

PART B: RIGHT OF WAY INFORMATION

8. A).

	Description	Track Class	Miles
9.	Do you operate over any other railroad's tracks? If yes, list the railroads and attach copies of the agreements.		
10.	Do other railroad operate over your tracks? If yes, list the railroads and attach copies of interchange and/or Trackage Rights Agreements.		

11. Grade Crossings
- A). Number unprotected
 Number protected by crossbucks
 Number protected by gates or lights
 Total number of crossings:

 Flashing lights, bells
 Flashing lights, bells & gates
- B). List major crossings with a high concentration of traffic and protection at each crossing.
- C). Are there any authorized or non authorized pedestrian crossings? If so, how many of each?

Attach for each bridge, trestle, or tunnel, construction, height, length, span, age, when were they last inspected and by whom? Attach copies of latest inspections. Indicate which cross over or under bodies of water, over railroad tracks or freeways.

12. Maintenance of way expenditures. (List normal maintenance of way expenditures, grants, subsidies, capital expenditures & loans for the last two years, including a projection for the upcoming year.

	Normal	Grants/ Subsidies/ Capital*	Grants
Projections for upcoming year			
Estimate for the year ending			
Actual for the year prior			
Actual for the prior year			

*Capital is the "Lease Credits" for material under the XXX lease

14. Describe any rehabilitation work currently being done or planned for the upcoming year:
15. A). What is the rail weight?
 B). What is the type of rail and the percentage of each?
16. Attach the latest copies of FRA and/or State track inspections. See Attached

17. Are there any slow orders and/or FRA waivers in effect?
18. If yes, provide a brief explanation. Yes, current slow orders, see attached
19. In the last three (3) years, have you been fined by the FRA or EPA for any track, operating practices equipment or hazardous material violations? If yes, provide details including a copy of the citation, description of medial action taken and current status.
20. Derailments.
- A). For the last three (3) years, provide the number of derailments, including the FRA reportable derailments versus non-reportable.

Year	Number of Derails	FRA Reportable	FRA Non-Reportable
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- B). Has your company ever had a hazardous material derailment, leak or spill? Yes. If yes, please provide details.
- C). Has you company ever had to evacuate a given location because of a derailment leak, or any other reason attributable to hazardous material cars?

20. Who is responsible for maintenance of way and maintenance of equipment?

	<u>Employees (%)</u>	<u>Outside Contractors (%)</u>
Maintenance of Equipment		
Maintenance of Way		

PART C: OPERATIONS INFORMATION

- 21.
- | | |
|--------------------------------|--------------------------------|
| Trains per week – Thru Freight | |
| Trains per week – Local | Car loads per year |
| Average cars per train | Intermodal units per year |
| Maximum cars per train | Maximum speed |
| Average speed | Number of cars leased |
| Number of cars owned | Number of locomotives leased - |
| Number of locomotives owned | |
22. Are there any night operations? If yes, provide a brief description.
23. Do you maintain any storage and/or transloading facilities? If yes, provide a brief description.
24. Do you have any passenger operations? If yes, please complete passenger operations application.
25. Do you perform impact switching or push to rest?

26. List gross, freight and passenger revenues for the last two years, including a projection for the upcoming year.

	Year	Gross Revenues	Freight Revenue	Passenger Revenue
Projection for upcoming year				
Estimate for the year ending				
Actual for prior year				
Actual for prior year				

27. Attach a copy of your latest annual or audited financial reports and/or annual report or S.E.C. form 10K.

PART D: ROLLING STOCK & CARGO INFORMATION

28. List commodities hauled and the annual number of carloads for each. (Attach a separate sheet, if necessary).
29. List hazardous materials hauled and the annual number of carloads for each.
30. A) . Do you have designated rules and rule testing pertaining to the handling of hazardous materials in your rule book? If yes, how are these rules enforced?
- B). Who conducts the railroads' inspection of hazardous material cars received at interchange
31. Provide the average number of foreign cars per train __and per month __
32. Provide the average lading value to maximum value per train.

PART E: PERSONNEL INFORMATION

33. What is the prior railroad experience of officers and key operating personnel? (Resumes attached).
34. List gross payrolls and number of employees for the last two years, including a projection for the upcoming year.
- | | Gross Payroll | Number of Employees | Number of Volunteers |
|------------------------------|---------------|---------------------|----------------------|
| Projection for upcoming year | | | |
| Estimate for the year ending | | | |
| Actual for prior year | | | |
| Actual for prior year | | | |
35. Does your company participate in any of the following employee benefit programs? Other (if other, please describe.)
36. A). Does your company have in place a written rule certification program? What are the requirements for the program?
- B). Are all your engineers licensed and certified? What are requirements for the program?
- C). Does your company have a written efficiency testing program in place to ensure rule compliance?
- D). Is your program on file with the FRA?
37. A). Does your company hold safety and job training classes?
- B). How many classes per year?

- C). Are the classes mandatory for all employees?
38. A). Does your company have a pre-placement physical requirement?
B). Is there a pre-placement drug and alcohol testing program?
C). Is there a pre-placement audiogram testing program?
D). Does your company have a random drug and alcohol testing program, after employment has commenced?
Provide details and any attachments regarding your program.

PART F: CLAIMS & ENGINEERING INFORMATION

39. Loss Summary.
- A). Provide loss information for the last five (5) years. (Attach a separate sheet if necessary):
- B). Provide a listing and a brief description of any claim paid or reserved in excess of \$10,000 for the past five (5) years.
- C). Does your company have written claim handling procedures?
- D). Who is the contact person for claims handling? Please provide name, company, phone number and address.
40. Provide the contact person for safety and engineering inspection. Please provide name, title, phone number and address.

PART G: MISCELLANEOUS INFORMATION

41. Other remarks. (Please advise us of any information regarding the railroad that we should know about. For example, any safety awards. Operation Lifesaver involvement, Employee Incentive Programs or any unique safety programs or enhancements):