

INSPECTION REPORT

Inspector's Name Johnson, Kenneth D.		Inspector's Signature KENNETH DEAN JOHNSON		Digitally signed by KENNETH DEAN JOHNSON Date: 2022.02.11 09:58:37 -07'00'		Inspector's ID No. 44680	Report No. 10	Date yy mm dd 2022 02 10					
Railroad/Company Name & Address BNSF RAILWAY COMPANY 3190 Fox St Bldg #3 Denver CO 80202				R/C R	Division SYSTEM	RR/Co. Representative (Receipt Acknowledged) Name Derick Hawley Title General Foreman II Email derick.hawley@bnsf.com Signature _____							
From: City DENVER	Codes 0600	Destination City & County				Codes	From Latitude						
State CO	08	City					From Longitude						
County DENVER	C031	County					To Latitude						
Mile Post: From To		Inspection Point GLOBEVILLE YARD TRACK 116				To Longitude							
Activity Code:	229D	229R	231	232A	232X								
Units:	1	1	2	2	1								
Sub Units:	0	0	0	0	4								
Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
1	BNSF	1961	EMS	229	0015	A11				N	Y	1	229R
Description Failure to tag RCL at the locomotive control stand to indicate locomotive is in RCL mode.													
Seal Applied		Seal Removed		Hazard Class				UN/NA ID					
Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Latitude:				Longitude:					
Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional				Railroad Action Code		Date(mm/dd/yyyy):		Comments on back?					
Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
2	BNSF	1961	EMS	229	0015	A9				N	Y	1	229R
Description Failure to secure and render inoperable cab control handles while being operated in Remote Control Mode, Control stand reverser handle lock out not installed on controlling RCL.													
Seal Applied		Seal Removed		Hazard Class				UN/NA ID					
Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Latitude:				Longitude:					
Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional				Railroad Action Code		Date(mm/dd/yyyy):		Comments on back?					

INSPECTION REPORT

(Continuation)

Inspector's ID No. 44680	Report No. 10	Report Date 2/10/2022
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
3	BNSF	1961	EMS	229	0023	A5				N	Y	0	

Description - [** Comment to Railroad/Company **]
No exceptions taken to records inspection of periodic inspection reports.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
4	BNSF	1961	EMS	229	0021	A7				N	Y	0	

Description - [** Comment to Railroad/Company **]
No exceptions taken to records inspection of Daily Inspection reports.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
5	BNSF	1601	EMS	229	0131	F1				N	Y	1	229D

Description
Sanders create a personal injury hazard, sand blowing at eye level from conductor side front sand hose.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
6	BNSF	1961	EMS	229	0055	B				N	Y	1	229R

Description
Piston travel excessive, R-2 measured 6 7/8 inches, Maximum allowed travel 6 1/2 inches. (note R-3 was at max allowed travel 6 1/2 inches)

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
7	BNSF	1601	EMS	229	0055	B				N	Y	1	229D

Description
Piston travel excessive, L-2 measured 6 5/8 inches, Maximum allowed travel 6 1/2 inches.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
8	BNSF	1961	EMS	229						N	Y	0	229R

Description - [** Comment to Railroad/Company **]
FRA MP&E inspector observed Qualified Mechanical persons completing a daily air test and daily inspection. No issues found for locomotive air brake leakage and operational checks.

Seal Applied	Seal Removed	Hazard Class	UN/NA ID
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Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Latitude:	Longitude:
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Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional	Railroad Action Code	Date(mm/dd/yyyy):	Comments on back?
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