

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

# INSPECTION REPORT

OMB Approval No.: 2130-0509

Inspector's Name Jackson, Dave				Inspector's Signature				Inspector's ID No. M3003		Report No. 20		Date yy mm dd 2024 02 05		
Railroad/Company Name & Address BNSF RAILWAY COMPANY  Great Falls MT						R/C R	Division SYSTEM		RR/Co. Representative (Receipt Acknowledged) Name David Johnson Title Mechanical Foreman Email david.johnson122807@bnsf.com Signature _____					
						RR/Co. Code BNSF	Subdivision SYSTEM							
From: City STANFORD			Codes 1090		Destination City & County				Codes		From Latitude			
State MT			30		City						From Longitude			
County JUDITH BASIN			C045		County						To Latitude			
Mile Post: From To				Inspection Point NORTH MAIN LINE SIDING IN STANFORD MT						To Longitude				
Activity Code:	224	229D	231	232X										
Units:	3	3	3	1										
Sub Units:	0	0	0	1										
Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code	
1	BNSF	6329	EMF	229	0045	A4			STANFORD MT	N	N	1	229D	
Description Rear M.U. angle cock (actuating) will not lock in place.														
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	6329	EMF	229	0093	C1			STANFORD MT	N	N	2	229D	
Description Both Left & Right emergency fuel fuel shut off decals are faded out.														
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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**INSPECTION REPORT**  
(Continuation)

OMB Approval No.: 2130-0509

Inspector's ID No. M3003	Report No. 20	Report Date 2/5/2024
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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	7836	EMF	229	0067	A1			STANFORD MT	N	N	2	229D

Description  
R-1 & R-3 Vertical shocks leaking hydraulic oil.

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	<input type="text"/>	Date(mm/dd/yyyy):	<input type="text"/>	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	7836	EMF	229	0045	A4			STANFORD MT	N	N	1	229D

Description  
Front M.U. cable damaged / cut.

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	<input type="text"/>	Date(mm/dd/yyyy):	<input type="text"/>	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				232					STANFORD MT	N	N	0	232X

Description - [\*\* Comment to Railroad/Company \*\*]  
Inspected (1) locomotive consist for securement of unattended equipment, no exceptions taken.

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	<input type="text"/>	Date(mm/dd/yyyy):	<input type="text"/>	Comments on back?
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