A. Yeah.

3 Q. So you were following up the previous trolley essentially?

4 A. Yeah. Well, no. By the time I went down the road, I didn't
5 see him.

6 Q. Okay.

7 A. Yeah, he was -- he was ahead of me. So --

8 Q. Okay. Can you remember when you first saw him in front of
9 you?

10 A. Coming out of the tunnel.

11 Q. Okay.

12 A. I realized there was a 10 in front of me.

13 Q. And about -- what was the distance at when you first saw him
14 coming out of the tunnel? How many car lengths or --

15 A. Well, we have a -- in the tunnel, you have a safety factor so
16 you can't really be within the same frame of the trolley. So, you
17 know, it gives you a stoplight so you can't go. It'll just -- you
18 know, it'll dump on you so you can't get in front of it. But, you
19 know, so he was -- when he was going out -- normally a trolley
20 that's different will go to the left or to the right, and we go to
21 the left. So when I realized he was going to the right, I went to
22 the left, I realized he was a 10.

23 Q. Okay. And so outside of the tunnel, are there the same
24 signals that are in the tunnel or is it different?

25 A. No, no. The tunnel, it has a system that kicks in --

1 Q. Okay.

2 A. -- inside the tunnel for safety; let's us know when we're
3 getting too close. If we go around a bend, if there's a trolley
4 there, it'll give you some warning signal.

5 Q. What are some of those warning signals that the trolley will
6 give you?

7 A. Well, it's a horn -- not a horn, but it's a beep. It beeps
8 and it turns red. And if it beeps too long, it'll, like I said,
9 it'll dump on you.

10 Q. Okay.

11 A. And it shuts the trolley down.

12 Q. That's when you've gotten too close --

13 A. Yeah.

14 Q. -- at that point?

15 A. Or you went too fast -- too close.

16 Q. Okay. And then what happens when you're out of the tunnel?
17 At that point are you street running at that point?

18 A. Yeah, yeah. The safeguards outside the tunnel are on us,
19 from our own observation and trying to keep our distances and
20 clearance.

21 Q. Is there a -- is it -- how can I better think of that? Is
22 there a -- is it line of sight? Is it a restricted speed?

23 A. Well, it's just a restricted speed and line of sight. So,
24 you know, we -- I guess you have a -- you get comfortable as you
25 go up and down the road, you know, when you're following somebody.

1 So you don't get too close and you try to give him a little
2 cushion so he can pick some people up and you can pick some people
3 up, you know.

4 Q. So is that --

5 A. Try piggybacking, you know, do the piggyback stop.

6 Q. And what does that usually look like? Is that a few blocks
7 cushion that you try to give or 1 block or 1 city block or 2 city
8 blocks? What do you usually do to give someone cushion?

9 A. Well, you know, if he's picking people up. I mean, I try to
10 hang on his lights if I can, you know. We normally -- like we
11 still have checkpoints. So, you know, at the checkpoints we
12 realize we still trying to stay on schedule. So we're running a
13 little bit -- because the trolley in front of you is picking up
14 everybody and you're not picking up nobody, you're not going as
15 slow as he is. If he's picking people up and discharging them,
16 you're not picking up nobody. So, you know.

17 Q. It sounds like it's a challenge when you get in that kind of
18 situation.

19 A. Yeah, most of the time it's always a challenge in
20 Philadelphia.

21 Q. So do you remember the last time you saw that trolley in
22 front of you prior to the accident? Can you recall that?

23 A. Well, 36th Street when we came out of the tunnel, before he
24 made the turn, he was stuck at the light at Market Street. So I
25 couldn't really come out because there's no clearance for me to

1 make that turn so I had to sit there and wait. Market Street is a
2 major street for Philadelphia and you can't get out. You're
3 waiting, you know. We're all waiting at the mercy of the cars in
4 front of us. We can't go in front if we want to; they're in
5 front. So he was sitting there and I kind of give him some -- try
6 to give him some leeway so he can get up the street before I
7 actually pulled out on the street.

8 Q. And when you pull out of the tunnel, are you running on
9 Market or on 36th at that point?

10 A. 36th Street.

11 Q. 36th.

12 A. Market is parallel to --

13 Q. Right. When you came out of the tunnel and you were -- you
14 said the move is to -- it's a divergent to the left.

15 A. Well, you come out the tunnel, you go to the right.

16 Q. For the --

17 A. To 36th Street, yes.

18 Q. Okay. And where was the trolley in front of you when you
19 came out of the tunnel?

20 A. Well, he went through the light before I went out on the
21 street. Because like I said, there's only -- Market Street's like
22 right there. Once you turn, you're like right there on Market
23 Street. You can't really go nowhere, maybe a car length in front
24 of the trolley, but other than that, there's no -- there's not
25 enough clearance for both of us to be out there. So --

1 Q. And I guess you had to get through that same traffic light?

2 A. No. No, I didn't have to. You know, I wasn't in no rush to
3 get through there. After he went through the light and went up
4 the hill and went around the corner.

5 Q. Okay. And you followed -- you were following him, right?

6 A. Well, not on 36th Street. He actually went up the street. I
7 didn't follow behind him till I got up on Lancaster.

8 Q. Okay.

9 A. 36th goes, cuts into Lancaster and then -- 36th Street, and
10 then you go to Lancaster. So --

11 Q. And once you're on Lancaster, is it pretty tangent? Are
12 there good sight lines in front of you or are there more turns?

13 A. Yes, there's -- there's no more turns. It's a straight shot.

14 Q. Do you remember how far in front of you he was when you got
15 onto Lancaster?

16 A. No. Actually, I probably started -- by the time he got on
17 Lancaster, he was, he was -- I didn't go behind him when he went
18 through the light. He was already through the light. But I did
19 see him in front of me, and then, you know, when I was driving
20 past 36th Street, 37th Street, I started getting groggy, and
21 that's when, you know.

22 Q. Okay.

23 A. I opened up and I see the trolley in front of me and I tried
24 to slam on the brakes.

25 Q. Okay. All right. Gary, thank you for helping me understand

1 that, and I apologize if I repeat a question, but I'm just trying
2 to understand a little bit more.

3 Before you felt groggy, you said around 36th, 37th Street
4 that was?

5 A. Well, 36th Street comes out of the tunnel. You come out of
6 the tunnel on 36th Street.

7 Q. Okay.

8 A. And then Lancaster is -- this is 36th and then you make the
9 turn. And I didn't -- when I felt groggy, I didn't -- I haven't
10 felt -- I was feeling fine, you know, the whole trip. It just
11 came out of nowhere. I don't know why, but I just, you know, I
12 did (indiscernible) and I opened my eyes up and I seen the
13 trolley. That's when I slammed on the brakes.

14 Q. And do you remember, before you had that sensation, do you
15 remember how far the trolley was in front of you?

16 A. Well, I seen it up on a distance, so I couldn't really tell
17 how --

18 Q. Can you maybe estimate how many city blocks or --

19 A. Well, it wasn't a city block. It was -- he was on 38th
20 Street and I was on 37th Street. So that's when I started feeling
21 groggy. So I don't --

22 Q. So you guys were almost in the same block essentially?

23 A. 37th Street is and 38th Street is, I mean, yeah, it wasn't --
24 he was at the light and I was getting on 37th Street, and that's
25 when I started feeling groggy. So he was getting ready -- he

1 should have been going through the light, but I don't know what
2 happened with me.

3 Q. Okay. Okay. And operating the 10, you mentioned before that
4 -- I think you said that you usually do the 10 on the weekends?

5 A. Weekends.

6 Q. And this was a Wednesday when you were on the 10?

7 A. An off day of work.

8 Q. How does that -- how can I better understand that, how that
9 works?

10 A. Well, I was off -- I'm off on Tuesday and Wednesday. He had
11 some extra work on Wednesday and I said I would work, scheduled in
12 to work on Wednesday.

13 Q. So kind of like an extra board almost?

14 A. Yeah.

15 Q. Okay. So your last -- so you were off Tuesday. You were off
16 Tuesday?

17 A. Yes, I was off Tuesday.

18 Q. So the last day you worked was on --

19 A. Monday.

20 Q. On Monday. And were you on the 15 that Monday?

21 A. (No audible response.)

22 Q. Do you remember what time you finished working that Monday?

23 A. Normally I finish around 9:00, 9:30-ish give or take. I'm
24 never really on time like that, but 9:00 -- yeah, I'm supposed to
25 finish at 9:11 but, you know, I probably got back to the depot

1 about 9:00. I don't know if we had any traffic distractions. The
2 15 had a tendency to have a lot of police activity and, you know.

3 Q. Okay.

4 A. And they block the tracks on you.

5 Q. So around 9:00, 9:30.

6 A. It's almost normal because I don't never pay attention to it.
7 You just roll with the punches, you know, because you get used to
8 it.

9 Q. About 9:30 in the p.m.?

10 A. Yes.

11 Q. And then Tuesday you were off. And then -- do you remember
12 what time on Wednesday you received a phone call that there was
13 work available?

14 A. Well, I called them on Tuesday to find out.

15 Q. Okay. You call them?

16 A. Yeah, yeah, I called in to see if I was on the books.

17 Q. Okay. Is that something you usually do on your days off,
18 call and try to get extra work?

19 A. Yes.

20 Q. Okay. Do they tell -- when you called them on Tuesday, did
21 they tell you there was going to be work Wednesday? Did you
22 know --

23 A. Yes.

24 Q. So you knew that they would have work for you midday?

25 A. Yeah, after a certain time they normally do the schedule, if

1 anybody calls out or whatever.

2 Q. Okay.

3 A. Or they, you know, they have a missing spot.

4 (Phone ringing)

5 MR. FRIGO: I just want to apologize for the phone ringing in
6 the background there.

7 BY MR. FRIGO:

8 Q. So -- okay. And who do you make that call to about the
9 extra, about the extra work on Tuesday?

10 A. The dispatcher on duty.

11 Q. The dispatcher on duty. Okay.

12 All right, Mr. Anderson. I've got some training questions
13 and some other stuff that I want to talk to you about that doesn't
14 -- not from the day of the accident. So I'm going to pass it on
15 right now for people to ask questions about the day of the
16 accident.

17 MS. GREGORY: And I'm going to go ahead and pass -- this is
18 Georgetta Gregory -- to Scott Sauer at this point.

19 BY MR. SAUER:

20 Q. Gary, what time did you have the incident occurring? Do you
21 remember?

22 A. It was around 1:00, I believe. I'm not sure because I was so
23 out of it, so --

24 Q. Would you -- do you know if at -- on that particular trip,
25 were you running on time? Were you late?

1 A. I'm not so much sure about that neither, because coming
2 through the tunnel, right, which is very rare that you don't stop
3 at each stop, because I wasn't picking nobody up. You know, like
4 I said, that must really be light, you know.

5 Q. Um-hum.

6 A. But I know when I went in the tunnel I was on time, and, you
7 know, normally when you come out of the tunnel, we normally are a
8 little late, even though the radio has it -- because it don't --
9 it stops running. The clock stops running in the tunnel and it
10 always has you 13 minutes, 14 minutes late. It's not an accurate
11 time because I think it stops at a signal or something.

12 Q. Which clock is that?

13 A. The clock on the radio on the trolley.

14 Q. Where was the last --

15 MR. FRIGO: Hold on a second, Scott. They want to take a
16 break.

17 MR. SAUER: Oh, sure.

18 MR. FRIGO: Let's go off the record.

19 (Off the record.)

20 (On the record.)

21 MR. FRIGO: Okay.

22 BY MR. SAUER:

23 Q. Gary, do you remember when the -- what the last station was
24 where you actually boarded passengers in the tunnel before you --

25 A. Uh-uh.

1 Q. No?

2 A. No.

3 Q. How about on the street, if you boarded or alighted any
4 passengers on the street between the portal and the accident?

5 A. I can't recall. I didn't have but so many passengers to
6 begin with. I'm sorry.

7 MR. SAUER: Okay. Okay. I think I'm okay.

8 BY MS. BONINI:

9 Q. I just have one question. Beth Bonini from the Department of
10 Transportation. What was the weather like on the day of the
11 incident?

12 A. It was clear. It was mild for the day, you know. I think it
13 was raining before that. It cleared up.

14 Q. Thanks, Gary.

15 BY DR. ERINOFF:

16 Q. You said that you were off on --

17 MR. FRIGO: Say your name.

18 DR. ERINOFF: Jeffrey Erinoff.

19 BY DR. ERINOFF:

20 Q. You said you were off on Tuesday but you worked on Wednesday.
21 Can you describe how much sleep you had the night before you
22 worked on Thursday?

23 A. I slept a lot.

24 Q. A lot. Do you have any idea how many hours?

25 A. You said before Thursday? Thursday?

1 Q. Excuse me. I mean Wednesday, the day of the accident.

2 A. I was off and I was suffering from cold symptoms, so --

3 Q. Okay. Were you taking anything for that cold, any
4 medications, prescription or non-prescription?

5 A. Yeah, over-the-counter.

6 Q. Okay. Do you recall what you were taking?

7 A. I put it in tea. So it was cold or flu medicine tea I take.

8 Q. Do you recall the last time -- when the last time was you
9 took the cold and flu medication prior to doing the job on
10 Wednesday?

11 A. The morning before I left.

12 Q. You talked about feeling -- about starting to feel groggy
13 when you got to about 36th or 37th Street. Had you been
14 experiencing any grogginess earlier in the day?

15 A. No.

16 Q. Had you experienced any grogginess taking this medication
17 prior to Wednesday?

18 A. Not that I can recall.

19 Q. Not that you --

20 A. No, not -- yeah, not that I can recall.

21 Q. Can you tell us a little bit more about how you actually felt
22 and what happened when you started feeling groggy?

23 A. My memory is that I opened my eyes up and I seen the trolley
24 and stepped. I don't know how long the duration or, you know,
25 like if I was in a blank spot, you know.

1 Q. Okay. You also talked about -- I guess you had a little
2 confusion about exactly when the -- the exact time was of the
3 accident and to quote you, you said, "you were out of it." Was
4 that because you were still -- was that because you were groggy or
5 was it the shock of the accident at that point that may have
6 shaken you up?

7 A. It was -- I think I was groggy because I heard it over the
8 radio before I could call it in. So I don't know like how it can
9 get over the radio that quick. So if I was groggy before, it had
10 to be a time, I don't know.

11 Q. About how long did the grogginess last before it went away?

12 A. I can't really tell. I know I had to lay my head down and,
13 you know, before I could lift it up and -- a little bit more
14 cognitive of what was going on around me.

15 DR. ERINOFF: I don't have any further questions right now.

16 BY MR. VERA:

17 Q. Gary, this is Will Vera from Local 234. When you reported
18 that morning to your district, do you remember where the
19 dispatcher was placed? Was he at the window waiting for you? Was
20 he at a desk? Was he at the restroom? Was he in the
21 (indiscernible) room? Do you remember where the dispatcher was
22 when you reported to him?

23 A. I think he was at his desk. The window we report in, he's
24 right there. So whether he was standing at the door, standing at
25 the window to hand you your transfer -- because I a lot of times I

1 walk back to the back to get my stuff, you know.

2 Q. Did you walk back that day?

3 A. Yes, I normally do walk back.

4 Q. You went back there. And what do you do when you walk back
5 there?

6 A. Go back and get my transfers so they can check me off.
7 Because normally they're on the phone, doing what -- stuff of that
8 nature. They're doing other stuff, so --

9 Q. Okay. So it is -- what I'm hearing correctly is that day you
10 believe you went back there and actually spoke with or saw the
11 dispatcher? How far would you say you were to the dispatcher to
12 get your transfers?

13 A. Well, his desk is right here and transfer's right across. So
14 I just normally grab them. It's a normal thing I do. I don't pay
15 attention to whether I do it. I do it all the time. I just go
16 back and say hi and, you know.

17 MR. VERA: That's all I have.

18 MR. LLOYD: Troy Lloyd from the Federal Transit
19 Administration.

20 BY MR. LLOYD:

21 Q. I've just got one question, Mr. Anderson. Is there any type
22 of procedure for reporting the taking of any over-the-counter
23 medications that may affect maybe alertness or ability or anything
24 like that?

25 A. Well, SEPTA has a drug policy on certain narcotics and stuff

1 like that, you know, and if you -- you know, they need to know.
2 You're supposed to let them know prior to that, so -- if it has
3 something in it that's going to be --

4 MR. LLOYD: Okay.

5 BY DR. WEBSTER:

6 Q. Hi, Gary. I'm Dr. Nicolas Webster. Here's my card. How are
7 you?

8 A. Okay.

9 Q. It's nice to meet you. I'm a physician for the National
10 Transportation Safety Board, and I'm interested, and I think we
11 are all interested, in learning just generally what happened in
12 this accident and your general health. So can you tell me a
13 little bit about yourself as far as healthwise?

14 A. Well, for the most part, I'm a 62-year-old man.

15 Q. Um-hum.

16 A. I still play ball with the young boys. I'm in pretty good
17 health but I've been fighting a cold for the last couple days. So
18 I haven't been probably up to --

19 Q. Okay.

20 A. Other than that, my health is pretty good. I don't have
21 nothing, you know, no ailments, stuff of that nature.

22 Q. Okay. Have you -- you've -- you say you're in good -- you're
23 in reasonably good health, you stay with -- stay playing ball. Do
24 you have a doctor you normally see?

25 A. On a yearly basis. I don't see him unless I need it, but,

1 you know, I don't (indiscernible) --

2 Q. Who is that?

3 A. My doctor, she has a strange name. I haven't seen her in a
4 minute, so --

5 Q. Okay. All right. Being 62 -- I'm getting up there. I take
6 a few medicines. Are you taking any medicines yourself on a
7 general, regular basis?

8 A. No.

9 Q. Okay.

10 A. Just the cold and flu. The only other thing I have Monster
11 drink -- it keeps you alert, you know, like the energy drink, once
12 a day.

13 Q. Do you have a choice, a choice on the energy drink, you say?

14 UNIDENTIFIED SPEAKER: Monster.

15 BY DR. WEBSTER:

16 Q. Monster?

17 A. Yeah.

18 Q. Okay. And how's your vision?

19 A. It's good. But when I'm reading, you know, I'm like anybody
20 else, I need reading glasses to read the fine print.

21 Q. Okay. How's it -- how you looking at distances, and things
22 off in the distance?

23 A. I'm good.

24 Q. Okay. When was your last medical examination? Like I guess
25 you have an exam on a periodic basis. When was that?

1 A. I don't know. I can't recall, but, you know, whenever we're
2 required to have one. I haven't had no symptoms that would send
3 me to the doctor.

4 Q. Okay. When you see the occupational doctors, what kind of
5 exam do they do for you?

6 A. For our --

7 Q. For your -- for here, to do the job that you're doing, what
8 do they check?

9 A. They check your hearing and your -- the little things that
10 you, you know, make sure one eye seeing the left side and -- you
11 know, it's a pretty thorough eye exam, you know. So -- and I've
12 always passed it, so I'm not -- I can see. Allergy season your
13 eyes get a little bit -- because you rubbing them all the time.

14 Q. I understand. So you got -- you can see pretty good. You
15 passed your hearing test. Do they do anything else for you, like
16 heart or lungs or listen to your heart or listen to your lungs or
17 anything like that?

18 A. Do they do a medical exam?

19 Q. Yeah.

20 A. They check your endurance. They got you doing -- stepping up
21 and down a step --

22 Q. Okay.

23 A. -- for your -- what's the license I got? I forgot what it's
24 called.

25 Q. I don't know. What kind of license do you have? You tell

1 me.

2 A. What do you call it? It's on the tip of my tongue. Your LCR
3 -- RCR we call it. Anyway, the license to drive a truck or
4 trolley.

5 Q. Okay. So it's just like a truck driver, truck driver
6 physical?

7 A. Yes.

8 UNIDENTIFIED SPEAKER: CDL.

9 BY DR. WEBSTER:

10 Q. CDL exam?

11 A. Yeah, CDL, that's what it is.

12 Q. Okay. Who does your exam when you have your exam?

13 A. It's certain places that you can go to where they have a
14 doctor and they specialize in doing CDL --

15 Q. All right.

16 A. -- and they certify you.

17 Q. And were you, I guess you -- were you certified?

18 A. Yes.

19 Q. Okay. So since your exam, how has your health been in
20 general?

21 A. Good.

22 Q. Good. Any shortness of breath?

23 A. No.

24 Q. Any chest pain?

25 A. No.

1 Q. Do you ever have any feelings or unusual feelings in your
2 chest?

3 A. No, no.

4 Q. Racing heart?

5 A. (No audible response.)

6 Q. Have you ever had any changes in consciousness --

7 A. No.

8 Q. -- prior to this event happening?

9 A. No, not that I can recall.

10 Q. Any lightheaded or dizziness when you get up from sitting
11 down?

12 A. If you stay down long enough, you know, if it's hot or -- you
13 know, you can always have lightheadedness. But I've never fell
14 back down on the ground or anything like that or, you know, not
15 that it was an issue.

16 Q. Okay. If you're sitting watching TV for a while, got your
17 feet propped up, and somebody calls you and says, get in here, do
18 this, and you stand up, how do you feel?

19 A. Good.

20 Q. Okay.

21 A. Good.

22 Q. You said you had -- you've not been feeling well for a while.
23 When did that all start?

24 A. About 5 or 6 days ago, coughing, chest, you know, a chest --
25 and phlegm and stuff like this. So almost like a bronchitis kind

1 of cough, you know, when you lay down. But when you're standing
2 up, you feel better, you know.

3 Q. Okay. And you had this going on for about 5 or 6 days?

4 A. Well, it -- no, I thought it was getting better.

5 Q. Okay.

6 A. Just the last couple days my cough got better. My post-nasal
7 drip went away and the cough came, so --

8 Q. Okay. Okay. How long have you been taking medicine? How
9 many days in a row had you taken some medication?

10 A. Normally I just start taking it a couple days. I don't
11 normally take medicine because normally I --

12 Q. Yeah.

13 A. -- you know, it's not that -- where I'm feeling under the
14 weather.

15 Q. I'm going to give you a job if you don't mind. When you go
16 home today --

17 A. Um-hum.

18 Q. -- would you mind looking at the medicine that you were
19 taking, please, and I'd like you -- you've got my email address or
20 you've got my phone number, and you can give me a call or you can
21 send me a text, you can send me an email, whatever you want to do,
22 and say, hey, Nick, this is the name of the medicine I was taking.
23 And so I'd like you to look at it and write it down exactly. It's
24 real important to me that I understand what the medicines you
25 take. So if you could write that down and then -- I sure would

1 appreciate that.

2 A. Yes, sir.

3 Q. I'd appreciate that.

4 So you've been taking the medicine. Let's say it's -- the
5 accident was on Wednesday; is that right?

6 A. I really only took it twice.

7 Q. Okay. You took it --

8 A. I took it Tuesday because I was off.

9 Q. What time on Tuesday, do you remember?

10 A. No. Probably in the daytime because my cough got so bad I
11 had to take something, you know, and I didn't want to be --

12 Q. Yeah.

13 A. -- in public coughing and --

14 Q. Yeah.

15 A. And then when I knew I had to go to work on Wednesday, I took
16 some in the morning before I got started to leave to go to work.

17 Q. How's that stuff work? Is it --

18 A. I took it in a tea.

19 Q. In a tea?

20 A. Mix it and I put 100 milligrams of Vitamin C in there with
21 it, and I drank it.

22 Q. Does it come in a package you open up or --

23 A. (No audible response.)

24 Q. Okay. So you open it up and you pour it in a tea, mix it up.

25 So you took some on -- some on Tuesday sometime. Can you kind of

1 guess what time or -- more close to the evening, close to the
2 morning?

3 A. Tuesday was a very coughing day. So it probably was more in
4 the middle of the day.

5 Q. Okay.

6 A. In the middle of the day.

7 Q. Okay.

8 A. Maybe around 2:00 or 3:00.

9 Q. All right. And then in the next morning. Now you've told me
10 that you've been coughing a little bit. Tell me about the cough
11 and your feeling, your general feeling when you woke up that
12 morning.

13 A. I was feeling better.

14 Q. Okay.

15 A. I realize that medicine only works if you keep it in your
16 system.

17 Q. Uh-huh.

18 A. So whatever I took, it made me feel better and, you know, the
19 next day, like I said, I just put some in some tea. I ran out the
20 door and grab and put some in a tea and drank it, then ran a
21 couple errands and then I came to work.

22 Q. Okay. Would you mind if I ask how tall you are, sir?

23 A. 6'8" when I stopped measuring, but I might be shrinking.

24 Q. 6?

25 A. 6'8" when I stopped measuring.

1 Q. 6'8".

2 A. But I might be shrinking now.

3 Q. Okay. And what was your last weight that you remember?

4 A. About 210.

5 Q. Okay.

6 A. I've dropped some weight over the last couple of days.

7 Q. Okay. Have you had -- did you have any throwing up or
8 vomiting, diarrhea, anything like that?

9 A. No.

10 Q. Okay. How's your eating been? You said you dropped some
11 weight.

12 A. Well, I haven't been eating -- the coughing, you can't keep
13 nothing down. So you eat something, it just makes you feel -- you
14 know, so I haven't been -- the last couple of days I haven't been
15 eating.

16 Q. Okay. I think these guys are going to ask a little bit about
17 what you had to eat and drink and all that kind of stuff. So I'll
18 leave that to them.

19 Anything that sticks -- that pops in your head that would --
20 that I need to know about, something that would make you groggy?
21 What would --

22 A. Taking the medicine and not having no food, you know, your
23 body -- you know, the doctor told me you can get tired from being
24 sick, so -- and, you know, I'm not one who always gets sick, so
25 it's something that would throw me off. I'm not normally sick. I

1 try to wash my hands. I eat a lot of fruits and vegetables. I
2 drink protein mix. I try to stay, you know, stay on top of stuff.

3 Q. Okay. And --

4 A. Because I don't have a lot of time to move around. I'm
5 sitting in the seat all day with my feet on the ground for 8
6 hours.

7 Q. Tell me about your family. How healthy are they? You're
8 really healthy.

9 A. Yeah.

10 Q. Do you have any kids?

11 A. Yes, I do.

12 Q. How are they?

13 A. Two, twins.

14 Q. I'm sorry.

15 A. Very. Very.

16 Q. No, congratulations. How are they?

17 A. They're good.

18 Q. Do they stay with you?

19 A. Yeah.

20 Q. Okay. Your parents?

21 A. Deceased.

22 Q. Okay. Can you tell me what happened with them? Any medical
23 issues?

24 A. No. Mom, Alzheimer's when she passed. My dad had prostate
25 cancer.

1 Q. Oh, I'm sorry. Sorry to hear that. I'm trying to push in
2 and see if we've got anything that -- any medical conditions that
3 you could think of in your family that you may not have -- that
4 may have occurred in them that haven't yet occurred in you. So --

5 A. Yeah.

6 Q. -- that's where I was going with that. Any brothers or
7 sisters?

8 A. Brothers and sisters.

9 Q. Any heart disease or diabetes in the family?

10 A. One brother has diabetes. I have one that has diabetes. I
11 don't know if it's one or two, but he has it under control. He
12 don't struggle from it now.

13 Q. Okay. But you don't have any of that, so --

14 A. Right.

15 Q. Okay. I'm going to turn it over to these fine gentlemen
16 here, but I do have one ask from you. What was that?

17 A. You want to know what the medicine was.

18 Q. Yes, sir. If you don't mind.

19 A. Okay.

20 Q. I sure would appreciate it, and I'll let these fine gentleman
21 do some --

22 MR. HOEPF: Okay. Thanks. Mike with the NTSB.

23 BY MR. HOEPF:

24 Q. Thanks for taking the time to talk to us today. I want to
25 start again with an apology, that the questions that I and Steve

1 will ask you might be kind of redundant with what you've already
2 been asked. So again just, you know -- sorry about that.

3 What we're really just looking to know is kind of the hours
4 leading up to, you know, the day of the incident, the days before,
5 maybe starting back to, you know, Sunday. I know it's hard to
6 recall that far back. I mean, I have a hard time remembering what
7 I ate for lunch yesterday. And you've already talked about that
8 in some detail, but really just to the extent possible, we'd
9 really like to know, you know, kind of what you were doing prior
10 to that.

11 So, you know, you said the morning of you had the medication.
12 You know, did you get a good night's sleep the night before? Were
13 you tossing and turning? Did you get a decent breakfast? You say
14 you didn't have breakfast that morning? Do you think you can
15 maybe just kind of walk me through to the best of your
16 recollection a couple of days prior to, leading up to it?

17 A. Well, Tuesday and Wednesday is my only day off. So Tuesday
18 and Wednesday, if I'm not working, I'm running around running
19 errands.

20 Q. Um-hum. Um-hum.

21 A. You never have time to take care of your household things.
22 So I know I took my kids out, went to the store, and that's when I
23 started -- it was a wet rainy day, you know. That's what made me
24 started coughing and it seemed like it got progressively worse.
25 And all I ate that day was a popsicle.

1 Q. And what day was that?

2 A. Tuesday.

3 Q. Tuesday.

4 A. So that was the only thing that -- you know, it went down
5 soft. It made my throat feel better.

6 Q. Okay. So Tuesday's your day off. You're running around just
7 doing errands. You're feeling -- you're not feeling good so
8 you're having popsicles. That's when you started to feel bad or
9 did you -- you said you were feeling -- kind of coughing before
10 that?

11 A. Well, my cough got progressively worse and I didn't -- to the
12 point that I didn't want nobody to be around me other than what --
13 you know, they probably wouldn't want to be around me anyway if
14 you heard me coughing, so --

15 Q. Right, right.

16 A. I just wanted to relax and settle down. So --

17 Q. Sure. Yeah, I understand that.

18 So Monday did you go to work then?

19 A. Yes.

20 Q. Okay, okay. And so Monday, you're -- morning, afternoon,
21 normal shift?

22 A. Um-hum.

23 Q. Okay. And you say you were feeling kind of -- you had a
24 cough kind of developing but not feeling too bad?

25 A. Well, it wasn't to the point where I thought it would disturb

1 the passengers.

2 Q. Right.

3 A. I had a little cough, you know.

4 Q. You were just kind of toughing it out.

5 A. Yeah.

6 Q. Yeah. Okay. Sunday, you worked?

7 A. Yes.

8 Q. Okay. And anything, anything then? So, I mean, is this --
9 sleeping normally?

10 A. Like I said, the cough came all of a sudden like on Tuesday
11 and it got to the point to where, okay, I need to rest or I need
12 to, you know, take something.

13 Q. Um-hum. Um-hum.

14 A. And I took something on Tuesday. It made me feel better by
15 the time I woke up Wednesday. Other than this, I would have
16 called out of work, and I felt fine.

17 Q. Got you. Got you. So -- I'm sorry. I didn't mean to cut
18 you off. So Wednesday was actually an extra day?

19 A. Yes.

20 Q. Okay, okay. Got you.

21 So on a given night, what's your target -- how many hours do
22 you like to sleep? Your standard 8 hours? Can you --

23 A. I take naps all the time.

24 Q. Naps all the time?

25 A. That's all you can do with two little kids, you know. When

1 they get up, I get up.

2 Q. Oh, yeah. Yeah. Did they wake you up at all -- how was it
3 that week? Were they pretty good? Were they waking you up a
4 little bit?

5 A. Well, it's a routine. So, you know, I don't -- I wake them
6 up sometime because I don't have time to see them --

7 Q. Um-hum. Um-hum.

8 A. -- you know. You know, when you need to -- I mean, my bed's
9 comfortable, my house is comfortable, I, you know, I sleep very
10 well.

11 Q. Um-hum.

12 A. But, you know, we're like Vulcans, we don't require 8 hours
13 of sleep no more. You can't get it when you work --

14 Q. Yeah.

15 A. -- the hours we do, when you have irregular hours. And so
16 your body gets accustomed to it after a while.

17 Q. Right. Right. Yeah, you've got to kind of sleep when you
18 can. So you knew when your shift was going to be on Wednesday. I
19 mean, did you -- were you able to sleep on Tuesday night okay or
20 did you get woken up?

21 A. I went to bed around 5:00 on Tuesday because I wasn't feeling
22 good.

23 Q. Yeah.

24 A. And I woke up like around 2:00, checked on the kids, went
25 back to sleep and woke up around 8-something.

1 Q. Um-hum. Um-hum.

2 A. I got more sleep than I normally get --

3 Q. Yeah.

4 A. -- because of probably the medicine and just, you know.

5 Q. I totally understand. Yeah, when I'm not feeling so hot,
6 that's all I do is sleep, you know, so -- okay.

7 How about -- you know, so the date of the accident, you've
8 already kind of gave a pretty good overview of that. So you're
9 saying it was pretty -- how was your workload that day? I mean
10 were you -- you said you weren't that busy in terms of passengers
11 but -- you said you were feeling okay. Was it -- were you
12 stressed out? Were you just kind of business as usual? Were you
13 kind of having to fight through it to get through the day?

14 A. Just came out of nowhere. I had no idea why and what, you
15 know, took place. It just, you know -- I thought I was having a
16 good day.

17 Q. Yeah, yeah. So you were like I'm feeling better, cruising
18 along, and then just started to feel tired?

19 A. (No audible response.)

20 Q. Okay. All right. Well, I think that covers the day of the
21 accident. I think I'm going to hand it off to Steve here, and
22 then we'll do another general round of questions. Thank you.

23 DR. JENNER: Okay. Thank you. Steve Jenner with the NTSB.

24 BY DR. JENNER:

25 Q. I'm going to -- I'm sort of doing cleanup here. So I'm just

1 going to fill in some details that I'm a little unclear about.

2 At one point you had mentioned earlier that you heard
3 something over the radio. Do you recall radio conversation during
4 the trip or was this after the incident?

5 A. This was after the incident.

6 Q. Okay. And what is it that you heard?

7 A. The dispatcher dispatching personnel to 38th Street. Not the
8 dispatcher, but the radio.

9 Q. Emergency personnel?

10 A. Yes, sir.

11 Q. Do you know who called in the situation?

12 A. I assume it was the previous -- in front of me.

13 Q. Okay. Did you hear that call-in over the radio?

14 A. We don't hear that call. You just hear the overall call for
15 everybody else.

16 Q. Okay. At any time before the incident was there reason for
17 you to communicate to the dispatcher or the dispatcher to try to
18 reach out to you?

19 A. No.

20 Q. Under what circumstances would you have a conversation with
21 the dispatcher?

22 A. Light in the tunnel being faulty, not, you know, being red.
23 If there are any blocks on the road, on the rail, we contact them.
24 Well, just, you know, even issues with the passengers, anything
25 like that.

1 Q. Okay.

2 A. Trouble we come up with.

3 Q. Okay. But as far as you recall, it was a pretty normal
4 operating day for you in terms of passengers and equipment and
5 weather?

6 A. Yes.

7 Q. Okay. You had mentioned, in jumping around a bit, that you
8 are required to report I think you said narcotics, if you were
9 taking them. Do you recall what else you're required to report?

10 A. You mean as far as medicine is concerned?

11 Q. Yes. Is there a specific list of types of medications?

12 A. Well, anything that's going to put you, put you under. I
13 don't take anything that heavy. It might have a little Benadryl
14 in it, which I, you know -- but Benadryl is not one of the things
15 on the list that -- it's required for us to know about and be
16 aware of it, but not, you know --

17 Q. What -- I'm sorry.

18 A. You have daytime and then you have nighttime. I don't
19 normally take medicine when I'm working, so -- I never had a need
20 to.

21 Q. Okay. I heard the conversation about you were going to --
22 requested to get the name of the medication.

23 A. Yeah.

24 Q. But do you remember if you purchased -- did you purchase it
25 yourself?

1 A. Over the counter.

2 Q. Okay. Do you recall if it said drowsy versus non-drowsy?

3 A. No. I just wanted to get the symptoms. You know, they put
4 symptoms on it for cough, cold, you know, headache, that kind of
5 stuff. All I looked at was the cough. That's all I wanted to
6 cover was the cough part.

7 Q. Okay. You mentioned that your eating routine was changed.

8 You were eating less --

9 A. Yeah.

10 Q. -- in the last few days, popsicles and whatever you could
11 keep down. What's your normal diet like?

12 A. Well, you see how skinny I am already, right. So I try to do
13 my protein and I try to exercise, but you can't always do that, so
14 -- but my wife likes to cook. But, you know, chicken and
15 potatoes. She's not healthy, but she looks good.

16 (Laughter.)

17 BY DR. JENNER:

18 Q. And we have that on the record, so that's good.

19 When did you start eating less? When you start feeling bad,
20 when did your diet change so you were eating less? What day was
21 that?

22 A. It's hard to say because, you know, sometime depending on how
23 you're working, you either get time -- a lot of times when you're
24 working, you don't have time to eat. It may be your lunch period,
25 but if you're running behind schedule, you don't eat because

1 you're running behind schedule. You try to keep the schedule. So
2 you're always munching here and there. You never have time to --
3 you know, not enough time in the schedule to sit here and -- or
4 somebody get on the trolley and want to talk to you; like please
5 don't talk to me while I'm eating my food, you know. So you try
6 to do things on the run and you eat according, you know, you get a
7 little snack here and there.

8 Q. Okay.

9 A. It's not a healthy lifestyle when it comes down to eating.
10 It's hard to do.

11 Q. Okay. On a related note, what is -- do you have a normal
12 start and end time for your shift during the week? A normal
13 schedule?

14 A. Yeah.

15 Q. What -- for instance, like your Monday shift, when was that?

16 A. Mondays, I work from 11:00 to 9:00 approximately.

17 Q. Okay.

18 A. It's probably 11:02 on there to 9:00 or something like that
19 there.

20 Q. Okay. And are you working -- so that's 10 hours. So are you
21 driving the entire time or do you have moments of down time where
22 you're back at work?

23 A. Well, actually it's -- yeah, there's a swing in there from
24 that 11:00 to 9:00. 11:00 to 1:00 I do one trip, and I come back
25 and do -- I do three trips.

1 Q. So 11:00 to 1:00 --

2 A. So I take about a 2-hour break in between there, like 1:30 to
3 3:00. It's not always that way, but for that shift I do.

4 Q. Okay. And then after 3:00, you're back on the road again
5 till when?

6 A. 3:00 to 9:00.

7 Q. Okay. So that's a 6-hour stretch there. During that break
8 period, what do you like to do?

9 A. Well, I sit in my car and catch up with the family. You
10 know, you don't have time to talk to people, so I normally talk to
11 my kids, and sometime I even sit there and sleep, depending on,
12 you know.

13 Q. Okay. Do you -- is sleep part of your routine? Do you think
14 you sleep some of the time, most of the time?

15 A. It's an option. Kind of, you know, I sleep when I need to
16 sleep. You can have long nights normal, where I stay up till like
17 2:00 or 3:00 in the morning.

18 Q. Okay. Okay. Changing topics a little, I have not been in a
19 trolley car operating compartment. Could you give us a quick
20 overview of what the control stand looks like? For instance, do
21 you have a separate throttle and a separate brake or is that part
22 of one maneuver? Do you have pedals?

23 A. A trolley don't have a wheel. That's the first thing. You
24 have switches for most, on the top, as far as the light controls.
25 When you go through the tunnel, you need a -- got a big old fog

1 light on front. You turn that on so you can see. And also you
2 have the switches for the doors. A trolley has like three brakes
3 on it. It has a safety brake, an indent brake, and it has a -- I
4 don't know what you call that pedal, but you got to keep your foot
5 on it all day long. And your foot gets cramps every now and then,
6 but, you know, the trolley will stop if you come up off of it.

7 So --

8 UNIDENTIFIED SPEAKER: Call it a deadman.

9 DR. JENNER: Deadman.

10 MR. ANDERSON: Deadman, that's what it's called.

11 BY DR. JENNER:

12 Q. Okay. Um-hum.

13 A. Or your feet be dead after work, you know. Then you have a
14 regular accelerator and then you have a regular brake.

15 Q. Are those hand controls?

16 A. No, foot controls.

17 Q. Foot controls, okay. So similar to a car. If you lift up
18 that deadman's pedal, does it immediately apply the brakes?

19 A. Yes. It stops.

20 Q. Okay.

21 A. And it beeps, too.

22 Q. At the same time, it'll stop and beep?

23 A. Yeah, yeah.

24 Q. Okay. Are there any other type of alerting devices that --
25 flashing lights or audio type of alarms that you have to respond

1 to? For instance, and I'm thinking in terms --

2 A. Not on the street there's not.

3 Q. Okay.

4 A. The trolley doesn't have a fail-safe when you get too close
5 to that because that's all visual.

6 Q. Okay. So your main -- you're required to keep your foot on
7 that pedal and then that --

8 A. Yeah.

9 Q. -- and that keeps the operations going. Okay.

10 Did the car, the type of trolley -- are there different types
11 of trolley cars and control stands?

12 A. They all have basically similar stuff. One just operates
13 better than the other one, you know. The one I was on is air.
14 It's air operated, you know, pressures up. That helps you stop
15 it. The other one has electric. So, you know, you can step on
16 that all day long, it don't mean you're going to stop, you know.
17 So you have to -- you have a toggle switch for like the magnets
18 will help you stop, out there on the tracks. And we use that.
19 They don't like us to use it but we use it if necessary, you know.
20 It helps you to slow down.

21 Q. Okay. Tell me about the operating environment. Is it a loud
22 environment or quiet inside the compartment?

23 A. Well, if you have a lot of people on it, they like to all
24 talk. You know, I try to keep them quiet, but they still talk.
25 It's not distracting. It's something you get used to. You know,

1 you can still socialize at the same time. You know, we can chew
2 bubble gum and talk at the same time. You know, you try to do
3 that. You're required. You have to keep looking this way, you're
4 looking that way. You're passing out transfers. People asking
5 you directions. You know, you've got to be multifaceted to work
6 on a trolley, you know. You have to have a tough skin because
7 people like to call you names because you're late, or if you
8 missed them or whatever.

9 Q. Okay. In terms of temperature, do you have an air
10 conditioner or heater there?

11 A. There is a heater there. There is a heater.

12 Q. Was it on and working --

13 A. Well, I normally turn mine -- because it's right here and it
14 either burns your bag or burns your leg, one or the other. It's
15 too hot. But when it's cold, you need it because that's the only
16 thing you have. You don't have nothing heating up your legs and,
17 you know.

18 Q. So did you have it turned on that day?

19 A. No, it was a nice day. I had it turned off.

20 Q. Oh. So was it -- the environment for you was comfortable?

21 A. Yeah.

22 Q. Okay. What I'd like to do is, Ryan had gotten a good idea of
23 how you were feeling the different days, but if I can get from you
24 a little more detail about the activities you were doing, on duty
25 and off duty activities, from a few days before the incident. So

1 if we can go back to Sunday?

2 A. Um-hum.

3 Q. Okay. Were you working Sunday?

4 A. Yes.

5 Q. And so what time were you working on Sunday? From 11:00 --

6 A. My Sunday schedule normally starts at 2:00, 2:00 to 12:00.

7 Q. 2:00 p.m. to midnight?

8 A. Yes, approximately.

9 Q. Okay. And what do you do after midnight?

10 A. Go home.

11 Q. Okay. How do you get home?

12 A. Drive.

13 Q. Okay. And how far is your commute to your home?

14 A. About 15 minutes.

15 Q. Okay. So you arrive -- now it's after midnight Sunday, going
16 into Monday morning. What time do you arrive home Monday, that
17 period?

18 A. On Monday night?

19 Q. Well, it's Monday -- it's just over Sunday into early Monday.

20 A. Oh, okay. What time do I get home?

21 Q. Yeah. So you get home, it sounds like, between 12:15 and
22 12:30.

23 A. Well, I mean, you know, this is the time to also -- if I see
24 an overnight drugstore or something like that open, you know, or a
25 grocery store, you know, I might go buy some grapes for my kids;

1 you know, sometime you got to get milk and you got to pick up some
2 things every now and then. I can't recall if I stopped at the
3 store but, you know, Christmas stuff is on sale now, you know, so,
4 you know, you --

5 Q. Okay. So you get home maybe around 1:00 a.m., approximately,
6 give or take.

7 A. Yeah.

8 Q. Okay. So what do you do after you get home at 1:00 a.m.
9 Monday morning? Do you eat or do you go right to bed?

10 A. Well, you eat. You're wound up. You're biological clock has
11 got you up now. You go from being tired, and then finally you get
12 up and you're wide awake, you know, and you want to go to sleep
13 again. So I normally watch a little TV but, you know, I'm
14 lounging.

15 Q. Okay. So eat, TV, relax, decompress, as I like to say. So
16 what time do you go to sleep now Monday morning?

17 A. I'm not up all night because, like I said, I know my kids is
18 going to be getting up soon so I normally try to get some sleep.

19 Q. Okay. So you're up all night and then you play with the
20 kids.

21 A. Well, not play with them. You know, in the middle of the
22 night you change the diapers and put them back to bed, you know.
23 You don't stay up with them, you know.

24 Q. Okay. So with the family, Monday, into the morning, and what
25 time do you get to sleep on Monday?

1 A. I sleep from maybe 2:00 to 6:00, 2:00 to -- you know, I don't
2 got to be at work till 9:00 -- or 11:00, so --

3 Q. Okay. 2:00 p.m. to 6:00 p.m. How is your sleep between 2:00
4 p.m. and 6:00 p.m.?

5 A. Comfortable, you know.

6 Q. Okay. Do you wake up feeling okay at 6:00 p.m.? That's a 4-
7 hour block? How do you feel when you wake up?

8 A. I'm very -- I wake up -- I almost don't need no sleep.

9 Q. Okay.

10 A. Okay.

11 Q. So now it's Monday at 6:00 p.m. and you woke up. Do you
12 recall what you did after you woke up?

13 A. Monday at 6:00 a.m.

14 Q. 2 -- okay. I'm sorry. So your Monday activities --

15 A. Yes.

16 Q. -- TV, relaxing are just for a couple hours?

17 A. Yeah.

18 Q. And that's 2:00 a.m. to 6:00 a.m.

19 A. Well, no, I don't have activities from 2:00 a.m. to --

20 Q. Right, right. That's when you're sleeping.

21 A. Yeah.

22 Q. Okay. Okay. Thanks for telling me that. So after 6:00
23 a.m., what did you do the rest of the day Monday?

24 A. I mean, my family gets up. I get them up and give them some
25 more milk and they go back to sleep and normally allowing some

1 more, you know -- unless I have something pressing to do, I
2 normally will lounge till it's time to go to work.

3 Q. Okay. So Tuesday you did not work?

4 A. No.

5 Q. Okay. So was Monday any different for you in terms of how
6 you spent the rest of the day since you didn't have to prepare for
7 work?

8 A. No. I mean, it's nice to be off. It's nice to be home. So
9 you try to do what you've got to do. When you have a house,
10 you've got more things to do than just go in and sit in a chair,
11 you know. Take out the trash. You've got to leave trash for the
12 next morning. You've got things you've got to do, like little
13 things.

14 Q. Okay.

15 A. Your normal routine. Like I said, I wasn't -- nothing is
16 really -- felt out of place, you know, like I'm, you know, extra
17 dragging or I was doing anything out of the ordinary, you know.

18 Q. Right. Okay. Monday, sometime that night, you went to bed
19 Monday night?

20 A. Yeah.

21 Q. About what time was that?

22 A. I have no idea. I could've been watching TV, and sometime
23 you watch TV till the TV puts you to sleep. I really don't know,
24 you know, since I don't get to watch TV.

25 Q. Okay.

1 A. Sometime you find something interesting or I might listen to
2 Donald Trump. That's always --

3 Q. Okay. Do you think you fell asleep before midnight?

4 A. I doze off a lot. You know, I take little naps.

5 Q. Okay.

6 A. I realize they're necessary. It's something I've
7 incorporated into my daily routine, you know.

8 Q. Okay.

9 A. Half the time -- I believe in sleeping when you have the time
10 to sleep, because you know you're going to be something later so
11 you -- even if you're not tired, you at least are lounging so
12 you're getting some kind of rest.

13 Q. Okay. Did you have a long period of sleep besides dozing off
14 Monday into Tuesday? Tuesday's your day off.

15 A. Um-hum.

16 Q. So at some time at night, Monday night, you fell asleep. Do
17 you remember being asleep for an extended period of time?

18 A. No. Again, I can't really say it was out of the ordinary or
19 anything different. Because I know I'm off Tuesday, so what I
20 don't do on Monday I can do on Tuesday.

21 Q. Right. So when did you wake up Monday or Tuesday?

22 A. Our kids don't normally get -- well, probably like around
23 like 9:00 --

24 Q. Okay.

25 A. -- 10:00, yeah.

1 Q. Okay. Did you spend the day at home Tuesday?

2 A. Off and on. We did some shopping.

3 Q. Okay.

4 A. We had to go out, run some errands.

5 Q. That's right. You mentioned that. Okay. But mostly with
6 the family and some chores Tuesday. And sometime Tuesday night
7 you went to bed?

8 A. About 5:00. I was supposed to get up at 11:00 to look at
9 something and it was 3:00 when I woke up.

10 Q. All right. 3:00. Now we're into Wednesday morning at 3:00.

11 A. Um-hum.

12 Q. Okay. I think you gave us a description -- for Wednesday,
13 you woke up, you checked on the kids, then went back to sleep till
14 about 8:00 a.m. Okay. At 8:00 a.m., so you woke up and starting
15 your day, how did you feel, considering you had a cold and things
16 like that, in terms of rest? How did you feel when you woke up at
17 8:00 a.m.?

18 A. I felt a whole lot better because the coughing was
19 incapacitated at that point, you know. I was -- it was -- you
20 know, because when you're coughing up phlegm and you just can't,
21 you know -- so as long as I was able to blow my nose, it made me
22 feel better, you know, warm washcloth compresses and stuff like
23 that.

24 Q. Okay.

25 A. Coughing was when you lay down, you know, you start coughing,

1 so I kind of like slept in a half up and half down position, you
2 know, so I can get that relief.

3 Q. Okay. And after that, you did some chores and eventually
4 went to work. Was there any time that you started to feel worse
5 before reporting for work?

6 A. No, not -- no.

7 Q. No?

8 A. But I thought I would when I went to the office. That day --
9 like I said, the day was even warmer, but I thought it was going
10 to be a colder day that day and it was really nice and mild, so --

11 Q. And it's -- I think you described your -- when you went on
12 duty, up until the incident, you felt pretty good. Is that how
13 you would --

14 A. Um-hum.

15 Q. And you felt pretty good until you didn't feel good?

16 A. Yeah.

17 Q. Okay.

18 A. I said I drank the tea with the medicine in the morning, and
19 I was going -- and I was running errands and then, you know, I
20 didn't think nothing else of it.

21 Q. Okay. I appreciate you working with me with that. Thank
22 you.

23 DR. JENNER: That's all I have right now.

24 MR. FRIGO: Okay. Mr. Anderson, how you doing? Do you need
25 to take a break? We've been chatting here for a while. You want

1 to take a little --

2 MR. ANDERSON: No, that's fine.

3 MR. FRIGO: Take a break? Okay. Let's take a break.

4 (Off the record.)

5 (On the record.)

6 MR. FRIGO: We're back on the record.

7 BY MR. FRIGO:

8 Q. Mr. Anderson, I just have a few follow-up questions. Can --
9 from your training and what you can recall, under normal street
10 running operations, what -- how do you know what speed to operate
11 at?

12 A. The flow of the traffic, you know, stopping distance, you
13 know, what the trolley can do, I mean, depending on the weather.
14 You know, when it's raining, you're really on pins and needles
15 just because the tracks have a tendency to slide. So, you know,
16 you're normally a little bit more cautious when it's wet.

17 Q. You've got the other motorists and --

18 A. Yeah.

19 Q. What else is out there? I mean what else have you seen in
20 your experience out there operating?

21 A. Well, cars don't respect trolleys in Philadelphia, in
22 general, let's say if it's a big car. So, you know, they cut in
23 front of us all the time, you know. You know, red light, they
24 want to cut in front of you, then they want to make a turn, then
25 they want to stop, you know. So, you know, we're playing defense

1 24/7, you know.

2 Q. One of the -- you know, you mentioned operating with the flow
3 of traffic and moderating distance under inclement weather. What
4 about when you are, you know, following another trolley? Are
5 there any specific requirements or rules that govern how fast you
6 can follow behind another trolley, under a certain distance or is
7 there anything that -- about that?

8 A. Well, there's a distance requirement. You try to keep like a
9 trolley length in front of you or a half, you know, on a regular
10 street. You try to maintain like around 5 miles, give or take.

11 Q. And that's about a trolley length?

12 A. Probably be more like two trolley lengths. You know, we
13 don't -- unless they're stopping or coming to a stop because, you
14 know, we normally will adjust our speed accordingly.

15 Q. Okay. And you mentioned before, you mentioned a little bit
16 about the -- you know, operating the 10 and operating the 15, and
17 the 10 being air and the 15 being an electric setup. Can you tell
18 us a little bit more about the differences between operating those
19 two pieces of equipment as far as what you have to do as an
20 operator to safely operate those two different pieces of rolling
21 stock?

22 A. Well, they all have the same brake mechanisms, safety pull,
23 and they all have the same indent. They all have the toggle
24 switch which will put the magnet on the tracks. It's just the air
25 one works a whole lot more efficient than the one on the 15, or

1 either maybe it's the power is generated from the air pressure,
2 you know. On the LVR, the pressure on it is a little bit tighter.
3 You can come to a more secure stop. The 15 you have to lay back a
4 little bit more.

5 UNIDENTIFIED SPEAKER: The LRV. I'm sorry.

6 MR. ANDERSON: Yeah, the LRV.

7 BY MR. FRIGO:

8 Q. So it sounds to me like it takes some skill to operate the
9 two different pieces of equipment, and you're doing that -- are
10 you doing on the same shift or swing? Could you operate the 10 on
11 your first run and then come back and operate a 15 on the second
12 part of that shift?

13 A. Yes.

14 Q. Do you -- can you recall, in the past, have you ever --
15 whether it was when stopping or accelerating under operating
16 conditions, have you ever gotten confused as to what piece of
17 equipment you were in and maybe it didn't respond how you thought
18 it was?

19 A. No.

20 Q. Okay. That's all I have. Thank you, Mr. Anderson.

21 MS. GREGORY: Scott.

22 MR. SAUER: Yeah.

23 BY MR. SAUER:

24 Q. Just a couple follow-up. You had mentioned that your commute
25 time back and forth to work is approximately what?

1 A. Ten, 15 minutes.

2 Q. And you had taken your -- the cold and flu medicine prior to
3 leaving the house that day?

4 A. Um-hum.

5 Q. Was it like right as you walked out the door or what time
6 prior to leaving did you take it?

7 A. Let me see. I was drinking it in the car because I had to --
8 I did make a stop at the store and then I went back home to take
9 some milk to the kids before I went to work.

10 Q. Okay.

11 A. So probably like around 9-ish, give or take.

12 Q. Okay. And unrelated to that, but regarding the equipment,
13 the trolley that day. When you picked up the trolley and you
14 exchanged information with the outgoing operator, you asked -- you
15 talked about the equipment.

16 A. Um-hum.

17 Q. Did he remark on anything particular about the trolley
18 itself, how it was running that day or did he say anything
19 specific?

20 A. No, not that I can recall.

21 Q. Okay.

22 A. Other than it was a good trolley, you know.

23 Q. Right. And when you left for your first trip after you had
24 made relief, did you leave on time?

25 A. Yes.

1 Q. Okay. And do you remember what time that was?

2 A. I can't be specific. I came to work at 11:30. So --

3 Q. Okay.

4 A. It's normally like when they -- when your time to get to work
5 -- I don't know if it was like 11:50 or 11-, you know.

6 MR. SAUER: Okay. That's all I have.

7 MS. BONINI: Beth Bonini from PennDOT.

8 BY MS. BONINI:

9 Q. You mentioned that every day you drink one of those energy
10 drinks. Did you happen to have an energy drink on Wednesday?

11 A. No.

12 Q. No energy drink?

13 A. No, not that day.

14 Q. Did you have one on Tuesday?

15 A. Well, Tuesday I don't need them because I'm home.

16 Q. Okay. You have a 2-year-old, two. You described that on
17 Tuesday, that's kind of when you felt your worst with your cold.
18 But you, and you had Wednesday -- originally you had Wednesday off
19 but you called dispatch to work on Wednesday. When did you call
20 dispatch to volunteer to work on Wednesday?

21 A. Well, I said normally I -- excuse me -- normally I do work on
22 Wednesdays.

23 Q. Okay.

24 A. So they put your name in the book for -- you know, I told
25 them either Tuesday or Wednesday, whichever day looked better, and

1 it's normally on a Wednesday. So I don't know -- I was out
2 running errands, so I don't know if it was like around 4:00, 5:00,
3 to check.

4 Q. The day that -- you called the day before or was it --

5 A. Yeah, on -- yeah.

6 Q. The Tuesday, the day before.

7 So I know that everyone's required to have a rulebook with
8 them. Have you had any training on the rulebook?

9 A. We do occasional training all the time, but yeah. You mean
10 training on the rulebook how?

11 Q. So on the contents of the rulebook.

12 A. Initial training, yes.

13 Q. Uh-huh. And any follow-up training on the rulebook?

14 A. Well, they do occasional training, but the supervisors on the
15 street try to keep us under the rules if they see a --

16 Q. And do they ever check to make sure you have your rulebook?

17 A. They do spot checks.

18 Q. And when was the last time they did a check to make sure you
19 had your rulebook?

20 A. I don't know if it's been like maybe 2 weeks maybe. Some
21 supervisors do something -- once you show them like three or four
22 out of five items, they just say okay.

23 Q. Okay. So the last time the supervisor checked your rulebook
24 was, you said, about 2 or 3 weeks ago?

25 A. Well, it would have been -- I'm not so sure if it was 2 or 3

1 weeks, you know, but they check something. Whenever they,
2 whenever they stop you, they want to ask you something.

3 Q. They check to make sure you're --

4 A. And so you try to be -- yeah, your equipment and all that
5 other kind of stuff, so --

6 Q. Any recollection of the last time that was?

7 A. No, I can't.

8 Q. Okay. I think I'm good. Thank you, sir.

9 DR. ERINOFF: Dr. Erinoff, SEPTA Medical.

10 BY DR. ERINOFF:

11 Q. I want to follow up on the question about the energy drink,
12 and what I've heard you say, you frequently have an energy drink
13 on a day when you're working. Do you recall about what time of
14 the day you usually have your energy drink?

15 A. Normally I'll drink it throughout the course of the day. I
16 don't drink it initially because I don't need it initially. You
17 only drink it when you need it, when you feel yourself, you know
18 -- sometime it's almost like a (indiscernible), you just take a
19 swig and it knocks off your, you know.

20 Q. Okay. So you'll be -- so just to clarify. You have the same
21 can and you'll just be drinking it throughout the day?

22 A. Well, no. It's not that big of a can.

23 Q. Okay. It's a small can. There's some --

24 A. I have a long throat so, you know, it don't take me long to
25 consume that.

1 Q. Okay. So -- all right. Another clarification is you're
2 taking the powder cold and flu medication, correct?

3 A. Um-hum.

4 Q. Okay. A lot of different ones out there. Do you have any
5 recollection what the dosing recommendation would have been? Was
6 it once a day, twice a day, something you could take every 4 to 6
7 hours? Do you have any recollection of how often it said you
8 could take it?

9 A. I think it said 4 to 6 hours.

10 Q. Okay. Following the incident, did you receive any type of
11 medical evaluation or medical care?

12 A. Yes, they took us to the ER, too.

13 Q. Okay. Which ER did they take you to?

14 A. Presbyterian.

15 Q. I don't want to get into diagnosis or anything else, but do
16 you recall if you said anything to the doctor in ER about having
17 felt dizzy or groggy prior to the accident?

18 A. I'm not sure if they asked me.

19 DR. ERINOFF: Okay. Okay. I don't have any further
20 questions.

21 MR. VERA: Will Vera.

22 BY MR. VERA:

23 Q. Gary, you said December. Last month did you get 3 years here
24 or December coming you'll be 3 years?

25 A. December this month.

1 Q. Just last month --

2 A. Yeah, yeah, last month.

3 Q. -- was your third year anniversary with SEPTA?

4 A. Yeah.

5 Q. Now I noticed that you have Tuesday and Wednesday off,
6 correct? So are you a regular operator or are you still an extra
7 operator?

8 A. I'm a regular now.

9 Q. When did you become regular?

10 A. The last picking because --

11 Q. So this picking here is your second picking as a regular
12 operator?

13 A. Well, actually it's my first picking because they picked me.

14 Q. Okay.

15 A. I was the last man on the totem pole. So --

16 Q. Okay. So this is your first time being a regular operator?

17 A. Yes.

18 Q. Prior to being a regular operator, you were considered an
19 extra operator?

20 A. Yes.

21 Q. And at that time, do you have a set schedule?

22 A. Well, you can have -- be on hold down for people on vacation
23 and you have their runs, which is considered a hold-down for them.

24 Q. Okay. With drinking energy drinks to perform this job here,
25 wherever you worked prior to this, did you take a lot of energy

1 drinks or is it mostly because of working with SEPTA now that you
2 see yourself that you're taking energy drinks because of your
3 operations now, or is it something that you were doing with prior
4 jobs?

5 A. I like the taste so I've taken them occasionally. I probably
6 take more with SEPTA than I did in my prior job because I was able
7 to have a regular schedule.

8 Q. Okay. I see that, when you were first hired, were you
9 fortunate to become running the hold-downs or were you a slate
10 operator?

11 A. Slate. I was a slate, yeah, when I first hired.

12 Q. If I say the explanation of a slate operator is that you fill
13 in --

14 A. Yes.

15 Q. -- for runs that are open --

16 A. Yep. Yes.

17 Q. -- could I say that one day you'll work in the morning and
18 one day you'll work at night?

19 A. Yes.

20 Q. Could I say that that type of operations would force you to
21 probably drink more energy drinks because your body's getting used
22 to --

23 A. Irregular --

24 Q. -- different hours?

25 A. Yes. Yes, a very irregular schedule. Eight hours in

1 between, the necessary that they require, but yeah.

2 Q. And now this is your first time as a regular operator.

3 A. Um-hum.

4 Q. So you now actually have a set schedule and you can now pace
5 yourself a little better.

6 A. Right.

7 Q. Earlier you said with SEPTA it's also hard to see your
8 family.

9 A. Um-hum.

10 Q. And now you can see them a little more often because you have
11 a regular schedule?

12 A. It's still hard to see them. My schedule's off. They sleep
13 when I'm working.

14 MR. VERA: Okay. Okay. That's all I have.

15 MR. LLOYD: Troy Lloyd from FTA.

16 BY MR. LLOYD:

17 Q. Explain the operating cab to me, okay. So you sit down in
18 the operator's seat, right?

19 A. Yeah.

20 Q. What configuration do you have? How do I move this bad boy?

21 A. You have knobs up here which are reverse, pause and forward.
22 Then you put it in standby, you know, when you want to secure the
23 trolley, you know, if you get off of it, stuff like this.

24 You have a line of -- a row of toggle switches which control
25 your doors. You also have toggles over here which control your

1 safety brakes. You have one over here that has a safety brake.
2 You know, one your detent -- your intent. What do you call it?
3 When the magnet drops down to the -- that's the toggle switch on
4 your left side. Then on this side, you know, you have your horns.
5 So you keep your hand on the horn. You either have a horn -- so
6 normally you go down the road we have a hand on the horn and we
7 have a hand on the toggle switch, because this is like a safety
8 switch, plus you have the brake if you need to.

9 Q. Foot pedals?

10 A. Foot pedals, yes.

11 Q. All right. So explain the foot pedal situation here, the
12 diagram.

13 A. Three foot pedals. The first one right here, this is your
14 deadman switch which you got to have down all the time or the
15 trolley won't move. Then you have your brake pedal, regular brake
16 pedal; then you have the accelerator.

17 Q. So I've got a deadman?

18 A. Yeah, deadman, which you got to keep your left foot on all
19 the time. It won't --

20 Q. That's the leg killer --

21 A. Yeah.

22 Q. -- right?

23 A. Yeah, yeah.

24 Q. Then I've got a brake. Then I've got a power?

25 A. Yep.

1 Q. So then I'm like this, and then I'm here and I've got --
2 constant on the horn, and then I'm doing a toggle switch. So I'm
3 coming out of the tunnel into a right-hand curve, okay. And then
4 you were sitting there saying we're getting near Lancaster and
5 that's when you started to feel groggy and all of a sudden you got
6 a trolley in front of you, right?

7 A. Well, I didn't get groggy on Lancaster.

8 Q. Where did the grogginess come from? Where -- you went from a
9 point to where all of a sudden sitting right there is a trolley
10 sitting in front of you a couple feet away?

11 A. I was on Lancaster, I didn't feel anything. But when I
12 turned on -- I was on 36th Street and I didn't feel anything, and
13 the trolley had already passed. By the time I made my turn and I
14 was going down 37th Street, that's when I -- you know, everything
15 went --

16 Q. So how far -- so when you all of a sudden come to your
17 senses, how far do you think that trolley was in front of you?

18 A. Well, when I, when I -- I blinked and I opened my eyes --

19 Q. It was right there?

20 A. Yeah.

21 Q. So what's, so what's --

22 A. But I seen him up in the distance.

23 Q. So what's the operator's instinct, that once I sit there and
24 go, oh, shit, what do I do? What am I -- what are you trained to
25 do?

1 A. Slam on the brake --

2 Q. What do I do?

3 A. Slam on the brake and press the indent.

4 Q. So I --

5 A. The indent has the same effect as the brake does. It's just
6 -- maybe it's an easier way to -- you know, it doesn't give you no
7 extra brake power. It gives you the same brake power as if you
8 drop the, you know, you drop the toggle. You know, but the toggle
9 switch is kind of -- it helps you to slide into it, you know, to
10 slow down slowly. The indent will just give you an abrupt, you
11 know, depending on the momentum of the trolley. Does that make
12 sense?

13 A. I'm just -- I'm trying to fill it out here.

14 Q. Okay.

15 A. You know, so it's -- if I keep my foot on the deadman and let
16 off the gas, but I don't hit the brake, what does my train do?
17 Does it stop? Does it coast? Does it --

18 A. If you keep your foot on the indent?

19 Q. So if I keep my foot on the deadman, right, that keeps
20 everything engaged; that's your safety switch. And I've got my
21 gas pedal down, my power pedal, and I let off, does that bring my
22 train to a stop or does it put me in a coast mode?

23 A. Well, you still -- as long as the indent is encountered,
24 you're still going to move. You know, it still -- it will coast,
25 yeah.

1 Q. So the -- I guess the -- take the foot off the deadman, just
2 hit the brake, and there's a toggle switch brake --

3 A. That's not a natural movement to pull your foot off, the left
4 foot. You don't lift that foot. That foot is so used to being
5 down it stays down. If it falls off, it's because you went to
6 sleep and then, you know -- but other than this, you don't
7 naturally pull that.

8 Q. So we have a deadman switch that's a safety device that's
9 naturally in a place that's not a natural movement if I have to
10 come to an abrupt stop?

11 A. If you lose consciousness, I think you would lose some of
12 that foot pedal. You know, it's almost like driving your regular
13 car. You know, you may think you awoke and you fall asleep and
14 like all of a sudden you're thinking you're getting ready to step
15 on the -- you know.

16 MR. LLOYD: That's all.

17 BY DR. WEBSTER:

18 Q. Hey, it's Dr. Nick Webster again. How are you now? Like how
19 are you feeling now?

20 A. Physically -- I'm more emotionally distraught than I am
21 physically, you know. I'm used to working in pain, you know, it's
22 just something you do. It's, you know -- I come to work, push
23 yourself because you got to work, you know. You don't have a
24 system that's set up to call out when you feel like it because
25 everything is -- you take a hit for it.

1 Q. Um-hum.

2 A. So you try to work as much as you can, you know.

3 Q. Okay.

4 A. If you really need to call out, then you call out.

5 Q. I'd like to go back to the accident and a little bit before
6 the accident actually. I haven't ridden the trolleys. I
7 apologize. I haven't got to ride with you. But as a driver, do
8 you have a seatbelt?

9 A. No.

10 Q. Okay. You're sitting in like a car seat or plastic seat?
11 What kind of seat are you sitting in?

12 A. Well, they try to make it comfortable, but it really ain't a
13 comfortable seat.

14 Q. Yeah. Is it like this kind of seat like we're sitting in?

15 A. Well, it's -- it has cloth in it.

16 Q. Okay.

17 A. It's a cloth seat. I don't fit in the trolleys first of all.
18 I'm 6'8".

19 Q. Okay.

20 A. I have to do a lot of adjustments. You know, I've got to put
21 my seat up high so my legs have enough room to move, you know.
22 This particular trolley, the seat didn't go back that far. So
23 like I said, my legs --

24 Q. Kind of splayed?

25 A. -- was kind of split, you know. I try to split it so I don't

1 bang it up against the metal. But, I mean, you get used to it.
2 You still try to lift the seat up. I always stick -- I stick
3 transfers under my seat to make it go up a little higher.

4 Q. Okay. So you've got your seat set and all that. You wake up
5 and whatever. I'm not sure what happened, but you got groggy, and
6 all of a sudden there's a train in front of you. That's what I'm
7 hearing. Another trolley, excuse me. And you stopped. What
8 happened --

9 A. Tried to stop.

10 Q. You tried to -- well, you stopped and something stopped.

11 A. Well, I mean --

12 Q. They hit, I guess.

13 A. When I blinked and I seen it and I tried to step on the brake
14 and it was, you know, it was just too much momentum.

15 Q. Yeah. Do you remember hearing any sliding or skidding before
16 you -- the impact?

17 A. No.

18 Q. Do you remember the impact?

19 A. Yeah, I remember the impact.

20 Q. Okay. Did -- now you're sitting there. Tell me what -- show
21 me what you did. As you're -- you see that -- this thing getting
22 really big really quick. Show me what you did.

23 A. Well, I, you know, you grab onto the thing and you try to
24 step onto the brake.

25 Q. Okay. Now where do your hands go?

1 A. Well, when you see -- you can tell -- I can tell I was
2 getting ready to have an impact.

3 Q. Okay.

4 A. But like I said, the fact that I didn't know when my eyes
5 closed, that's the part that threw me off.

6 Q. Yeah.

7 A. Then all of a sudden it's like, you know.

8 Q. Okay. So you hit. Where did you -- did you get hurt when
9 you hit?

10 A. No, I didn't hit nothing other than my knee or something --
11 my leg part. But the effect of it, I wasn't thinking about being
12 hit.

13 Q. Um-hum.

14 A. I was more or less concerned the fact that I hit.

15 Q. Okay. Now after the trolleys, after the trolleys hit, what
16 did you do?

17 A. I was kind of out of it.

18 Q. Okay.

19 A. It took me a couple of minutes to get myself alert. Like I
20 said, the noise on the overhead. So I don't know -- you know, I
21 don't think I like blanked out, but I know I was extremely -- I
22 wasn't alert to what was going on, you know.

23 Q. Okay. What's the next thing you remember going on and what
24 did you do? Obviously you went to the hospital. What happened
25 between the time of the hit and going to the hospital?

1 A. By that time, I know I opened the doors and I seen a
2 passenger on his side that was injured, you know.

3 Q. Um-hum.

4 A. But then you -- you had people coming up on the trolley by
5 that time, so, you know. But I was still not really cognizant of
6 myself, you know. I was still kind of, you know, and I was laying
7 down, you know. I was like extremely, you know, and I don't think
8 it was the impact. I think -- I don't know if it was all part of
9 the whole process of what I just, you know.

10 Q. Okay. So you're laying there. What's the next thing?

11 A. Well, I sat there for a while and just had my head down on
12 the thing because I was -- I didn't -- my energy level was, you
13 know, zapped.

14 Q. Okay.

15 A. So by that time, people were coming up and they was asking
16 questions, are you all right, you know. You know, I didn't feel
17 no physical pain on myself but I was more or less concerned with
18 the other people but I couldn't, you know, really get up and
19 assist them.

20 Q. Okay. Okay. What happened next?

21 A. They came and they started assisting people off the trolley,
22 you know. I think a paramedic came and asked me questions to see
23 if I was aware of what was going on, asked me my name, the date,
24 who the president was.

25 Q. Okay. Then did you stay there or did you get out of the --

1 A. No, I sat there for a while.

2 Q. Okay.

3 A. I didn't leave there.

4 Q. How did you get out of the -- how did you get out of the
5 trolley?

6 A. They didn't carry me off. I mean, they tried to assist me
7 off, but it wasn't until, you know, all the supervisors and
8 everybody else was coming and they was asking me, you know. I was
9 interviewed by a couple people.

10 Q. Do you remember who it was?

11 A. The Philadelphia police was there. Somebody identified
12 themselves as a safety manager. I don't -- you know, I couldn't
13 pick them out of here if they was in here now.

14 Q. Okay. And then did you go in a police car or an ambulance or
15 a bus to the hospital?

16 A. They took us to an ambulance. First they put us on the side
17 of the street.

18 Q. Okay.

19 A. First I refused to go. I really didn't think I needed to go.
20 I mean, I didn't feel nothing that was, you know, it was really
21 feeling any pain or anything, so -- then they actually convinced
22 me to go anyway just for a safety check. So --

23 Q. Okay.

24 A. After everybody else was removed, they removed me and helped
25 me down to the side. I sat on the side with everybody else and

1 they eventually moved me.

2 Q. Did they put you in an ambulance?

3 A. Yes.

4 Q. By yourself or with other people or --

5 A. Well, I was in with the other driver.

6 Q. Okay.

7 A. And they rolled me on a chair, which I didn't think was
8 necessary. I guess that's the procedure.

9 Q. Okay. And then what?

10 A. Went to the ER, sat there in the chair until we was seen by
11 triage. That was like forever.

12 Q. That's my fault. I'm a doctor. I'll give you that. Not my
13 fault, but the doctor's fault. How did they treat you?

14 A. They treated me okay. I didn't see them saying anything
15 crazy to me, you know. If they did, I wasn't paying attention to
16 them.

17 Q. Okay. In the hospital, normally we get -- when we see the
18 patient, they do vital signs and stuff and then they talk to you.
19 And they say, okay, you're good to go. Did they -- what did they
20 say they think happened to you?

21 A. They didn't say.

22 Q. Okay.

23 A. I remember she took my vital signs. I asked how they was.
24 She said you're actually pretty healthy. I said I thought they
25 would be a little slower. But my blood pressure, I think -- I

1 don't know what it was, but it was within normal range.

2 Q. Um-hum.

3 A. They asked me if I had any bruises or anything, you know, and
4 I said, no, I don't feel anything, you know.

5 Q. Okay. Well, I covered a couple of things. I wanted to make
6 sure -- see if you did have seatbelts on those things and see if
7 you were hurt, and I'm glad you weren't hurt.

8 I'm going to roll my way back out. So we've addressed you
9 coming in, and we've got your health levels before the accident.
10 We kind of got how you -- what happened during the accident and
11 how you're doing after the accident. A couple things that I'd
12 like to ask about is, number one, do you have -- during your
13 sleep, do you have any problems with snoring?

14 A. No.

15 Q. No. Does your wife say --

16 A. Nobody told me I do.

17 Q. Yeah, does anybody tell you?

18 A. She probably snores. I don't know. No, I don't snore.

19 Q. Okay. Does someone tell you that you're snoring?

20 A. Uh-uh.

21 Q. No. Okay.

22 A. I may drool a little bit, but I don't snore.

23 Q. Do you ever wake up gasping where you can't breathe?

24 A. No.

25 Q. Okay. You've taken -- you normally -- you told me you

1 normally don't take any medications. You don't take any
2 multivitamins. You use an occasional energy drink, a Monster.
3 After work, do you have a beer or anything like that?

4 A. No, I don't drink.

5 Q. Okay. All right. And do you smoke cigarettes or anything?

6 A. (No audible response.)

7 Q. Okay. All right. Well, I think I've got all of my questions
8 from a medical standpoint covered. So I'll turn it over to these
9 gentlemen here.

10 A. All right.

11 Q. Thank you.

12 MR. HOEPF: Okay. This is Mike from the NTSB.

13 BY MR. HOEPF:

14 Q. Long interview, I think. You still doing all right?

15 A. I haven't fell out yet, so, you know.

16 Q. All right. All right. Yeah, so we already talked about the
17 day of the accident in pretty good in detail. I just want to talk
18 a little bit more about just sort of the context that, you know,
19 you're typically working in. I want to talk about your
20 organization a little bit. So can you just talk a little bit
21 about just the hierarchy of your organization, you know, just who
22 do you report to, you know, what -- who do you typically interact
23 with, that sort of thing?

24 A. Well, I come to work. You know, our main concern is to make
25 sure you're at the front desk when it's time for your check-in

1 time.

2 Q. Um-hum.

3 A. So, I mean, you see other drivers there every now and then.
4 You may talk with them, but I try to stay away from there because
5 it's too cliquey, you know. They start talking about everybody
6 and what they did. I try to stay out of that conversation because
7 they be having my name up there soon.

8 Q. Um-hum.

9 A. So, no, I mean, I'm a social person but I keep to myself for
10 the most part.

11 Q. Okay. I'm sorry, go ahead. And your supervisor would be?

12 A. Well, that's who I -- a dispatcher. They're the guard for us
13 when we go to work. You keep your dispatcher unhappy and you keep
14 them mad, they give you a crazy run.

15 Q. Okay. Got you. Do you guys have a safety department?

16 A. Yes. And some of the trolley drivers on the safety
17 committee. So normally if we have any concern, we will go to them
18 so they can bring it up when they go to their meeting.

19 Q. Okay. Do you ever interact with those people?

20 A. Sometime. Well, we always think about safety stuff and, you
21 know, like I said, Philadelphia is not -- the cars and stuff like
22 this, and the things that we can do so that people can get off
23 safe. You know, they go up the side. They go up the left side.
24 They go up the right side. It's like they ain't supposed to be
25 passing us period but, you know, they do it on a daily basis. So

1 we've got to be cognizant of that, you know, when we open the
2 doors and --

3 Q. Yeah, yeah. Any other safety issues? I mean, can you just
4 give me an example of maybe the most recent thing that's come up,
5 just any old thing? Is it that type of stuff or is it -- I don't
6 know.

7 A. Well, no, for us, safety -- our safety comes in making sure
8 we don't try to hit something --

9 Q. Um-hum.

10 A. -- on the side, you know, cars. We have a very thin line.
11 We're on the regular street and cars have a tendency to go over
12 that line. So, you know, we're always inching down the road
13 trying to figure out if we're going to knock somebody's mirror
14 off.

15 Q. Yeah, yeah. Absolutely. Okay. A little bit ago you said --
16 you used the phrase, taking a hit for calling off.

17 A. Um-hum.

18 Q. Can you -- what does that mean?

19 A. Well, we get points for stuff. It goes in our record. You
20 know, if you have a miss, you know, if you miss your scheduled
21 thing, you take like big points. Nobody wants to do that.
22 They'll call out before they do that. Because the hit is less if
23 you call out than if you miss your run. And that's -- I don't
24 know if that's all part of the negotiations, you know, because I
25 try to keep my call-out schedule exemplary. So I very rarely call

1 out.

2 Q. Got you. Got you. So you -- so that's kind of a -- so you
3 try to stay out of -- you know, you try not to accumulate points
4 and that sort of a --

5 A. Well, I try to keep something clean. It's hard to keep
6 anything clean but I try to keep something -- whatever I can
7 salvage, I'm trying to keep clean, you know.

8 Q. Yeah, yeah.

9 A. That's the only way you can move.

10 Q. Yeah. So would you say -- I mean, would you say that's a
11 factor? I mean, what would, what would you -- I mean, you can
12 probably see what I'm trying to get at here, and I'm not trying to
13 lead you or anything, but I mean do you call off on a regular
14 basis? What would it take for you to call off?

15 A. Lose a leg.

16 Q. I mean, it wouldn't have to be that serious --

17 A. I mean, well, you know, I mean, you still have family
18 emergencies at home. So, you know, as long as you have -- you can
19 be covered. I wouldn't just call out and just miss the day, you
20 know.

21 Q. Um-hum.

22 A. And the sick thing is, you know, like -- I never felt to the
23 point where I was sick that I wouldn't come to work. Like if you
24 really felt, you know, like, I'm really like going to be
25 disgusting, I don't want to be there if I'm going to be nose all

1 running and you're snotting and, you know, you're trying to drive
2 and talk to people, be like, you know -- so, yeah, I would try to
3 avoid that or at least try to get a run, a change in my
4 assignment.

5 Q. Um-hum.

6 A. So, you know -- the dispatcher's pretty good at changing
7 things if you need to, if you give him the leeway.

8 Q. Did somebody talk to you about what that protocol would look
9 like, you know, I mean what situations you should -- I mean, do
10 you have some guidelines that you're supposed to be, you know,
11 operating under of don't come to work if X, Y or Z, you know?

12 A. I'm sure at some point in time we was told something. I
13 can't really recall what it was.

14 Q. Um-hum.

15 A. Like I said, I'm not normally sick and I'm not normally
16 feeling like I, you know, I don't want to be driving under them
17 circumstances. If I thought that I was under some kind of
18 influence, I would have, you know, tried to switch my run to give
19 me some time, to buy me some time to gather myself.

20 Q. Um-hum. Sounds good. That makes sense.

21 Okay. Great. Let me just -- and I'm almost done here. Real
22 quickly, let's talk about your training. How do you feel about
23 your training, your experience? Did you have some kind of program
24 you went through?

25 A. Well, they trained us for over a month. So, you know, we had

1 to go through (indiscernible). And the trainers was very
2 knowledgeable, but you still learn a lot of stuff on the outside
3 on your own because you don't have nobody looking over your back.
4 So you can absorb it once -- that little prejudice that comes
5 behind like, if you do that, you know you're going to get in
6 trouble.

7 Q. Yeah.

8 A. So you learn from your mistakes sometimes, you know, and you
9 go on to the next day.

10 Q. Um-hum. Okay. Great. And I just have one last question for
11 you. You know, you talked about being 6'8". You know, some of
12 these trolleys are kind of uncomfortable, you know, to sit in.

13 A. All of them is uncomfortable.

14 Q. All of them are uncomfortable, okay. Got you. So just
15 briefly, if there's anything that you could add to that, you know,
16 what special adjustments you have to make? Does that present any
17 unique challenges, operating challenges to you? I mean, you've
18 got to keep your foot on -- is your foot -- is your leg propped
19 up, you know, at a 45-degree angle or something? I mean, is there
20 anything that --

21 A. Well, no, I mean, I try to make my chair high enough so my
22 leg is level. So if, you know, it's up in the air, it's going to
23 get like numb.

24 Q. Um-hum.

25 A. So I try to have it leaning up against the chair and -- you

1 know, the LRVs are a lot easier. They're wider. The window's
2 bigger and you do have a little space, you know, to move around.

3 Q. Um-hum.

4 A. The PCCs are antique trolleys that they don't want to get rid
5 of, which the public likes. I don't know what public that is, but
6 nevertheless, the public likes them because they're still here.
7 They're a little bit more challenging for me because the window's
8 a little smaller, the chair's a little less and I always stay bent
9 over. I can't get comfortable.

10 Q. I've got you. Is that the kind of one that you were -- that
11 was on --

12 A. The one that's downstairs that looks all shiny and green.

13 Q. Oh, okay. Got you. What kind were you driving on --

14 A. That was a LVR.

15 Q. Okay.

16 A. LRV.

17 Q. Okay. And so I mean --

18 A. I switched my letter.

19 Q. Got you. And so, I mean, that day do you recall having to
20 make any special accommodations or anything? I mean, that's
21 pretty specific but --

22 A. I always lift my chair up.

23 Q. Okay.

24 A. That's the only way I can sit in it, you know. I like to
25 sit, keep your legs down because it keeps the blood circulating a

1 little bit, this left-hand leg.

2 Q. Yeah, my wife has a Honda Civic and I can't drive it for more
3 than an hour without my feet falling asleep, you know. So I just
4 was wondering if that's an issue for you. So -- but you're
5 usually able to keep your foot from going numb?

6 A. Yeah, yeah.

7 BY MR. HOEPF: Okay. All right. That's all I've got.
8 Steve.

9 DR. JENNER: Great. Steve Jenner.

10 BY DR. JENNER:

11 Q. A couple follow-ups. You have mentioned you normally work
12 Wednesdays. Does that mean it's typically a regularly scheduled
13 day for you to work or is that --

14 A. No, it's an extra day.

15 Q. Extra day. So you normally work it.

16 A. Yeah.

17 Q. What is your -- from Monday to Sunday, what is your normal
18 work -- assigned workdays?

19 A. Monday, Thursday, Friday and Saturday and Sunday.

20 Q. So Wednesday you try to get overtime?

21 A. Or Tuesdays. The other day is -- you know, sometimes you --
22 you have different people all trying to get them days off work.
23 So I try to get in where there's less people trying to get it so I
24 know I'm going to get a day.

25 Q. So Tuesday and Wednesday are your normally scheduled days

1 off?

2 A. Yes.

3 Q. Do you sometimes try to work Tuesday as well?

4 A. Well, if he had a -- if he had a Tuesday run, I would
5 probably -- I don't never do 7 days. I just try to do 6 days.

6 Q. And if you want to put in for Wednesday, a Wednesday, how far
7 in advance do you have to request that?

8 A. The following week Wednesday you want to you get your name in
9 the book. Normally you can do it like a week in advance, you
10 know, so --

11 Q. About a week in advance.

12 A. As soon as I work on Wednesday, I call him and tell him, put
13 my name in the book for next Wednesday so they can --

14 Q. And when do you find out if you're going to work that day?

15 A. Not until Tuesday.

16 Q. Tuesday afternoon sometime?

17 A. Yeah.

18 Q. Tuesday, you described your activities there. Did it ever
19 cross your mind that you'd want to have that day off, the
20 Wednesday? Anytime Tuesday did you think, well, I -- you found
21 out that you have to work Wednesday. Did it ever cross your mind
22 to take the day off?

23 A. No, I wanted to work Wednesday.

24 Q. You still -- you believed you felt good enough even though
25 you were, you know, fighting the cold. You still felt you felt

1 good enough to work Wednesday? Okay.

2 If you wanted to call off Wednesday -- let's say it's Tuesday
3 night, and you -- there's a family emergency, you needed to take
4 Wednesday off, what's the process and what's the consequence --

5 A. Well, I think they have a time limit that they do, the
6 dispatchers, before they put it on paper. And then there's always
7 other people who want to work, so they know they can just trade
8 you off.

9 Q. Okay. Are there consequences if you call too late and you
10 want to have the day off? You mentioned points.

11 A. Yeah. Well, yeah, if you -- I mean, if you go on the -- the
12 consequences as far as if you're not there. So, but you can still
13 call out and take the day off, like, I'm taking a sick day; you
14 can still do that.

15 Q. Would that cost you points?

16 A. Everything you do cost points.

17 Q. How are you with the point system --

18 A. Well, I don't call out. I guess that's the only thing I can
19 say on my record is clean.

20 Q. So you weren't near a threshold where you were going to get
21 into some type of trouble or problems?

22 A. Well, I'm always next to the threshold of getting in trouble,
23 but not for calling out.

24 Q. Okay.

25 A. Maybe knocking off a mirror.

1 Q. Thank you. You've been here 3 years in that position. What
2 type of work were you doing before you came to SEPTA or operating?

3 A. Case management and I drove a coach bus in the weekends,
4 charter stuff.

5 Q. For whom?

6 A. Krapf.

7 Q. I'm sorry. That last word?

8 A. Krapf.

9 Q. That was the company? Is that local Philadelphia?

10 A. Yeah, West Chester.

11 Q. And how long were you a driver for them?

12 A. Probably 4 or 5 years.

13 Q. What made you decide to switch jobs?

14 A. SEPTA pays much better. Plus, you know, it's a small
15 independent company. SEPTA is -- I don't know if SEPTA is federal
16 or what. I don't know. They do something with -- SEPTA's a major
17 company. This was a small mother and dad company, you know.

18 Q. You also drive buses?

19 A. Yes.

20 Q. Do you have a preference of the trolley versus buses?

21 A. It probably would be buses. Buses is a lot easier. Trolley
22 -- I didn't pick the trolley. It picked me.

23 Q. But your -- let's say your overall comfort level with
24 trolleys, if 1 is very comfortable and 10 is very uncomfortable,
25 where are you on that scale?

1 A. The trolley?

2 Q. Yeah.

3 A. About good level. Trolleys -- like I say, we have a lot of
4 traffic issues with the trolley, you know, so if you get stuck
5 behind people, you're never going to be on time. You're always,
6 you know -- the bus is easier. You can actually maneuver around
7 things, you know. So in terms of the heat and comfort level on a
8 bus versus the trolley, you know, the bus is like a car, a big
9 car. The trolley is like a big piece of tin, you know.

10 Q. When I'm talking about --

11 A. You slide in the rain and, you know, I mean, and it's just --
12 and it's unpredictable because you can't stop a trolley like you
13 can stop a bus. You know, a bus has air brakes. You can stop on
14 a dime. A trolley you can't really predict it because you're on a
15 rail. If it has any rain on it, then you're on ice.

16 DR. JENNER: I think that's all the questions I have. Thank
17 you.

18 MR. FRIGO: Mr. Anderson, thank you again, and before we
19 conclude, I just want to see if anybody else in the room has any
20 further questions.

21 UNIDENTIFIED SPEAKER: I've got you and Scott set up for the
22 basketball court after we get out of here.

23 MR. SAUER: Not me, man. He's bigger than me.

24 UNIDENTIFIED SPEAKER: I just want to see what happens here.

25 MR. ANDERSON: I only shoot jumpers now though.

1 MR. FRIGO: So I think we just have one more from Dr. Jenner.

2 DR. JENNER: Right.

3 BY DR. JENNER:

4 Q. If you don't have any questions, I just want to throw a very
5 open-ended question to you. You've probably in the last day or
6 two thought about this incident. Can you think of anything in
7 terms of rules or regulations or procedures or equipment or
8 anything that would make operating trolleys more safe?

9 A. Well, I think the rules need to be extended to the public,
10 not to us. It's the public that makes the job a lot harder
11 because there's no regulations passing the trolley or getting in
12 front of it, you know. Like we don't have a lot of advertisement
13 on when it's raining, don't walk in front of a trolley, you know.
14 People do that all the time. That's how they get us to stop.
15 They want to catch the trolley, they don't wave their hand, they
16 try to -- they always get on the track. Why are you on the track,
17 you know? So the public needs to be a little bit more informed
18 about the trolley business than we do. I mean, like I said, we're
19 playing defense all day long.

20 Q. Anything else?

21 A. Because on the outside, you know, you have the other
22 districts that have personal driveways. So they don't have to
23 deal with the traffic. But we're right in the traffic with
24 everybody else, so, you know, it makes it a little bit more
25 challenging.

1 Q. Great. Thank you.

2 MR. FRIGO: All right, Mr. Anderson. Thank you for speaking
3 with us today. At this time, we'll go off the record.

4 (Whereupon, the interview was concluded.)

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CERTIFICATE

This is to certify that the attached proceeding before the

NATIONAL TRANSPORTATION SAFETY BOARD

IN THE MATTER OF: SEPTA TROLLEY COLLISION
PHILADELPHIA, PENNSYLVANIA
JANUARY 4, 2017
Interview of Gary Anderson

ACCIDENT NUMBER: DCA17FR003

PLACE: Philadelphia, Pennsylvania

DATE: January 6, 2017

was held according to the record, and that this is the original,
complete, true and accurate transcript which has been transcribed
to the best of my skill and ability.

Kathryn A. Mirfin
Transcriber