

INSPECTION REPORT

Inspector's Name Martin, Jacob			Inspector's Signature				Inspector's ID No. [REDACTED]		Report No. 19		Date yy mm dd 2019 02 27		
Railroad/Company Name & Address UNION PACIFIC RR CO. 631 S 7TH STREET PHOENIX AZ 85613					R/C R	Division SUNSET		RR/Co. Representative (Receipt Acknowledged) Name STEPHEN GORA Title MGR TRACK MNTCE Email [REDACTED] Signature _____					
From: City PHOENIX		Codes 0370		Destination City & County				Codes		From Latitude			
State AZ		04		City QUEEN CREEK				0388		From Longitude			
County MARICOPA		C013		County MARICOPA				C013		To Latitude			
Mile Post: From To			Inspection Point PHOENIX YARD					To Longitude					
Activity Code:	MTH	MTW	YTW	TOM	TOY	DER	RWP	RMM					
Units:	31	2	1	20	7	11	1	1					
Sub Units:	0	0	0	0	0	0	1	0					
Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
1	0909.74	111	T	213	0133	A2	40	3		N	N	1	TOM
Description LOOSE, WORN, OR MISSING CLIP BOLTS (TRANSIT, SIDE JAW, ECCENTRIC, VERTICAL). # 1 ROD													
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	0914.33	W110	T	213	0133	A12	25	2		N	N	1	TOM
Description LOOSE, WORN, OR MISSING FROG BOLTS.													
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?			

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(Continuation)

Inspector's ID No. [REDACTED]	Report No. 19	Report Date 2/27/2019
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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	0915.24	101	T	213	0133	A2	25	2		N	N	2	TOM

Description
LOOSE, WORN, OR MISSING CLIP BOLTS (TRANSIT, SIDE JAW, ECCENTRIC, VERTICAL).
1 & # 2 ROD

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

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
4	0917.63	700	T	213	0133	A12	40	3		N	N	1	TOM

Description
LOOSE, WORN, OR MISSING FROG BOLTS.

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

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
5	0926.44	738	T	213	0133	A2	60	4		N	N	1	TOM

Description
LOOSE, WORN, OR MISSING CLIP BOLTS (TRANSIT, SIDE JAW, ECCENTRIC, VERTICAL).
1 ROD (2)

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

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(Continuation)

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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	0929.46	W739	T	213	0133	A9	60	4		N	N	1	TOM

Description LOOSE OR MISSING ADJUSTABLE RAIL BRACES.													
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
7	0929.46	W739	T	213	0133	A12	60	4		N	N	1	TOM

Description LOOSE, WORN, OR MISSING FROG BOLTS.													
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
8	0929.72	E739	T	213	0133	A9	60	4		N	N	1	TOM

Description LOOSE OR MISSING ADJUSTABLE RAIL BRACES.													
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
9										N	N	0	

Description - [** Comment to Railroad/Company **] ACCOMPANIED BY UP TRACK SUPERVISOR CHESTER SHEPPARD													
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?	