

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. 58		Date yy mm dd 2020 04 21		
Railroad/Company Name & Address MONTANA RAIL LINK 2800 Shannon Road Laurel MT 59044						R/C R		Division SYSTEM		RR/Co. Representative (Receipt Acknowledged) Name Harlan Penninger Title Mechanical Supervisor Email hpenninger@mtrail.com Signature _____				
						RR/Co. Code MRL		Subdivision SYSTEM						
From: City BOZEMAN				Codes 0130		Destination City & County				Codes		From Latitude		
State MT				30		City						From Longitude		
County GALLATIN				C031		County						To Latitude		
Mile Post: From To				Inspection Point BOZEMAN RAIL YARD								To Longitude		
Activity Code:	224	229D	231	232X										
Units:	4	4	4	2										
Sub Units:	0	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	MRL	404	EMF	231	0128	C2			BOZEMAN	N	N	1	231	
Description FRONT PLATFORM OR SWITCHING STEP OBSTRUCTED.														
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	MRL	404	EMF	229	0093	C1			BOZEMAN	N	N	2	229D	
Description BOTH LEFT & RIGHT EMERGENCY FUEL SHUT OFF, DECAL IS DE LAMINATING NOT FULLY READABLE.														
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)

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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			EMF	232					BOZEMAN	N	N	0	

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

INSPECTED TWO 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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