

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

# INSPECTION REPORT

OMB Approval No.: 2130-0509

Inspector's Name <b>Jackson, Dave</b>				Inspector's Signature				Inspector's ID No. <b>M3003</b>		Report No. <b>30</b>		Date		
												yy <b>2025</b>	mm <b>02</b>	dd <b>26</b>
Railroad/Company Name & Address <b>BNSF RAILWAY COMPANY</b>  <b>Laurel MT 59044</b>						R/C <b>R</b>		Division <b>SYSTEM</b>		RR/Co. Representative (Receipt Acknowledged) Name <b>Harlan Penninger</b> Title <b>Car Shop / Road Truck Foreman</b> Email Signature _____				
						RR/Co. Code <b>BNSF</b>		Subdivision <b>SYSTEM</b>						
From: City <b>ACTON</b>				Codes <b>0004</b>		Destination City & County				Codes		From Latitude		
State <b>MT</b>				<b>30</b>		City						From Longitude		
County <b>YELLOWSTONE</b>				<b>C111</b>		County						To Latitude		
Mile Post: From To				Inspection Point <b>ACTON MAIN LINE SIDING</b>								To Longitude		
Activity Code:	<b>215</b>	<b>224</b>	<b>229D</b>	<b>231</b>	<b>232</b>	<b>232X</b>							<b>CARS</b>	
Units:	<b>110</b>	<b>114</b>	<b>4</b>	<b>114</b>	<b>110</b>	<b>1</b>							<b>110</b>	
Sub Units:	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>							<b>0</b>	

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
<b>1</b>	<b>FURX</b>	<b>962517</b>	<b>H</b>	<b>232</b>	<b>0103</b>	<b>F3</b>			<b>ACTON MT</b>	<b>N</b>	<b>N</b>	<b>1</b>	<b>232</b>
Description <b>L-3 Brake shoe worn to the backing plate.</b>													
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
<b>2</b>	<b>NOKL</b>	<b>964356</b>	<b>H</b>	<b>232</b>	<b>0103</b>	<b>F3</b>			<b>ACTON MT</b>	<b>N</b>	<b>N</b>	<b>1</b>	<b>232</b>
Description <b>L-1 Brake shoe worn to the backing plate.</b>													
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?			

**DEPARTMENT OF TRANSPORTATION**  
FEDERAL RAILROAD ADMINISTRATION (FRA)

**INSPECTION REPORT**  
(Continuation)

OMB Approval No.: 2130-0509

Inspector's ID No. M3003	Report No. 30	Report Date 2/26/2025
-----------------------------	------------------	--------------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
3	BNSF	668922	H	232	0103	F3			ACTON MT	N	N	1	232

Description  
L-1 Brake shoe worn to the backing plate.

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
4	BNSF	670737	H	232	0103	F3			ACTON MT	N	N	1	232

Description  
L-1 Brake shoe worn to the backing plate.

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
5	BNSF	672506	H	232	0103	F3			ACTON MT	N	N	1	232

Description  
L-1 Brake shoe worn to the backing plate.

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
6	BNSF	671288	H	232	0103	F3			ACTON MT	N	N	1	232

Description  
R-4 Brake shoe worn to the backing plate.

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?
--	--	----------------------	-------------------	-------------------

**DEPARTMENT OF TRANSPORTATION**  
FEDERAL RAILROAD ADMINISTRATION (FRA)

# INSPECTION REPORT

(Continuation)

OMB Approval No.: 2130-0509

Inspector's ID No. M3003	Report No. 30	Report Date 2/26/2025
-----------------------------	------------------	--------------------------

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
7	BN	535544	H	231	0136	C2			ACTON MT	N	N	1	231

**Description**

A-R End Handhold having less than 2 inch of clearance.

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	BNSF	668458	H	215	0301	A1			ACTON MT	N	N	1	215

**Description**

Left side car I.D. decal partly peeling off.

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	BNSF	670404	H						ACTON MT	N	N	0	

**Description - [\*\* Comment to Railroad/Company \*\*]**

A-R Spring nest has (1) coil spring partly shifted outside of the nest, not in full support of load.

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
10	BN	535544	H						ACTON MT	N	N	0	

**Description - [\*\* Comment to Railroad/Company \*\*]**

A-R Spring nest has (1) broken coil spring.

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)

OMB Approval No.: 2130-0509

Inspector's ID No.	Report No.	Report Date
M3003	30	2/26/2025

Item	Initials/Milepost	Equipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subrule	Speed	Class	Train #/Site	SNFR*	RCL**	# of Occ.***	Activity Code
11				232					ACTON MT	N	N	0	232X

Description - [\*\* Comment to Railroad/Company \*\*]

Inspected load coal fleet for securement of unattended equipment, no exceptions taken.

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?
---	-----------------------------------	--	----------------------	----------------------	-------------------	----------------------	-------------------