

INSPECTION REPORT

Inspector's Name Hirsch, Robert J.	Inspector's Signature ROBERT J HIRSCH <small>Digitally signed by ROBERT J HIRSCH DN: c=US, o=U.S. Government, ou=FRA FRACrumLynnePA, ou=DOT FRACrumLynnePA, cn=ROBERT J HIRSCH Date: 2017.08.05 10:48:21 -0400</small>	Inspector's ID No. [REDACTED]	Report No. 119	Date		
				yy 2017	mm 06	dd 27

Railroad/Company Name & Address CSX TRANSPORTATION Meyersdale PA	R/C R	Division SYSTEM	RR/Co. Representative (Receipt Acknowledged)		
	RR/Co. Code CSX	Subdivision KEYSTONE	Name John Porter	Title Roadmaster	Email Signature _____

From: City MEYERSDALE	Codes 5090	Destination City & County	Codes	From Latitude						
State PA	42	City PA/MD STATE LINE	9924	From Longitude						
County SOMERSET	C111	County BEDFORD	C009	To Latitude						
Mile Post: From BF0207.90	To BF0180.10	Inspection Point	To Longitude							
Activity Code:	TOM	RMM	RWP	CWRP	MTH	MTW				
Units:	10	1	1	1	25	2				
Sub Units:	0	0	1	0	0	0				

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
1	BF0199.40		T	213	0133	A13	30	3		N	N	1	TOM

Description
LOOSE, WORN, OR MISSING GUARD RAIL BOLTS.
EAST END FOLEY CROSSOVER-2 LOOSE GUARD RAIL BOLTS ON SOUTH RAIL.

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
2	BF0190.10		T	213	0133	A9	50	4		N	N	1	TOM

Description
LOOSE OR MISSING ADJUSTABLE RAIL BRACES.
EAST END OF WEST CROSSOVER AT HYNDMAN ON #2 TRACK-LOOSE ADJ. BRACE ON LEFT POINT.

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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Source Code A	File Number R2CO	ID's of Accompanying Inspector(s)
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INSPECTION REPORT

(Continuation)

Inspector's ID No. [REDACTED]	Report No. 119	Report Date 6/27/2017
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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	BF0190.10		T	213	0137	E	50	4		N	N	1	TOM

Description
SEVERE FROG CONDITION NOT OTHERWISE PROVIDED. (ADVISORY ONLY CANNOT BE USE SOLELY TO RECOMMEND VIOLATION)
WEST END OF WEST CROSSOVER AT HYNDMAN ON #1 TRACK-FROG POINT AND TREAD WORN AND CRACKED.

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	BF0190.20		T	213	0137	B	50	4		N	N	1	TOM

Description
FROG POINT CHIPPED, BROKEN, OR WORN IN EXCESS OF ALLOWABLE.
WEST END OF EAST CROSSOVER AT HYNDMAN ON #2 TRACK-12 INCHES BACK ON POINT OF FROG THERE IS A 3/4"x2" PIECE BROKEN OUT OF POINT. 10 MPH APPLIED BY RR EMPLOYEE.

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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Source Code A	File Number R2CO	ID's of Accompanying Inspector(s)
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