


FILE

**Public Utilities  
Commission of Ohio**

# Memo

**To:** Docketing Division

**From:** George Martin, Grade Crossing Planner, Rail Division 

**Re:** In the matter of the authorization of the Norfolk Southern Railway, Wheeling & Lake Erie Railway, CSX Transportation, and Indiana & Ohio Railway to install active grade crossing warning devices in six counties

**Date:** June 22, 2010

The Ohio Rail Development Commission (ORDC) has secured funding for the installation of mast mounted flashing lights and roadway gates at the following grade crossing locations:

Wheeling & Lake Erie Railway (WE)

Wayne County, near Smithville, Pleasant Home Rd/CR 48, DOT# 473-528U

Norfolk Southern Railway (NS)

Ross County, City of Chillicothe, E. Second St., DOT# 481384M

CSX Transportation (CSX)

Logan County, near Horton, CR 20, 513-789G

Indiana & Ohio Railway (IORY)

Fayette County, City of Washington Court House, Oakland Ave., DOT# 151-917K

Augalaize County, near Uniopolis, Buckland-Holden Rd/CR 190, DOT# 258-626V

Champaign County, near Urbana, Dallas Rd/CR 184, DOT# 527-960J

These crossings were surveyed by staff due their high hazard and were found to warrant upgrades to flashing lights and roadway gates.

These projects will be actual cost and are federally funded. Staff requests an Entry with plans and estimates to be submitted to the Commission within 90 days and completion within one year. Upon approval of the plans and estimates by ORDC construction may commence. A suggested case coding would be:

PUCO Case No. 10- ~~0876~~ -RR-FED

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2010 JUN 22 PM 3:39  
PUCO

C: Legal Department

Please serve the following parties of record

Ms Susan Kirkland

Ohio Rail Development Commission

1980 West Broad St

Columbus, Oh 43223

Mr Rick Ray

Norfolk Southern Railway

1200 Peachtree St NE, Box 123

Atlanta, Ga 30309

Mr Biff Konrad

2856 Cypress Way

Cincinnati, Oh 45212

Mr Benjamin Biesterveld

CSX Transportation

500 Water St, J-301

Jacksonville, Fl 32202

Mr Dan Reinsel

Wheeling & Lake Erie Railway

100 E First St

Brewster, Oh 44613

Mr Jeff Sparr, Deputy Engineer  
Wayne County Engineer's Office  
3151 W. Old Lincoln Way  
Wooster, Oh 44691

Mr. Thomas Day  
City of Chillicothe  
35 S Paint St  
Chillicothe, Oh 45601

Mr Scott Coleman  
Logan County Engineer's Office  
1991 CR 13  
PO Box 427  
Bellefontaine, Oh 43311-0427

Mr Jim Heath  
Deputy Service Director  
220 Park Ave  
Washington CH, Oh 43160

Mr Douglas Reinhart  
Auglaize County Engineer  
1014 S Blackhoof St  
PO Box 59  
Wapakoneta, Oh 45895-0059

Mr Fereidoun Shokouhi  
Champaign County Engineer  
428 Beech St  
Urbana, Oh 43078-0452

## OHIO RAIL DEVELOPMENT COMMISSION INTEROFFICE COMMUNICATION

TO: George Martin, Railroad Division, PUCO  
FROM: Joseph N. Reinhardt, Grade Crossing Specialist  
SUBJECT: Grade Crossing Warning Project  
DATE: June 16, 2010

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You may authorize the following warning project to proceed with the non-field work involved with the below mentioned non-lump sum project. This construction authorization is made with the stipulation and understanding that any field work needs prior approval before the work begins. This authorization is made with the stipulation and understanding that an approved estimate may contain entries for items or activities that may be cited and found to be ineligible for federal participation during the project audit.

### Project List

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#### Wheeling & Lake Erie Railway:

Wayne County, Pleasant Home Road, DOT 473528U

Thank you for your assistance with these matters.

JR:jnr

c: S. Kirkland - Files (J. Reinhardt)

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JUN 22 10 08 15  
RAIL DIVISION

OHIO RAIL DEVELOPMENT COMMISSION  
INTER-OFFICE COMMUNICATION

TO: George Martin, Planner, Railroad Division, PUCO  
FROM: Susan Kirkland, Supervisor, Rail-Highway Safety Section  
BY: Tim Perkins, Grade Crossing Specialist *Tim Perkins*  
SUBJECT: Grade Crossing Warning Project  
DATE: June 16, 2010

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You may authorize the Norfolk Southern to proceed with the non-field work for this project. This construction authorization is made with the stipulation and understanding that any field work needs prior approval before work begins. This authorization is made with the stipulation and understanding that an approved estimate may contain entries for items or activities that may be cited and found to be ineligible for federal participation during the project audit. The construction portion and preliminary engineering will be financed with federal funds.

Please initiate a one (1) year order with the plan and estimate due in ninety (90) days for the following.

ROS - Second Street - NS AAR No. 481 384 M (Actual cost)

Thank you for your assistance with this matter.

TP:tp

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JUN 22 11 00 15  
RAIL DIVISION

OHIO RAIL DEVELOPMENT COMMISSION  
INTER-OFFICE COMMUNICATION

TO: George Martin, Planner, Railroad Division, PUCO  
FROM: Susan Kirkland, Supervisor, Rail-Highway Safety Section  
BY: Tim Perkins, Grade Crossing Specialist *Tim Perkins*  
SUBJECT: Grade Crossing Warning Project  
DATE: June 16, 2010

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You may authorize the CSX Transportation to proceed with the non-field work for this project. This construction authorization is made with the stipulation and understanding that any field work needs prior approval before work begins. This authorization is made with the stipulation and understanding that an approved estimate may contain entries for items or activities that may be cited and found to be ineligible for federal participation during the project audit. The construction portion and preliminary engineering will be financed with federal funds.

Please initiate a one (1) year order with the plan and estimate due in ninety (90) days for the following.

LOG - C.R. 20 - CSX AAR No. 513 789 G (Actual cost)

Thank you for your assistance with this matter.

TP:tp

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COMMISSION  
JUN 22 11 8:15  
RAIL DIVISION

## OHIO RAIL DEVELOPMENT COMMISSION INTEROFFICE COMMUNICATION

TO: George Martin, Railroad Division, PUCO  
FROM: Joseph N. Reinhardt, Grade Crossing Specialist  
SUBJECT: Grade Crossing Warning Project  
DATE: June 16, 2010

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You may authorize the following warning project to proceed with the non-field work involved with the below mentioned non-lump sum project. This construction authorization is made with the stipulation and understanding that any field work needs prior approval before the work begins. This authorization is made with the stipulation and understanding that an approved estimate may contain entries for items or activities that may be cited and found to be ineligible for federal participation during the project audit.

### Project List

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#### Indiana & Ohio Railway:

Fayette County, Oakland Avenue, DOT 151917K

Thank you for your assistance with these matters.

JR:jnr

c: S. Kirkland - Files (J. Reinhardt)

RECEIVED  
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2010 JUN 22 01:05:15  
RAIL DIVISION



OHIO RAIL DEVELOPMENT COMMISSION  
INTER-OFFICE COMMUNICATION

TO: George Martin, Planner, Railroad Division, PUCO  
FROM: Susan Kirkland, Supervisor, Rail-Highway Safety Section  
BY: Tim Perkins, Grade Crossing Specialist *Tim Perkins*  
SUBJECT: Grade Crossing Warning Projects  
DATE: June 16, 2010

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You may authorize the Indiana and Ohio to proceed with the non-field work for these projects. This construction authorization is made with the stipulation and understanding that any field work needs prior approval before work begins. This authorization is made with the stipulation and understanding that an approved estimate may contain entries for items or activities that may be cited and found to be ineligible for federal participation during the project audit. The construction portion and preliminary engineering will be financed with federal funds.

Please initiate a one (1) year order with the plan and estimate due in ninety (90) days for the following.

AUG-C.R. 190, Buckland-Holden-I&O AAR No. 258 626 V (Actual cost)

CHP-C.R.184, Dallas Rd.-I&O AAR No. 527 960 J (Actual cost)

Thank you for your assistance with this matter.

TP:tp

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PUBLIC UTILITIES  
COMMISSION  
JUN 22 01 0:15  
RAIL DIVISION



## Diagnostic Review Team Survey

Date: 4/27/10

<b>Location Data</b>			
Street or Road Name: PLEASANT HOME			
Route/Road Number (i.e. Twp., Co., SR or US) CR 48 (include SLM if State or US route)		AAR-DOT No.: 473528 U	
County: WAYNE	Township:	City: (In or Near) SMITHVILLE	
Railroad Name: WE	Railroad Division:	Branch/Line Name: BELLEVUE	
Nearest RR Timetable Station: DOUGLAS		RR Milepost: 113.65	

<b>On-Site Review Team</b>			
(Include: Name - Organization - Phone Number)			
1.	GEORGE MARTIN	PUCO	614-752-9107
2.	Joe Reinhardt	ORDC	614-644-0291
3.	JEFF Sparr	WCEO	330 287-5500
4.	DAN REINSEL	WLE	330-767-7202
5.			
6.			
7.			
8.			
9.			
10.			

<b>Existing Traffic Control Devices</b>			
Type of Warning Devices	Installed?		Quantity/Comments
Advance Warning Signs	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2
'Stop' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
'Stop Ahead' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Pavement Markings	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2
Crossbucks	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2 BUCKEYE
Number of Tracks Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Inventory Tags	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2
Interconnected Highway Traffic Signal	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Mast-Mounted Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Cantilever Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number: Length:
Side Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Automatic Gates	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number: Length:
Bells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Sidewalk Gate Arms	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
'No Turn' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Illumination	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Is crossing flagged by train crew?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**Safety Data (Obtain crash reports, if possible, prior to review)**

	Initial Information (from database)	Revised
Number & dates of crashes in previous 5 years	1 5/24/09	
Hazard Ranking 63	Date Run: 4/15/10	59 5/6/10

**Railroad Data**

Railroad Characteristics	Initial Information (from database)	Revised
Total trains per day	8	
< 1 per day		
Day thru trains	4	
Night thru trains	4	
Daytime switching movements		
Nighttime switching movements		
Total number of tracks	1	
Number of main tracks	1	
Number of other tracks		
Maximum train speed	40	
Typical train speed		
Amtrak		

If non-gated crossing, is clearing sight distance adequate in all quadrants? (See Table 1) ☒ Yes ☐ NoIf multiple tracks, can two trains occupy crossing at the same time? ☐ Yes ☒ NoCan one train block the motorists' view of another train at crossing? ☐ Yes (Explain below) ☒ NoAre there other track(s) crossing this same roadway within 100 ft of this crossing? ☐ Yes ☒ No

If yes, Crossing DOT # (if different) \_\_\_\_\_

If yes, distance \_\_\_\_\_ (take measurement between track centerlines at closest point along roadway)

**Roadway Data**Local Highway Authority:  
(Who maintains this roadway?)

WAYNE COUNTY

Roadway Characteristics	Initial Information (from database)	Revised
Average daily traffic	833 (2005)	986 - 2008
Highway paved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Roadway Surface: ☒ Blacktop ☐ Gravel ☐ Concrete ☐ Other \_\_\_\_\_

Roadway width: 18 ft.

Number of highway lanes

2

2

Urban or Rural?

RURAL

RURAL

Vehicle Speed: 55 MPH

School Bus Operation: ☐ No ☒ Yes 10 AmountHazardous Materials Trucks: ☐ No ☒ Yes \_\_\_\_\_ AmountShoulders: ☒ No ☐ YesIs the shoulder surfaced? ☒ No ☐ YesIs there existing guardrail along roadway in crossing vicinity? ☐ No ☒ Yes BOTH SIDESIs stopping site distance adequate? (See Table 2) ☒ Yes ☐ No If no, deficient approach(es) \_\_\_\_\_

Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input type="checkbox"/> Non-functional (Curb height = Less than 4") <input checked="" type="checkbox"/> None	Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input type="checkbox"/> Non-functional (Curb height = Less than 4") <input checked="" type="checkbox"/> None
Pedestrians: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Is sidewalk present? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Is there a nearby intersection that could cause queuing over the crossing? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, Distance _____	
Is this intersection signalized? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Are the signals currently interconnected with the existing crossing warning devices? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Is it the consensus of the Diagnostic Review Team that this is a potential closure project? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Explain reasons:	

### Type of Development

<input checked="" type="checkbox"/> Open Space <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Residential	<input type="checkbox"/> Institutional <input type="checkbox"/> Commercial <u>FARM</u>	Location of nearby schools: <u>WITHIN 2 MILES</u>
--	--	--

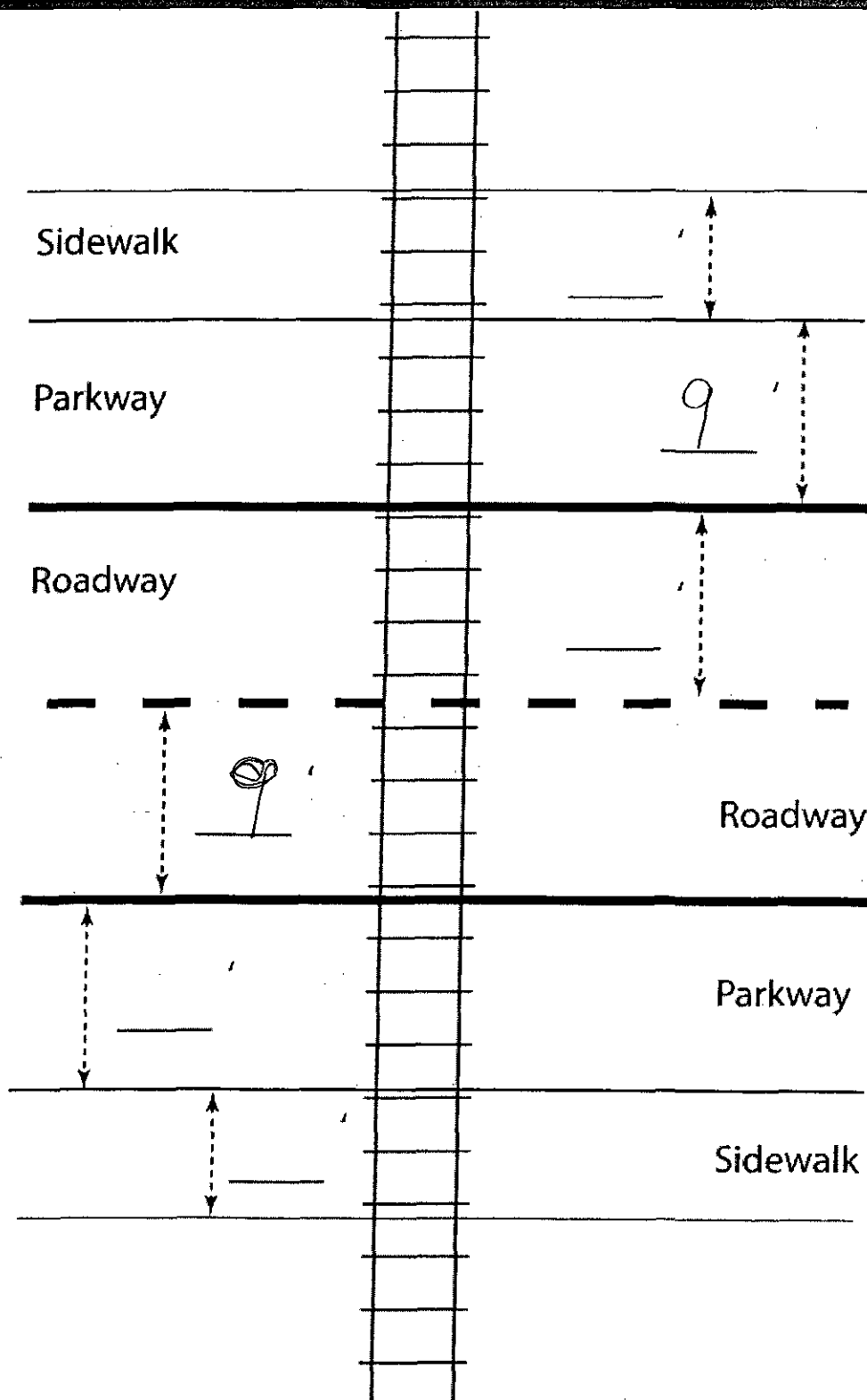
### Utility Information

Is commercial power available? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Utility Provider (Company Name) <u>OHIO EDISON</u>	Phone Number _____
Nearest Available Power Source <u>WITHIN 1/4 MILE</u>	
What other utilities are present? _____	
Is there potential utility conflict(s) <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown	

### Diagnostic Team Recommendations

	Quadrants Needed
<input checked="" type="checkbox"/> Install/upgrade active devices	
<input type="checkbox"/> Automatic Flashing Lights (AFLS)	
<input type="checkbox"/> AFLS / Cants	
<input checked="" type="checkbox"/> AFLS / Gates	
<input type="checkbox"/> AFLS / Gates / Cants	
<input type="checkbox"/> Upgrade circuitry	
<input type="checkbox"/> Sidelights	
<input type="checkbox"/> Guardrail Needed	
<input type="checkbox"/> Install/Replace curb	
<input type="checkbox"/> Other (define)	
Comments:	
<input type="checkbox"/> Install/upgrade traffic signal preemption	
<input type="checkbox"/> No improvements needed	
<input checked="" type="checkbox"/> Other (define)	<u>MAY BE AN ISSUE WITH PIPE UNDER ROAD AND RUNNING POWER LINE TO XING.</u>

# Field Dimensions

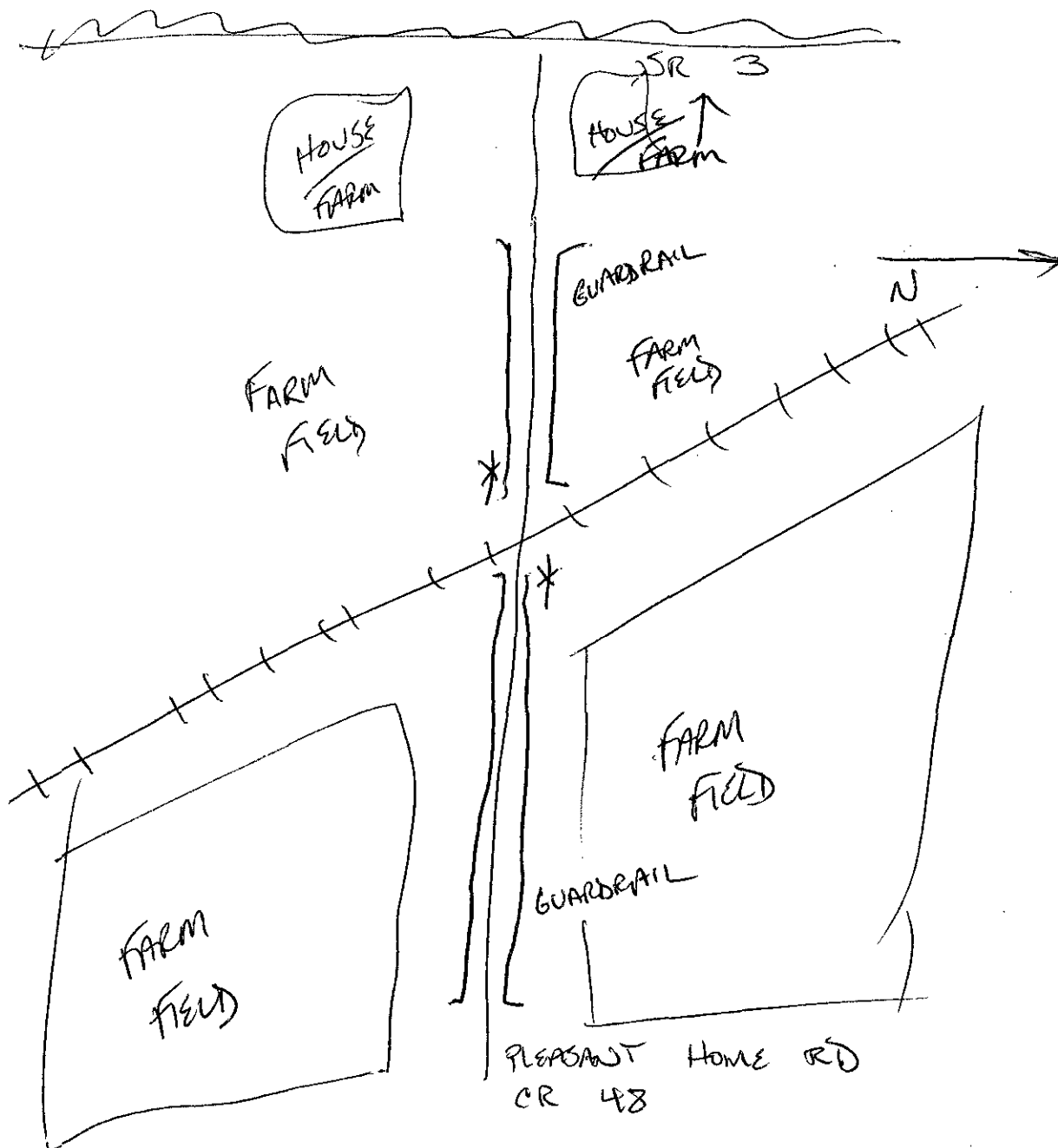


Show North  
Direction

Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in SE Quadrant?

Measurements by GM

# Field Sketch



Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in SE Quadrant?

Sketch by: Gm

TABLE 1

## Clearing Sight Distances

Maximum Authorized Train Speed	Distance (dT) Along Railroad from Crossing (ft)
1 - 10	240
15	360
20	480
25	600
30	720
35	840
40	960
45	1080
50	1200
55	1320
60	1440
65	1560
70	1680
75	1800
80	1920
85	2040
90	2160

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers and level single track 90 degree crossings; and may need to be adjusted for multiple tracks, skewed crossings or approaches on grades.

Clearing Sight Distance is to be measured in each vehicle travel direction at non-gated crossings as viewed from a point 25 feet from centerline of nearest track in the center of whichever travel lane is nearest the direction along track being measured.

Table 2

## Stopping Sight Distances

Highway Vehicle Speed	Distance (dH) Along Roadway from Crossing (ft)
0	n/a
5	50
10	70
15	105
20	135
25	180
30	225
35	280
40	340
45	410
50	490
55	570
60	660
65	760
70	865

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers on dry level pavements.

Stopping Sight Distance is to be measured on each roadway approach to crossing from stop bar.

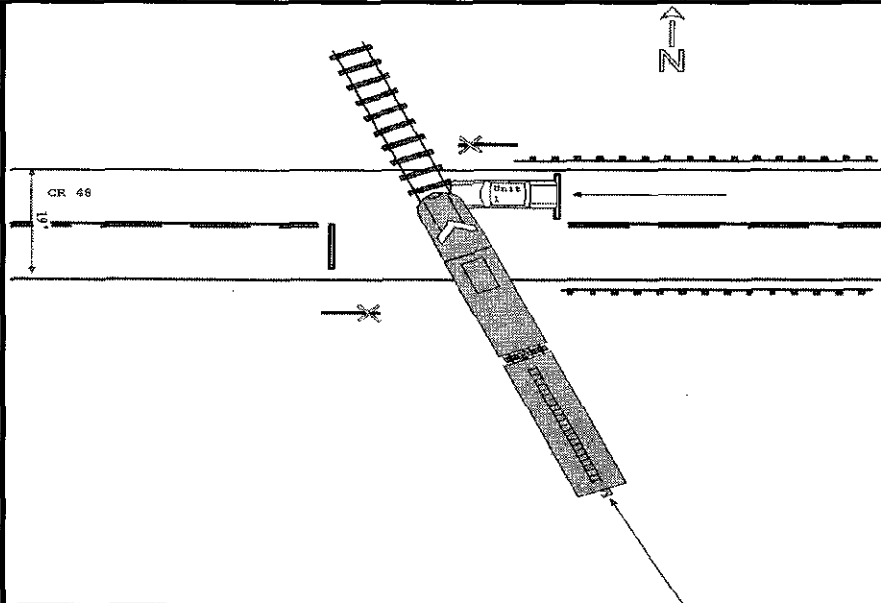


# Traffic Crash Report

473528U  
WE-WAYNE - PLEASANT HOME/CR 48

Local Report # 85-0675-85	Crash Severity PDO	Private Property N	Hit/Skip Not Hit/Skip	Photos Taken Y	NCIC # OHP85
Reporting Agency OHIO STATE HIGHWAY P.	# Units 2	Unit Error 1	Date and Time of Crash 5/24/2009 2:45:00 PM		
Day of Week SUN	City Village Township Township	Name (of City, Village or Township) Milton	County # 85	Latitude 40 54 58.81	Longitude 81 52 17.89
Crash Occurred On Prefix Crash Location 0048			Local Information Type Loc Numbered Route		
At / Reference Dist Reference 50			DR W		
Prefix CR0044			Reference Ref Point Intersection 2 Streets		
Type of Intersection Railway Grade Crossing	Occurrence On Roadway	Road Contour Straight Grade	Road Conditions Primary Dry	** Secondary Road Conditions ONLY Secondary Unknown	

Police Action					
Date and Time Crash Reported 5/24/2009 2:51:00 PM	Dispatch 5/24/2009 2:51:00 PM	Arrived 5/24/2009 3:13:00 PM	Cleared 5/24/2009 4:54:00 PM	Other 120	Total Minutes 243
Officer's Name* MOSSOR, MATTHEW	Badge #* 0944	Checked By JDHROMIAK	Date Report Filed* 5/31/2009 12:00:00 AM		
Report Taken By Police Agency	Report Taken At Scene				

Manner of Collision or Impact Angle	Diagram 
School Bus Related No	
Work Zone Related No	
Weather Clear	
Type of Work Zone Workers Present	
Location of Crash in Work Zone	
Light Conditions Primary Daylight	
Secondary Unknown	

Narrative UNIT #1 WAS WESTBOUND ON CR48. UNIT #2 WAS NORTHBOUND ON THE RAILROAD TRACKS. UNIT #1 FAILED TO YIELD TO UNIT #2 AND WAS STRUCK.
---



# Traffic Crash Report

## Unit Information

Unit # 1	Owner First BARBARA	Owner Middle J	Owner Last ROMANS	LP State OH	LP # ADJ8092
Owner Address 8898 CYNTHIA CT		Owner City CINCINNATI	Owner State OH	Owner Zip 45242	Owner Phone # 5137930678
Year 2004	Make FORD	Model TAU	Color	VIN	
Insurance Company WESTFIELD	In Emergency Response Unknown	Speed Detected Stated	Speed 30	Posted Speed 55	
Non-Motorist Location UnKnown	Action Struck	Towing Service NORTH END GARAGE	Damage Scale Disabling Damage	Direction East	
Type of Unit Full Size	Point of Impact Left Front	Most Damaged Area Center Front	Vehicle Defect		
Pre-Crash Actions Movements Essentially Straight Ahead	Striking Vehicle O/U Unknown	Contributing Circumstances Failure to Yield	First Harmful Event 1	Most Harmful Event 1	
Traffic Control Railroad Crossbucks	Sequence of Events 1 Railway Vehicle	Sequence of Events 2 Unknown	Sequence of Events 3 Unknown	Sequence of Events 4 Unknown	
Company (From Shipping Papers)	Company Phone	US DOT	ICC MC	PUCO	
Address	City	State	Zip		
Trailer LP St.	Trailer LP Year	Trailer LP #	Placard #	# DIA.	
Cargo Body Type Not Applicable	CDL Class	Weight (GVWR)	Haz Material Placard Unknown	Haz Material Release Not Applicable	

## People Information

Unit # 1	First Deborah	Middle A	Last Romans	Type Driver
Address 8898 CYNTHIA CT		City CINCINNATI	State OH	Zip 45242
Date of Birth 08/29/1959	Age 49	Sex F	Home Phone # 5137930678	Work Phone #
DL State OH	DL # RS481058	Offense Charged 4511.62	Injured Taken By None	Transported By
Seating Position Front Left (MC Driver)	Ejection Not Ejected	Offense Description DRIVER'S DUTIES RELA	Air Bag Not Deployed	Citation # Y718640
Condition Apparently Normal	Trapped Not Trapped	Safety Equipment Shoulder Lap/Belt	Injuries No Injury	Air Bag Switch Not Present
Alcohol Test Status None	Alcohol/Drug Suspected None	Alcohol Test Type None	Alcohol Test Result	
Drug Test Status None	Drug Test Type None	Drug Test Result 1 None	Drug Test Result 2 None	

## People Information

Unit # 1	First Bonnie	Middle G	Last Funk	Type Occupant
Address 3235 FARLOOK LN		City MIAMIVILLE	State OH	Zip 45147
Date of Birth	Age	Sex	Home Phone #	Work Phone #



## Traffic Crash Report

01/31/1931	78	F	5139310193	
DL State	DL #	Offense Charged	Injured Taken By	Transported By
			None	
Seating Position	Ejection	Offense Description	Air Bag	Citation #
Front Right	Not Ejected		Not Deployed	
Condition	Trapped	Safety Equipment	Injuries	Air Bag Switch
Unknown	Not Trapped	Shoulder Lap/Belt	No Injury	Not Present
Alcohol Test Status	Alcohol/Drug Suspected	Alcohol Test Type	Alcohol Test Result	
Unknown	Unknown	None		
Drug Test Status	Drug Test Type	Drug Test Result 1	Drug Test Result 2	
Unknown	None	Unknown at Time of Reporting	Unknown at Time of Reporting	

## People Information

Unit #	First	Middle	Last	Type
1	Barbara	J	Romans	Occupant
Address	City	State	Zip	
8898 CYNTHIA CT	CINCINNATI	OH	45242	
Date of Birth	Age	Sex	Home Phone #	Work Phone #
07/10/1928	80	F	5138910775	
DL State	DL #	Offense Charged	Injured Taken By	Transported By
			None	
Seating Position	Ejection	Offense Description	Air Bag	Citation #
Second Left (MC Driver)	Not Ejected		Not Applicable	
Condition	Trapped	Safety Equipment	Injuries	Air Bag Switch
Unknown	Not Trapped	Shoulder Lap/Belt	No Injury	Not Present
Alcohol Test Status	Alcohol/Drug Suspected	Alcohol Test Type	Alcohol Test Result	
Unknown	Unknown	None		
Drug Test Status	Drug Test Type	Drug Test Result 1	Drug Test Result 2	
Unknown	None	Unknown at Time of Reporting	Unknown at Time of Reporting	

# Unit Information

Unit # 2	Owner First RAILWAY	Owner Middle	Owner Last WHEELING & LAKE ERIE	LP State NS	LP #
Owner Address 100 E 1ST ST	Owner City BREWSTER	Owner State OH	Owner Zip 44613	Owner Phone # 3307673401	
Year 1986	Make UNK	Model UNK	Color	VIN	
Insurance Company SELF-INSURED	In Emergency Response Unknown	Speed Detected Stated	Speed 40	Posted Speed 40	
Non-Motorist Location UnKnown	Action Striking	Towing Service	Damage Scale Non Functional Damage	Direction SouthEast	
Type of Unit Train	Point of Impact Right Front	Most Damaged Area Right Front	Vehicle Defect		
Pre-Crash Actions Movements Essentially Straight Ahead	Striking Vehicle O/U No Underride or Override	Contributing Circumstances None	First Harmful Event 1	Most Harmful Event 1	
Traffic Control No Controls	Sequence of Events 1 Motor Vehicle in Transport	Sequence of Events 2 Unknown	Sequence of Events 3 Unknown	Sequence of Events 4 Unknown	
Company (From Shipping Papers)	Company Phone	US DOT	ICC MC	PUCO	
Address	City	State	Zip		
Trailer LP St.	Trailer LP Year	Trailer LP #	Placard #	# DIA.	
Cargo Body Type Not-Applicable	CDL Class	Weight (GVWR)	Haz Material Placard Unknown	Haz Material Release Not Applicable	

# People Information

Unit # 2	First Train	Middle	Last Train	Type Driver
Address	City	State	Zip	
Date of Birth #Error	Age	Sex U	Home Phone #	Work Phone #
DL State	DL #	Offense Charged	Injured Taken By Unknown	Transported By
Seating Position Unknown	Ejection Unknown	Offense Description	Air Bag Unknown	Citation #
Condition Apparently Normal	Trapped Unknown	Safety Equipment Use Unknown	Injuries Unknown	Air Bag Switch Unknown
Alcohol Test Status None	Alcohol/Drug Suspected None	Alcohol Test Type None	Alcohol Test Result	
Drug Test Status None	Drug Test Type None	Drug Test Result 1 None	Drug Test Result 2 None	



1 HOUR

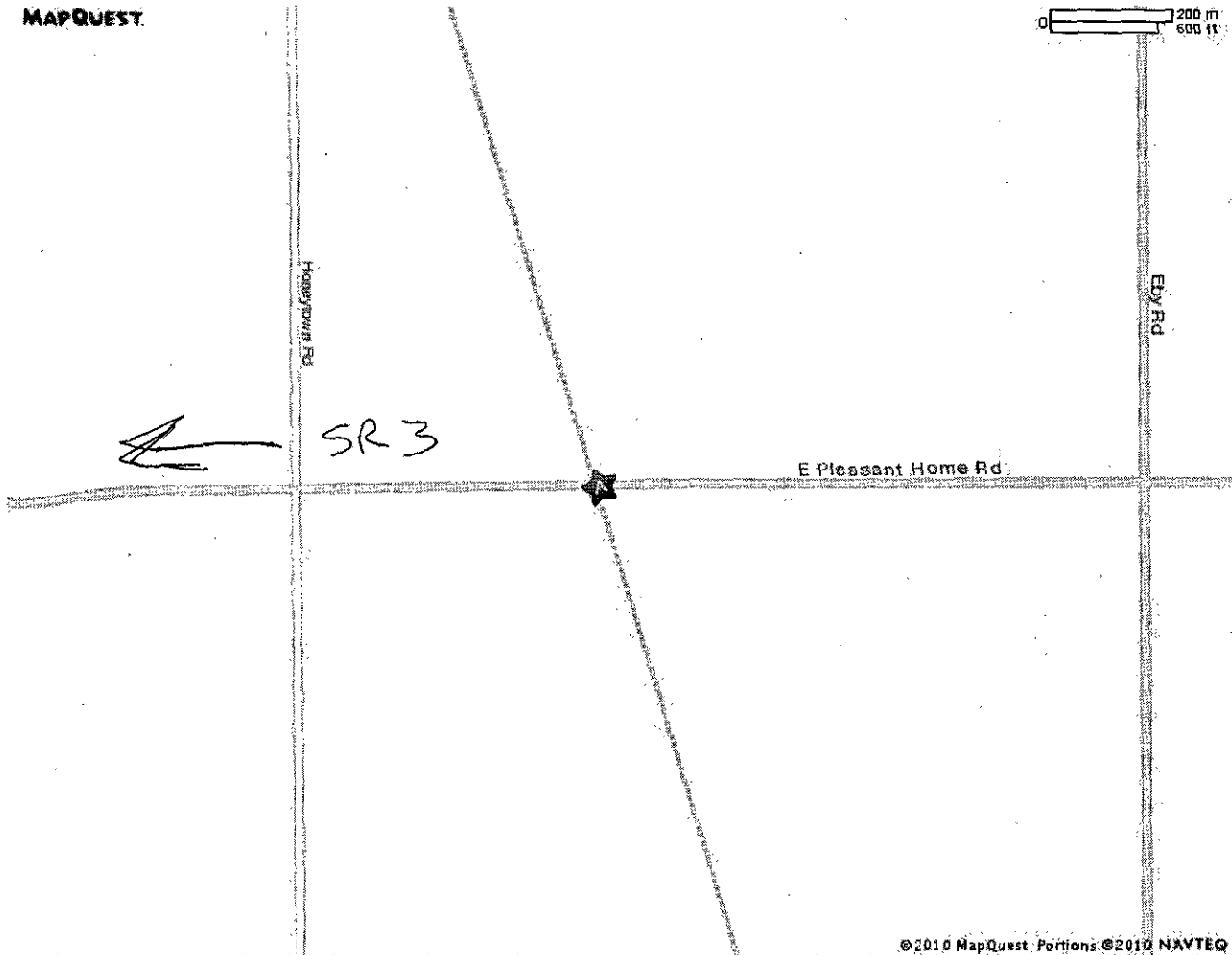
**MAPQUEST.**

Sorry! When printing directly from the browser your directions or map may not print correctly. For best results, try clicking the Printer-Friendly button.

★ Latitude: 40.9163732  
Longitude: -81.8716962  
Sterling, OH 44276

WAYNE- WE- PLEASANT HOME/CR 48 473528 U

MAPQUEST.

0 200 m  
0 600 ft

Directions and maps are informational only. We make no warranties on the accuracy of their content, road conditions or route usability or expeditiousness. You assume all risk of use. MapQuest and its suppliers shall not be liable to you for any loss or delay resulting from your use of MapQuest.

SR 39 TO SR 95 TO WOOSTER - US 30  
PICK UP SR 3

11 AM 4/27



## Diagnostic Review Team Survey

Date: 4/29/10 11 AM

### Location Data

Street or Road Name: E. SECOND ST			
Route/Road Number (i.e. Twp., Co., SR or US)		(include SLM if State or US route)	
AAR-DOT No.: 481384 M			
County: ROSS	Township:	City: (In or Near) CHILLICOTHE	
Railroad Name: NS	Railroad Division: LAKE	Branch/Line Name: MAIN LINE	
Nearest RR Timetable Station: CHILLICOTHE		RR Milepost: 656.08	

### On-Site Review Team

(Include: Name - Organization - Phone Number)

1. GEORGE MARTIN PUCCO 614-752-9107
2. MICHAEL ADAMS N.S.R.Y. 740-774-1355
3. MICHAEL BRADLER N.S.R.Y. 614-561-0592
4. TIM PERKINS ORDC 614-644-0284
5. LINDSEY A. BEVILLION City of Chillicothe 740-773-8981
6. TOM DRY " " " "
- 7.
- 8.
- 9.
- 10.

### Existing Traffic Control Devices

Type of Warning Devices	Installed?		Quantity/Comments
Advance Warning Signs	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	1 WEST BOUND
'Stop' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
'Stop Ahead' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Pavement Markings	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Crossbucks	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Number of Tracks Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Inventory Tags	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2
Interconnected Highway Traffic Signal	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Mast-Mounted Flashing Lights	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2
Cantilever Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number: Length:
Side Lights	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	1 FACING RT. BUSINESS
Automatic Gates	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number: Length:
Bells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Sidewalk Gate Arms	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
'No Turn' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Illumination	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	1 EAST SIDE
Is crossing flagged by train crew?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**Safety Data (Obtain crash reports, if possible, prior to review)**

	Initial Information (from database)	Revised
Number & dates of crashes in previous 5 years	1 2/21/10	
Hazard Ranking 70	Date Run: 4/15/10	73 5/6/10

**Railroad Data**

Railroad Characteristics	Initial Information (from database)	Revised
Total trains per day	24	CAN BE MORE -
< 1 per day		WHEN HEARTLAND
Day thru trains	12	CORRIDOR STARTS TRAINS
Night thru trains	12	WILL INCREASE
Daytime switching movements		
Nighttime switching movements		
Total number of tracks	1	
Number of main tracks	1	
Number of other tracks		
Maximum train speed	35	
Typical train speed		
Amtrak		

If non-gated crossing, is clearing sight distance adequate in all quadrants? (See Table I) ☐ Yes ☒ No NORTH -

If multiple tracks, can two trains occupy crossing at the same time? ☐ Yes ☒ No

Can one train block the motorists' view of another train at crossing? ☐ Yes (Explain below) ☒ No

Are there other track(s) crossing this same roadway within 100 ft of this crossing? ☒ Yes ☐ No

If yes, Crossing DOT #(if different) \_\_\_\_\_

If yes, distance \_\_\_\_\_ (take measurement between track centerlines at closest point along roadway)

**Roadway Data**

Local Highway Authority:  
(Who maintains this roadway?)

CITY OF CHILLICOTHE

Roadway Characteristics	Initial Information (from database)	Revised
Average daily traffic	2200 - No YEAR GIVEN	2000 (2010)
Highway paved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Roadway Surface: <input checked="" type="checkbox"/> Blacktop <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____		
Roadway width: 32 ft.		
Number of highway lanes	2	2
Urban or Rural?	URBAN	URBAN
Vehicle Speed: 25 MPH		
School Bus Operation: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes 6 Amount		
Hazardous Materials Trucks: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes _____ Amount BATTERIES - LOW PERCENTAGE		
Shoulders: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Is the shoulder surfaced? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Is there existing guardrail along roadway in crossing vicinity? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Is stopping site distance adequate? (See Table 2) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, deficient approach(es) _____		

Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input checked="" type="checkbox"/> Non-functional (Curb height = Less than 4") <input type="checkbox"/> None	Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input checked="" type="checkbox"/> Non-functional (Curb height = Less than 4") <input type="checkbox"/> None
Pedestrians: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Is sidewalk present? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Is there a nearby intersection that could cause queuing over the crossing? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, Distance _____	
Is this intersection signalized? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Are the signals currently interconnected with the existing crossing warning devices? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Is it the consensus of the Diagnostic Review Team that this is a potential closure project? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Explain reasons:	

### Type of Development

☐ Open Space      ☐ Institutional  
☐ Industrial      ☒ Commercial  
☒ Residential

Location of nearby schools:

WITHIN  $\frac{1}{2}$  MILE

## Utility Information

Is commercial power available? ☐ No ☒ Yes

Utility Provider (Company Name) ASP

Phone Number \_\_\_\_\_

Nearest Available Power Source AT CROSSING

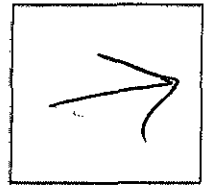
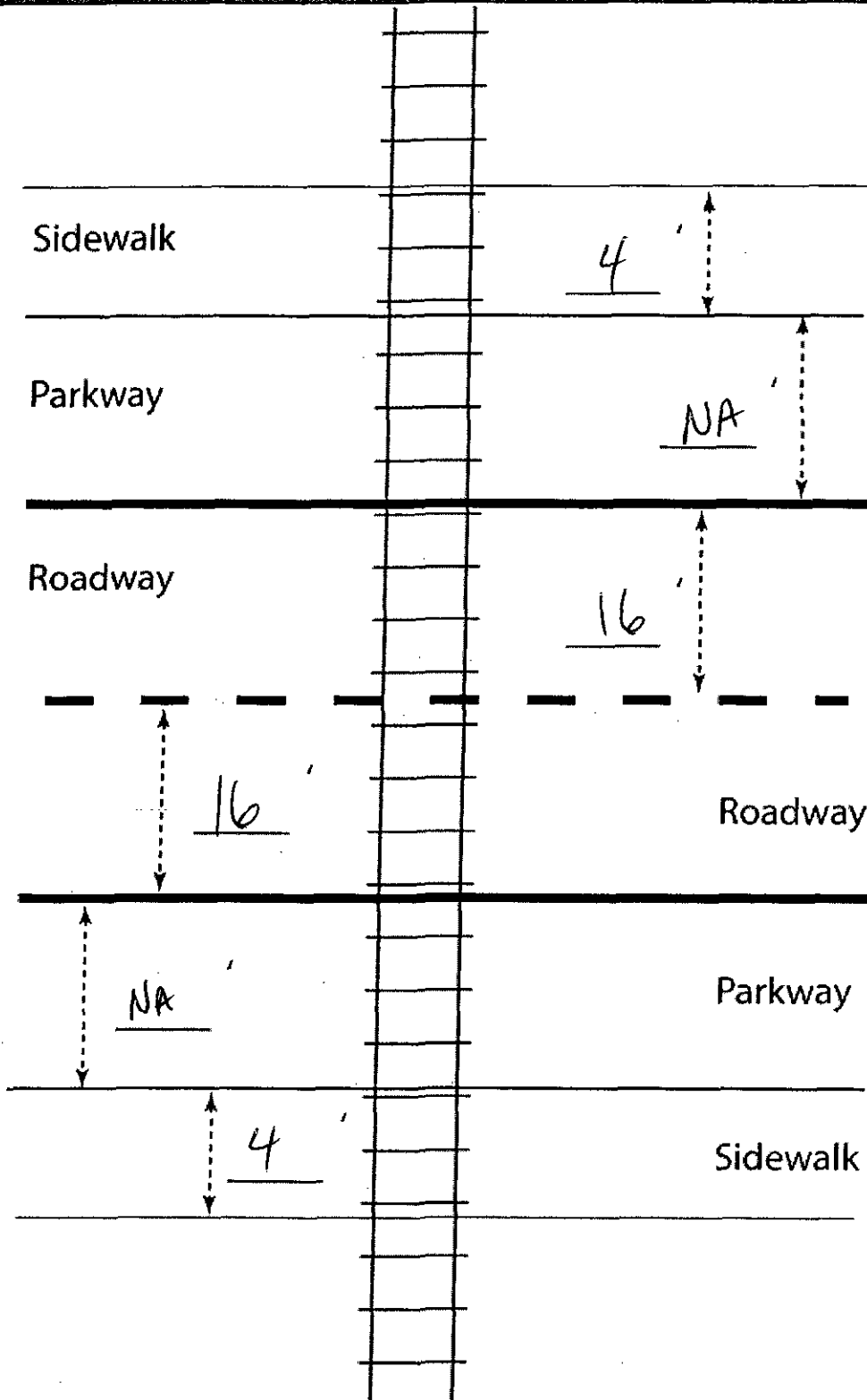
What other utilities are present? WATER, SEWER

Is there potential utility conflict(s) ☐ Yes ☐ No ☒ Unknown

## Diagnostic Team Recommendations

Quadrants Needed	
<input checked="" type="checkbox"/> Install/upgrade active devices	
<input type="checkbox"/> Automatic Flashing Lights (AFLS)	
<input type="checkbox"/> AFLS / Cants	
<input checked="" type="checkbox"/> AFLS / Gates	
<input type="checkbox"/> AFLS / Gates / Cants	
<input type="checkbox"/> Upgrade circuitry	
<b>1</b> <input checked="" type="checkbox"/> Sidelights	
<input type="checkbox"/> Guardrail Needed	
<input type="checkbox"/> Install/Replace curb	
<input type="checkbox"/> Other (define)	
Comments:	
<input type="checkbox"/> Install/upgrade traffic signal preemption	
<input type="checkbox"/> No improvements needed	
<input type="checkbox"/> Other (define)	

# Field Dimensions



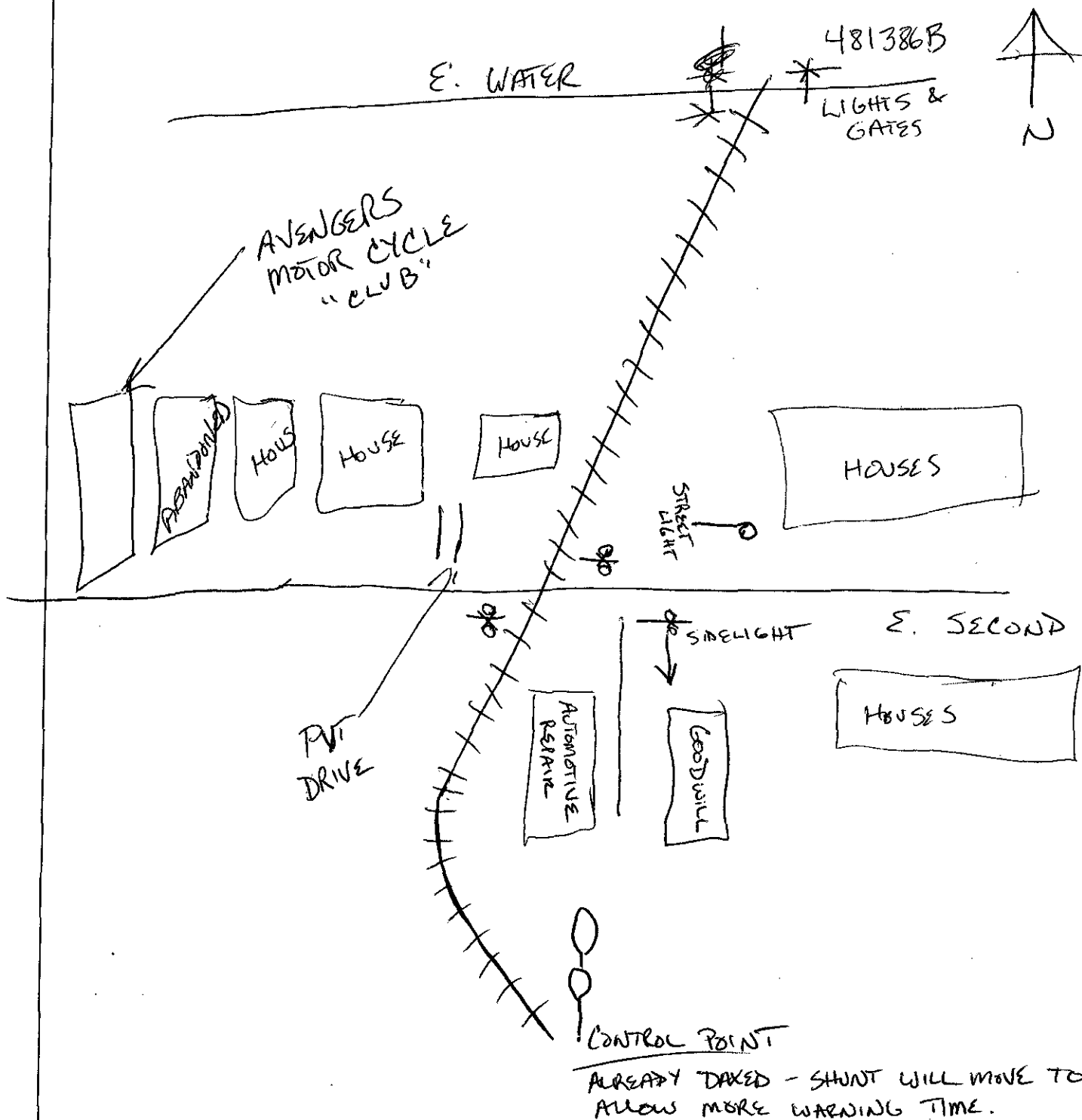
Show North  
Direction

Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in NW Quadrant?

Measurements by Gm



# Field Sketch



Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in NW Quadrant?

Sketch by: Gm

TABLE 1

## Clearing Sight Distances

Maximum Authorized Train Speed	Distance (dT) Along Railroad from Crossing (ft)
1 - 10	240
15	360
20	480
25	600
30	720
35	840
40	960
45	1080
50	1200
55	1320
60	1440
65	1560
70	1680
75	1800
80	1920
85	2040
90	2160

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers and level single track 90 degree crossings; and may need to be adjusted for multiple tracks, skewed crossings or approaches on grades.

Clearing Sight Distance is to be measured in each vehicle travel direction at non-gated crossings as viewed from a point 25 feet from centerline of nearest track in the center of whichever travel lane is nearest the direction along track being measured.

Table 2

## Stopping Sight Distances

Highway Vehicle Speed	Distance (dH) Along Roadway from Crossing (ft)
0	n/a
5	50
10	70
15	105
20	135
25	180
30	225
35	280
40	340
45	410
50	490
55	570
60	660
65	760
70	865

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers on dry level pavements.

Stopping Sight Distance is to be measured on each roadway approach to crossing from stop bar.

ROSS, NS, E. SECOND ST, 481-384M

OH-1 (Rev. 10/06)

## TRAFFIC CRASH REPORT



10003169

 CRASH SEVERITY  
 1 FATAL 3 PDO  
 2 INJURY 4 UNKNOWN  
 7

 PRIVATE PROPERTY  
 1 NOT HIT/SLIP  
 2 SOLVED  
 3 UNSOLVED  
 1

 PHOTOS TAKEN  
 X

 CH-3 CH-3 CH-1P OTHER  
 X X X

REPORTING AGENCY #

07101

Chillicothe Police

01 01

 98 = ANIMAL  
 99 = UNKNOWN

08212016

 DAY OF WEEK  
 1132 54W X

 NAME (OF CITY, VILLAGE OR TOWNSHIP) #  
 Chillicothe 71

 LATITUDE  
 LONGITUDE

 CRASH OCCURRED ON  
 PREFIX CRASH LOCATION  
 E Second St.

 TYPE LOC  
 1  
 TYPE LOCATION POINT USED  
 1 NAMED STREET 3 NUMBERED ROUTE  
 2 NUMBERED STREET

LOCAL INFORMATION

 AT THE LOCATION  
 DIST REFERENCE  
 30ft E

 PREFIX REFERENCE  
 443 E. Second St.

 REF POINT  
 CH

 REFERENCE POINT USED  
 01 STATE LINE  
 02 INTERSECTION 2 STREETS  
 03 COUNTY LINE  
 04 HOUSE NUMBER  
 05 TOWNSHIP BOUNDARY  
 06 MILE POST  
 07 CORPORATION LIMIT  
 08 PLACE NAME W/O REFERENCE  
 09 CONVEYANCE  
 10 STREET OR ROUTE W/O REFERENCE

NAME (LAST, FIRST, MIDDLE)

01 01

SEWARD, JASPER L.

ADDRESS (STREET, CITY, STATE, ZIP CODE)

260 MECHANIC ST. Chillicothe, OH 45601

 HOME PHONE #  
 (340) 804-5440

WORK PHONE #

 OH STATE  
 OH

R4136904

 LP STATE  
 OH

 LP #  
 EIU 4635

 INSURED  
 TAKEN BY 4

 1 NONE 4 OTHER  
 2 EMS 5 UNKNOWN  
 3 POLICE

 TRANSPORTED BY  
 Family

 INSURED TAKEN TO  
 ARNC

OWNER NAME (IF SAME, WRITE "SAME")

Penrod, Lashanna J.

ADDRESS (STREET, CITY, STATE, ZIP CODE)

443.5 E. Second St. Chillicothe, OH 45601

 YEAR  
 1983

 MAKE  
 Chevy

 MODEL  
 Caprice

 COLOR  
 Green

 INSURANCE COMPANY  
 21st Century

TOWNSHIP SERVICE

 OWNER PHONE #  
 (740) 466-7878

OFFENSE CHARGED

331.4061

OFFENSE DESCRIPTION

Stopping At Grade Crossing

81224

NAME (LAST, FIRST, MIDDLE)

ADDRESS (STREET, CITY, STATE, ZIP CODE)

 HOME PHONE #  
 WORK PHONE #

OH STATE

LP #

LP STATE

LP #

 INSURED  
 TAKEN BY 1

 1 NONE 4 OTHER  
 2 EMS 5 UNKNOWN  
 3 POLICE

TRANSPORTED BY

INSURED TAKEN TO

OWNER NAME (IF SAME, WRITE "SAME")

ADDRESS (STREET, CITY, STATE, ZIP CODE)

YEAR

MAKE

MODEL

COLOR

INSURANCE COMPANY

TOWNSHIP SERVICE

OWNER PHONE #

OFFENSE CHARGED

OFFENSE DESCRIPTION

NAME (LAST, FIRST, MIDDLE)

Gish, Michael J.

ADDRESS (STREET, CITY, STATE, ZIP CODE)

112 Winfield CRT. Bellevue, OH 44811

HOME PHONE #

(419) 483-4370 1030197633 M

 INSURED TAKEN BY  
 1 NONE 4 OTHER  
 2 EMS 5 UNKNOWN  
 3 POLICE

TRANSPORTED BY

INSURED TAKEN TO

NAME (LAST, FIRST, MIDDLE)

Sheets, John W. JR

ADDRESS (STREET, CITY, STATE, ZIP CODE)

636 Houston H.W. Lucasville, OH 45648

HOME PHONE #

(740) 259-2757 0926194762 M

 INSURED TAKEN BY  
 1 NONE 4 OTHER  
 2 EMS 5 UNKNOWN  
 3 POLICE

TRANSPORTED BY

INSURED TAKEN TO

 SEATING POSITION  
 01 FRONT - LEFT (MC DRIVER)  
 02 FRONT - MIDDLE  
 03 FRONT - RIGHT  
 04 SECOND - LEFT (MC PASS)  
 05 SECOND - MIDDLE  
 06 SECOND - RIGHT  
 07 THIRD - LEFT  
 08 THIRD - MIDDLE  
 09 THIRD - RIGHT  
 10 SLEEPER SECTION OF CAB  
 11 ENCLOSED CARGO AREA  
 12 UNENCLOSED CARGO AREA  
 13 TRAILING UNIT  
 14 EXTERIOR  
 15 OTHER  
 16 NON-MOTORIST  
 17 UNKNOWN  
 01 04

 SAFETY EQUIPMENT  
 01 SEATBELT  
 02 AIR BAG  
 03 SHOULDER BELT ONLY  
 04 LAP BELT ONLY  
 05 SHOULDER/LAP BELT  
 06 CHILD SAFETY SEAT  
 07 MC HELMET USED  
 08 MC HELMET NOT USED  
 09 NONE USED  
 10 HELMET USED  
 11 PROTECTIVE PADS  
 12 REFLECTIVE CLOTHING  
 13 LIGHTING  
 14 OTHER  
 15 UNKNOWN  
 5

 AIR BAG  
 1 NOT DEPLOYED  
 2 DEPLOYED - FRONT  
 3 DEPLOYED - SIDE  
 4 DEPLOYED - BOTH  
 5 NOT APPLICABLE  
 6 UNKNOWN  
 5

 EJECTION  
 1 NOT EJECTED  
 2 TOTALLY EJECTED  
 3 PARTIALLY EJECTED  
 4 NOT APPLICABLE  
 5 UNKNOWN  
 1

 TRAPPED  
 1 NOT TRAPPED  
 2 ENTRAPPED BY MECHANICAL MEANS  
 3 FREED BY NON-MECHANICAL MEANS  
 4 UNKNOWN  
 1

 INJURIES  
 1 NO INJURY  
 2 POSSIBLE  
 3 NON-INCAPACITATING  
 4 INCAPACITATING  
 5 FATAL INJURY  
 6 UNKNOWN  
 2

BLANK FOR WITNESS

HSY7001

Top Copy - ODPS Bottom Copy - Agency

<b>UNIT NUMBERS</b> 01	<b>DAMAGE AREA</b> 	<b>PRE-CRASH ACTIONS</b> 11	<b>SEQUENCE OF EVENTS</b> 16	<b>POSTED SPEED</b> 25	<b>DRUG TEST STATUS</b> 1
<b>NON-MOTORIST LOCATION</b> 01 MARKED CROSSWALK AT INTERSECTION 02 INTERSECTION NO CROSSWALK 03 NON-INTERSECTION CROSSWALK 04 DRIVEWAY ACCESS CROSSWALK 05 IN ROADWAY 06 NOT IN ROADWAY 07 MEDIAN (BUT NOT SHOULDER) 08 ISLAND 09 SHOULDER 10 SIDEWALK 11 WITHIN 10 FEET OF ROADWAY (NOT SHOULDER, MEDIAN, SIDEWALK, ISLAND) 12 BEYOND 10 FEET OF ROADWAY (WITHIN TRAFFICWAY) 13 OUTSIDE TRAFFICWAY 14 SHARED USE PATHS OR TRAILS 15 UNKNOWN	<b>MOST DAMAGED AREA</b> 07	<b>NON-MOTORIST</b> 01 MOVEMENTS ESSENTIALLY STRAIGHT AHEAD 02 BACKING 03 CHANGING LANES 04 OVERTAKING/PASSING 05 TURNING RIGHT 06 TURNING LEFT 07 MAKING U-TURN 08 ENTERING TRAFFIC LANE 09 LEAVING TRAFFIC LANE 10 PARKED 11 STOPPED/STOPPED IN TRAFFIC 12 DRIVERLESS 13 OTHER 14 UNKNOWN <b>NON-MOTORIST</b> 15 ENTERING/CROSSING IN SPECIFIED LOCATION 16 WALKING, RUNNING, JOGGING, PLAYING, CYCLING 17 WORKING 18 PUSHING VEHICLE 19 APPROACHING/LEAVING VEHICLE 20 PLAYING/WORKING ON VEHICLE 21 STANDING 22 OTHER 23 UNKNOWN	<b>NON-COLLISION</b> 01 OVERTURN/ROLLOVER 02 FIRE/EXPLOSION 03 INJURY 04 JACKKNIFE 05 CARGO/EQUIPMENT LOSS/SHIFT 06 EQUIPMENT FAILURE 07 SEPARATION OF UNITS 08 RAN OFF ROAD RIGHT 09 RAN OFF ROAD LEFT 10 CROSS MEDIAN/CENTERLINE 11 DOWNGRADE RUNAWAY 12 OTHER NON-COLLISION 13 UNKNOWN NON-COLLISION <b>COLLISION W/ PERSON, VEHICLE, OR OBJECT NOT FIXED</b> 14 PEDESTRIAN 15 BICYCLIST 16 RAILWAY VEHICLE 17 ANIMAL - FARM 18 ANIMAL - DEER 19 ANIMAL - OTHER 20 MOTOR VEHICLE IN TRANSPORT 21 PARKED MOTOR VEHICLE 22 WORK ZONE MAINTENANCE EQUIPMENT 23 OTHER MOVABLE OBJECT 24 UNKNOWN MOVABLE OBJECT <b>COLLISION WITH FIXED OBJECT</b> 25 IMPACT ATTENUATION/DASH CRUSH 26 BROKE OVERHEAD STRUCTURE 27 BROKE PERCH OR ABUTMENT 28 BROKE PARAPET 29 BROKE RAIL 30 GUARDRAIL FACE 31 GUARDRAIL END 32 MEDIAN BARRIER 33 HIGHWAY TRAFFIC SIGN POST 34 OVERHEAD SIGN POST 35 LIGHT/LUMINANCE SUPPORT 36 UTILITY POLE 37 OTHER POST, POLE OR SUPPORT 38 CULVERT 39 CURB 40 DITCH 41 EXCAVATION 42 FENCE 43 MAILBOX 44 TREE 45 OTHER FIXED OBJECT 46 WORK ZONE MAINTENANCE EQUIPMENT 47 UNKNOWN FIXED OBJECT 48 OTHER 49 UNKNOWN	<b>TRAFFIC CONTROL</b> 08 01 NO CONTROLS 02 STOP SIGN 03 YIELD SIGN 04 TRAFFIC SIGNAL 05 TRAFFIC FLASHERS 06 SCHOOL ZONE 07 RAILROAD CROSING 08 RAILROAD FLASHERS 09 RAILROAD GATES 10 CONSTRUCTION BARRICADE 11 POLICE OFFICER 12 PAVEMENT MARKINGS 13 CROSSWALK LINES 14 WALK/BIKE WALK SIGNAL 15 TRAFFIC CONTROL DEVICE COOPERATIVE, MISSING, OBLISCURED 16 OTHER	<b>DRUG TEST TYPE</b> 1 NONE 2 BLOOD 3 URINE 4 OTHER <b>DRUG TEST 1&amp;2 RESULT</b> 1 NONE 2 MARIJUANA 3 COCAINE 4 OPiates 5 AMPHETAMINES 6 PCP 7 OTHER 8 UNKNOWN AT TIME OF REPORTING
<b>TYPE OF UNIT</b> 04 <b>MOTORIST</b> 01 SUB-CONTACT 02 CONTACT 03 MID SIZE 04 FULL SIZE 05 VAN/VAN 06 SPORT UTILITY VEHICLE 07 PICKUP 08 PANEL/VAN 09 SINGLE UNIT TRUCK 10 2 AXLES, 5 TONES 11 SINGLE UNIT TRUCK 3+ AXLES 12 TRUCK/TRACTOR 13 TRUCK TRACTOR (BASTAR) 14 TRACTOR/SEMI-TRAILER 15 TRACTOR/DOUBLE SHORT 16 TRACTOR/DOUBLE LONG 17 FIFTH WHEEL OR CONVENTIONAL DOLLY 18 TRACTOR/TRIPLES 19 MOTORCYCLE 20 SCHOOL BUS 21 CHURCH BUS 22 PUBLIC BUS 23 OTHER BUS 24 POLICE VEHICLE 25 FIRE TRUCK 26 AMBULANCE/RESCUE 27 TAXI 28 MOTOR HOME 29 TRAM 30 FARM VEHICLE 31 FARM EQUIPMENT 32 SNOWMOBILE 33 CONSTRUCTION EQUIPMENT 34 ALL OTHERS <b>NON-MOTORIST</b> 35 ANIMAL W/DRIVER 36 ANIMAL W/DRIVER 37 BICYCLE 38 PEDESTRIAN 39 BICYCLIST 40 SKATER 41 OTHER-NON MOTORIST 42 UNKNOWN	<b>POINT OF IMPACT</b> 07 01 NONE 02 CENTER FRONT 03 RIGHT FRONT 04 RIGHT SIDE 05 RIGHT REAR 06 REAR CENTER 07 LEFT REAR 08 LEFT SIDE 09 LEFT FRONT 10 TOP AND WINDOWS 11 UNDERCARRIAGE 12 LOAD/TRAILER 13 TOTAL (ALL AREAS) 14 OTHER 15 UNKNOWN	<b>CONTRIBUTING CIRCUMSTANCES</b> 21 <b>MOTORIST</b> 01 NONE 02 FAILURE TO YIELD 03 RAN RED LIGHT, OR STOP SIGN 04 EXCEEDED SPEED LIMIT 05 UNLAWFUL SPEED 06 IMPROPER TURN 07 LEFT OF CENTER 08 FOLLOWED TOO CLOSELY/ACCID 09 IMPROPER LANE CHANGE/ DRIVE OFF ROAD/ IMPROPER PASSING 10 IMPROPER BACKING 11 IMPROPER START FROM PARKED POSITION 12 STOPPED ON PARKED SIDEWALK 13 OPERATING VEHICLE IN ERATIC, RECKLESS, CARELESS, NEGLIGENT OR AGGRESSIVE MANNER 14 SWERVING TO AVOID (DUE TO WIND, SLIPPERY SURFACE, VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC) 15 FAILURE TO CONTROL 16 VISION OBSTRUCTION 17 DRIVER DISTRACTION 18 FATIGUE/ASLEEP 19 OPERATING DEFECTIVE EQUIPMENT 20 LOAD SHIFTING/FALLING/SPILLING 21 OTHER IMPROPER ACTION 22 UNKNOWN <b>NON-MOTORIST</b> 23 NONE 24 IMPROPER CROSSING 25 DARTING 26 LYING AND/OR RECKLESSLY IN ROADWAY 27 FAILURE TO YIELD RIGHT OF WAY 28 NOT VISIBLE (DARK CLOTHING) 29 DISTRACTION 30 FAILURE TO OBEY TRAFFIC SIGNALS, SIGNALS, OR OFFICER 31 WRONG SIDE OF THE ROAD 32 OTHER 33 UNKNOWN	<b>FIRST HARMFUL EVENT</b> 1 <b>OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE FIRST HARMFUL EVENT (1-4)</b> <b>MOST HARMFUL EVENT</b> 1 <b>OF THE SEQUENCE OF EVENTS - WHICH ONE IS THE MOST HARMFUL EVENT (1-4)</b>	<b>DIRECTION</b> 34 1 NORTH 2 SOUTH 3 EAST 4 WEST 5 NORTHEAST 6 NORTHWEST 7 SOUTHEAST 8 SOUTHWEST 9 UNKNOWN <b>CONDITION</b> 1 1 APPARENTLY NORMAL 2 PHYSICAL IMPAIRMENT 3 EMOTIONAL 4 BLIND 5 FELL ASLEEP, FANTASIZED, FATIGUED, ETC 6 UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ALCOHOL 7 OTHER 8 UNKNOWN <b>ALCOHOL/DRUG SUSPECTED</b> 1 1 NONE 2 YES - ALCOHOL SUSPECTED 3 YES - HED NOT IMPAIRED 4 YES - DRUG SUSPECTED 5 YES - ALCOHOL / DRUGS SUSPECTED 6 UNKNOWN	<b>TYPE OF INTERSECTION</b> 11 01 NOT AN INTERSECTION 02 FOUR-WAY INTERSECTION 03 T-INTERSECTION 04 Y-INTERSECTION 05 TRAFFIC CIRCLE/ROUNDOABOUT 06 FIVE-POINT, OR MORE 07 ON RAMP 08 OFF RAMP 09 CROSOVER 10 DIVERGENT/ACCESS 11 RAILWAY GRADE CROSSING 12 SHARED-USE PATHS OR TRAILS 13 UNKNOWN <b>OCCURRENCE</b> 1 1 ON ROADWAY 2 ON SHOULDER 3 IN MEDIAN 4 ON ROADSIDE 5 ON GORE 6 OUTSIDE TRAFFICWAY 7 UNKNOWN
<b>IN EMERGENCY RESPONSE</b> 1 NO 2 YES 3 UNKNOWN <b>DAMAGE SCALE</b> 4 1 NONE 2 NON-FUNCTIONAL DAMAGE 3 FUNCTIONAL DAMAGE 4 DISABLING DAMAGE 5 SEVERE 6 UNKNOWN	<b>ACTION</b> 4 1 NON-CONTACT 2 NON-COLLISION 3 STRUCK 4 STRUCK 5 BOTH STRUCK AND STRUCK 6 UNKNOWN <b>STRUCK VEHICLE: OVERLAP/ UNDERLAP</b> 1 1 NO UNDERLAP OR OVERLAP 2 UNDERLAP, COMPARTMENT INTRUSION 3 UNDERLAP, NO COMPARTMENT INTRUSION 4 UNDERLAP, COMPARTMENT INTRUSION UNKNOWN 5 OVERLAP, MOTOR VEHICLE IN TRANSPORT 6 OVERLAP, OTHER VEHICLE 7 UNKNOWN	<b>VEHICLE DEFECT CODE ONLY IF '19' SELECTED ABOVE</b> 01 TURN SIGNALS 02 HEAD LAMPS 03 TAIL LAMPS 04 BRAKES 05 STEERING 06 TIRE BLOWOUT 07 WORK ON SUEK TIRE 08 TRAILER EQUIPMENT DEFECTIVE 09 MOTOR TROUBLE 10 DISABLED FROM PRIOR CRASH 11 OTHER DEFECTS	<b>SPEED DETECTED</b> 14 1 STATED 2 ESTIMATED SPEED <b>SPEED</b> 0	<b>ALCOHOL TEST STATUS</b> 1 1 NONE 2 TEST REFUSED 3 TEST GIVEN, CONTAMINATED SAMPLE/UNUSABLE 4 TEST GIVEN, RESULTS KNOWN 5 TEST GIVEN, RESULTS UNKNOWN 6 UNKNOWN <b>ALCOHOL TEST TYPE</b> 1 1 NONE 2 BLOOD 3 URINE 4 BREATH 5 OTHER <b>ALCOHOL TEST RESULT</b> 1	<b>ROAD CONDITIONS</b> 01 01 DRY 02 WET 03 SNOW 04 ICE 05 SAND, MUD, DIRT, OR GRAVEL 06 WATER (STANDING, MOVING) 07 SLUSH 08 DEBRIS 09 RUTS, HOLES, BUMP, UNSEEN PAVEMENT 10 OTHER 11 UNKNOWN **SECONDARY ROAD CONDITIONS ONLY

## Narrative

UNIT #1 backed out of the drive way at 443 E. Second St. on to Norfolk Southern railroad grade. Unit #1 stopped to put the vehicle in drive and was struck by a Norfolk Southern train. Unit #1 had Heavy damage. The train was not damaged. The driver of Unit #1 was checked by Chillicothe Squad. The driver refused Squad transport and stated he would go to ARMC by family transport. The driver did not have any visible injuries. The driver of Unit #1 was issued citation #81224 for failure to stop at grade crossing with flashing red lights. Unit #1 and the Engineer of the train was given exchange of information and OH3 statements. Information for the train is on the attached OH2.

<b>MANIPULATION OF COLLISION OR IMPACT</b> <input type="checkbox"/> 1 NOT COLLISION BETWEEN TWO VEHICLES IN TRANSPORT <input type="checkbox"/> 2 REAR-ON <input type="checkbox"/> 3 REAR-TO-REAR <input type="checkbox"/> 4 REAR-TO-REAR <input type="checkbox"/> 5 BACKING <input type="checkbox"/> 6 ANGLE <input type="checkbox"/> 7 SIDEWIDE, SAME DIRECTION <input type="checkbox"/> 8 SIDEWIDE, OPPOSITE DIRECTION <input type="checkbox"/> 9 UNKNOWN		<b>SCHOOL BUS RELATED</b> <input type="checkbox"/> 1 NO <input type="checkbox"/> 2 YES, DIRECTLY INVOLVED <input type="checkbox"/> 3 YES, INDIRECTLY INVOLVED <input type="checkbox"/> 4 UNKNOWN		<b>Diagram</b> 		Write an "N" on the compass diagram to indicate the direction of north.	
<b>WEATHER</b> <input type="checkbox"/> 01 CLEAR <input type="checkbox"/> 02 CLOUDY <input type="checkbox"/> 03 FOG, SMOG, SMOKES <input type="checkbox"/> 04 RAIN <input type="checkbox"/> 05 SLEET, HAIL (FREEZING RAIN, DRIZZLE) <input type="checkbox"/> 06 SNOW <input type="checkbox"/> 07 SEVERE CROSSWINDS <input type="checkbox"/> 08 BLOWING SAND, SOIL, DIRT, SNOW <input type="checkbox"/> 09 OTHER <input type="checkbox"/> 10 UNKNOWN		<b>WORK ZONE RELATED</b> <input type="checkbox"/> 1 NO <input type="checkbox"/> 2 YES <input type="checkbox"/> 3 UNKNOWN		<b>TYPE OF WORK ZONE</b> <input type="checkbox"/> 1 LANE CLOSURE <input type="checkbox"/> 2 LANE SHIFT/CROSSOVER <input type="checkbox"/> 3 WORK ON SHOULDER OR MEDIAN <input type="checkbox"/> 4 INTERMITTENTLY MOVING WORK <input type="checkbox"/> 5 OTHER		<b>LOCATION OF CRASH IN WORK ZONE</b> <input type="checkbox"/> 1 BEFORE FIRST WORK ZONE WARNING SIGN <input type="checkbox"/> 2 ADVANCE WARNING AREA <input type="checkbox"/> 3 TRANSITION AREA <input type="checkbox"/> 4 ACTIVITY AREA	
<b>LIGHT CONDITIONS</b> <input type="checkbox"/> 1 DAYLIGHT <input type="checkbox"/> 2 DAWN <input type="checkbox"/> 3 DUSK <input type="checkbox"/> 4 DARK - LIGHTED ROADWAY <input type="checkbox"/> 5 DARK - NOT LIGHTED <input type="checkbox"/> 6 DARK - UNKNOWN LIGHTING <input type="checkbox"/> 7 CLEAR <input type="checkbox"/> 8 OTHER <input type="checkbox"/> 9 UNKNOWN		<b>WORKERS PRESENT</b> <input type="checkbox"/> 1 NO <input type="checkbox"/> 2 YES <input type="checkbox"/> 3 UNKNOWN		<b>Truck/Bus</b> UNIT # <input type="text"/> COMPANY (FROM SHIPPING PAPERS) <input type="text"/> ADDRESS (STREET, CITY, ST, ZIP CODE) <input type="text"/> COMPANY PHONE <input type="text"/>		<b>THE CRASH INVOLVED ONE OR MORE OF THE FOLLOWING:</b> A TRUCK (MOTOR VEHICLE) WITH A GVWR MORE THAN 10,000 POUNDS; OR A TRUCK (MOTOR VEHICLE) WITH A HAZARDOUS MATERIALS PLACARD; OR A BUS DESIGNED FOR AT LEAST 8 PERSONS, INCLUDING DRIVER.	
<b>AND</b> THE CRASH RESULTED IN ONE OR MORE OF THE FOLLOWING: A FATALITY; OR AN INJURY REQUIRING TRANSPORTATION FOR IMMEDIATE MEDICAL TREATMENT; OR AT LEAST ONE VEHICLE WAS TOWED DUE TO OVERLOADING DAMAGE OR REQUIRED INTERVENEING ASSISTANCE BEFORE PROCEEDING UNDER ITS OWN POWER.		<b>US DOT</b> <input type="text"/> <b>ICC REG</b> <input type="text"/> <b>PUCO</b> <input type="text"/> <b>TRAILER LP ST</b> <input type="text"/> <b>TRAILER LP YEAR</b> <input type="text"/> <b>TRAILER LP #</b> <input type="text"/>		<b>HAZARDOUS MATERIALS PLACARD</b> <input type="text"/> <b>HAZARDOUS MATERIALS RELEASED</b> <input type="text"/>			
<b>CARGO BODY TYPE</b> <input type="checkbox"/> 01 NOT APPLICABLE <input type="checkbox"/> 02 BUS (9-15 INCLUDING DRIVER) <input type="checkbox"/> 03 VAN/ENCLOSURE BOX <input type="checkbox"/> 04 GRAB/CRANE/DRIVE		<input type="checkbox"/> 05 POLE <input type="checkbox"/> 06 CARGO TANK <input type="checkbox"/> 07 FLATBED <input type="checkbox"/> 08 CRANE		<input type="checkbox"/> 09 CONCRETE MIXER <input type="checkbox"/> 10 AUTO TRANSPORTER <input type="checkbox"/> 11 GARBAGE/REFUSE <input type="checkbox"/> 12 OTHER <input type="checkbox"/> 13 UNKNOWN		<b>Weight (GVWR)</b> <input type="checkbox"/> 1 LESS/EQUAL 10,000 <input type="checkbox"/> 2 10,001 - 25,000 <input type="checkbox"/> 3 MORE THAN 25,000	
<b>CDL Class</b> <input type="checkbox"/> 1 CLASS A <input type="checkbox"/> 2 CLASS B <input type="checkbox"/> 3 CLASS C <input type="checkbox"/> 4 CLASS D <input type="checkbox"/> 5 CLASS E		<b>Hazardous Materials Placard</b> <input type="checkbox"/> 1 NO <input type="checkbox"/> 2 YES <input type="checkbox"/> 3 UNKNOWN		<b>Hazardous Materials Released</b> <input type="checkbox"/> 1 NO <input type="checkbox"/> 2 YES <input type="checkbox"/> 3 NOT APPLICABLE <input type="checkbox"/> 4 UNKNOWN			

## Police Action

DATE CRASH REPORTED: 02212010		DISPATCH: 1134		ARRIVED: 1135		CLEARED: 1251		OTHER: 60		137	
OFFICER'S NAME: [Signature] (Jason Gammie)		CHECKED BY: [Signature]		DATE REPORT FILED: 02212010		REPORT TAKEN BY: 1 POLICE AGENT		REPORT TAKEN AT: 1 SCENE		10003169	
2 MOTORIST		2 STATION		3 OTHER							

## OHIO TRAFFIC CRASH - DIAGRAM/NARRATIVE CONTINUATION

OH-2

LOCAL REPORT NUMBER 10003169	REPORTING AGENCY Chillicothe Police	DATE OF CRASH MOZ 1021 11/0
IN COUNTY OF ROSS	CRASH LOCATION E. Second St.	
<p>OWNER OF THE TRAIN Norfolk Southern 1400 East St. Cincinnati, OH 45203 Phone # (513) 453-2530. The train is a 2004 GE black in color. Train # 2174520. Michael J. Gish is the Engineer And John Sheets the Conductor. Both are listed as witnesses on the OH1. Norfolk Southern is self-insured.</p>		
OFFICER'S SIGNATURE X OFC. J. Gish		BADGE NUMBER 44

# FAX Cover Sheet

**Chillicothe Police Department  
28 N Paint St. Ste C  
Chillicothe, Ohio 45601**

**(740) 773-1191**  
**Fax: (740) 773-1248**

Date: 4-15-10

Number of pages (including cover): 5.

SENT TO: Name: George Martin

Company: \_\_\_\_\_

Phone Number: (614) 752-9107

FAX Number: (614) 995-5535

SENT BY: Name: Mica Kinzer

Phone Number: (740) 773-1191

**DESCRIPTION:**



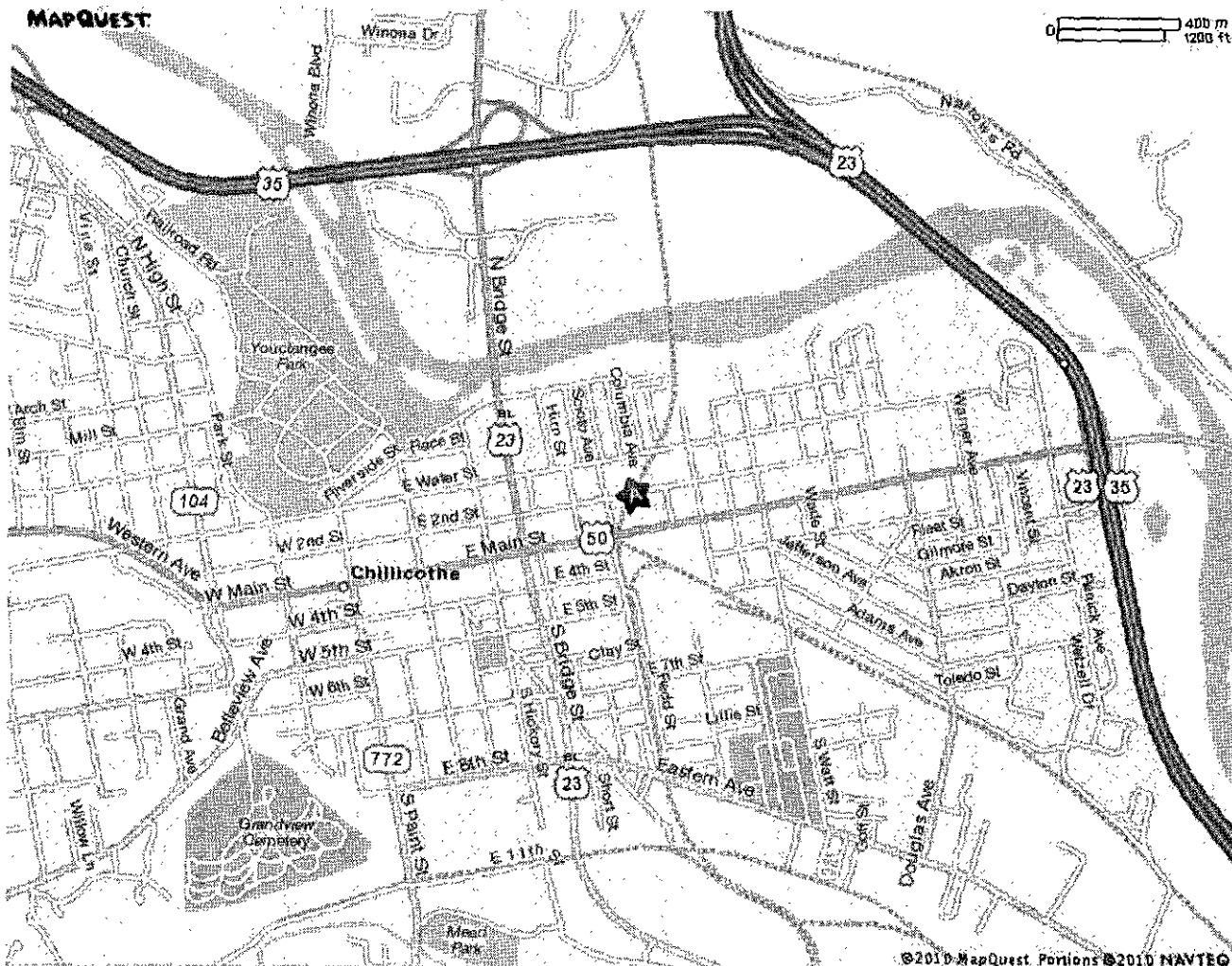
# MAPQUEST

Sorry! When printing directly from the browser your directions or map may not print correctly. For best results, try clicking the Printer-Friendly button.

★ Latitude: 39.3364896  
Longitude: -82.9695798  
Chillicothe, OH 45601

ROSS NS E. SECOND ST 481384M

45-1 Hour



Directions and maps are informational only. We make no warranties on the accuracy of their content, road conditions or route usability or expeditiousness. You assume all risk of use. MapQuest and its suppliers shall not be liable to you for any loss or delay resulting from your use of MapQuest.

FROM WCA - SR 35 TO N. BRIDGE ST (23 BUSINESS LOOP)  
TO E. 2nd ST.  
4/29  
11 AM





## Diagnostic Review Team Survey

Date: 5/4/10 830 AM

### Location Data

Street or Road Name:

CR 20

Route/Road Number (i.e. Twp., Co., SR or US) CR 20 (include SLM if State or US route)

AAR-DOT No.: 513789 G

County: LOGAN

Township:

City: (In or Near) HORTON

Railroad Name: CSX

Railroad Division: GREAT LAKES

Branch/Line Name: SCOTTS LAWN

Nearest RR  
Timetable Station:

RR Milepost: AT 85.8

### On-Site Review Team

(Include: Name - Organization - Phone Number)

1. GEORGE MARTIN PUC 614-752-9107
2. TIM PERKINS ORDC 614-644-0284
3. Scott Coleman LCEO 637-592-2791
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

### Existing Traffic Control Devices

Type of Warning Devices	Installed?		Quantity/Comments	
Advance Warning Signs	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2	
'Stop' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
'Stop Ahead' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Pavement Markings	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Crossbucks	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2	
Number of Tracks Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Inventory Tags	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2	
Interconnected Highway Traffic Signal	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Mast-Mounted Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Cantilever Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number:	Length:
Side Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Automatic Gates	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number:	Length:
Bells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Sidewalk Gate Arms	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
'No Turn' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Illumination	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Is crossing flagged by train crew?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

**Safety Data (Obtain crash reports, if possible, prior to review)**

	Initial Information (from database)	Revised
Number & dates of crashes in previous 5 years	1 10/10/09	
Hazard Ranking 46	Date Run: 4/15/10	46 5/6/10

**Railroad Data**

Railroad Characteristics	Initial Information (from database)	Revised
Total trains per day	22	
< 1 per day		
Day thru trains	8	
Night thru trains	13	
Daytime switching movements	1	
Nighttime switching movements		
Total number of tracks	1	
Number of main tracks	1	
Number of other tracks		
Maximum train speed	50	
Typical train speed		
Amtrak		

If non-gated crossing, is clearing sight distance adequate in all quadrants? (See Table 1) ☒ Yes ☒ No EAST BOUND ON

If multiple tracks, can two trains occupy crossing at the same time? ☐ Yes ☒ No CR 250

Can one train block the motorists' view of another train at crossing? ☐ Yes (Explain below) ☒ No

Are there other track(s) crossing this same roadway within 100 ft of this crossing? ☐ Yes ☒ No

If yes, Crossing DOT # (if different) \_\_\_\_\_

If yes, distance \_\_\_\_\_ (take measurement between track centerlines at closest point along roadway)

**Roadway Data**

Local Highway Authority:  
(Who maintains this roadway?)

LOGAN COUNTY

Roadway Characteristics	Initial Information (from database)	Revised
Average daily traffic	293 (2006)	300 (2010)
Highway paved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Roadway Surface: ☒ Blacktop ☐ Gravel ☐ Concrete ☐ Other \_\_\_\_\_

Roadway width: 18 ft.

Number of highway lanes	2	2
Urban or Rural?	RURAL	RURAL
Vehicle Speed: 55 MPH		

School Bus Operation: ☐ No ☐ Yes \_\_\_\_\_ Amount

Hazardous Materials Trucks: ☐ No ☒ Yes \_\_\_\_\_ Amount Low Volume

Shoulders: ☒ No ☐ Yes

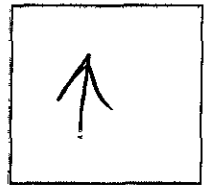
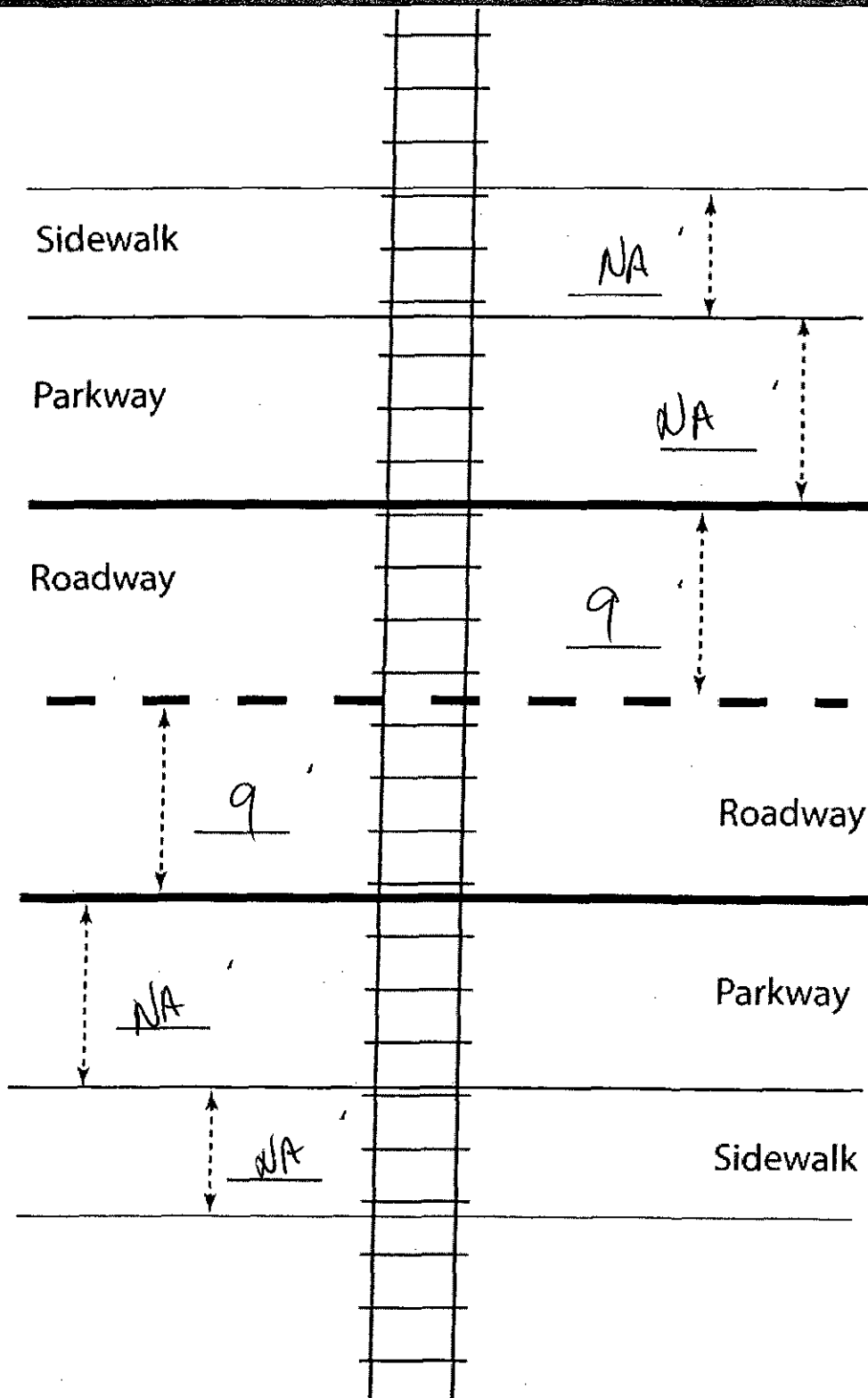
Is the shoulder surfaced? ☒ No ☐ Yes

Is there existing guardrail along roadway in crossing vicinity? ☒ No ☐ Yes

Is stopping site distance adequate? (See Table 2) ☒ Yes ☐ No If no, deficient approach(es) \_\_\_\_\_



# Field Dimensions

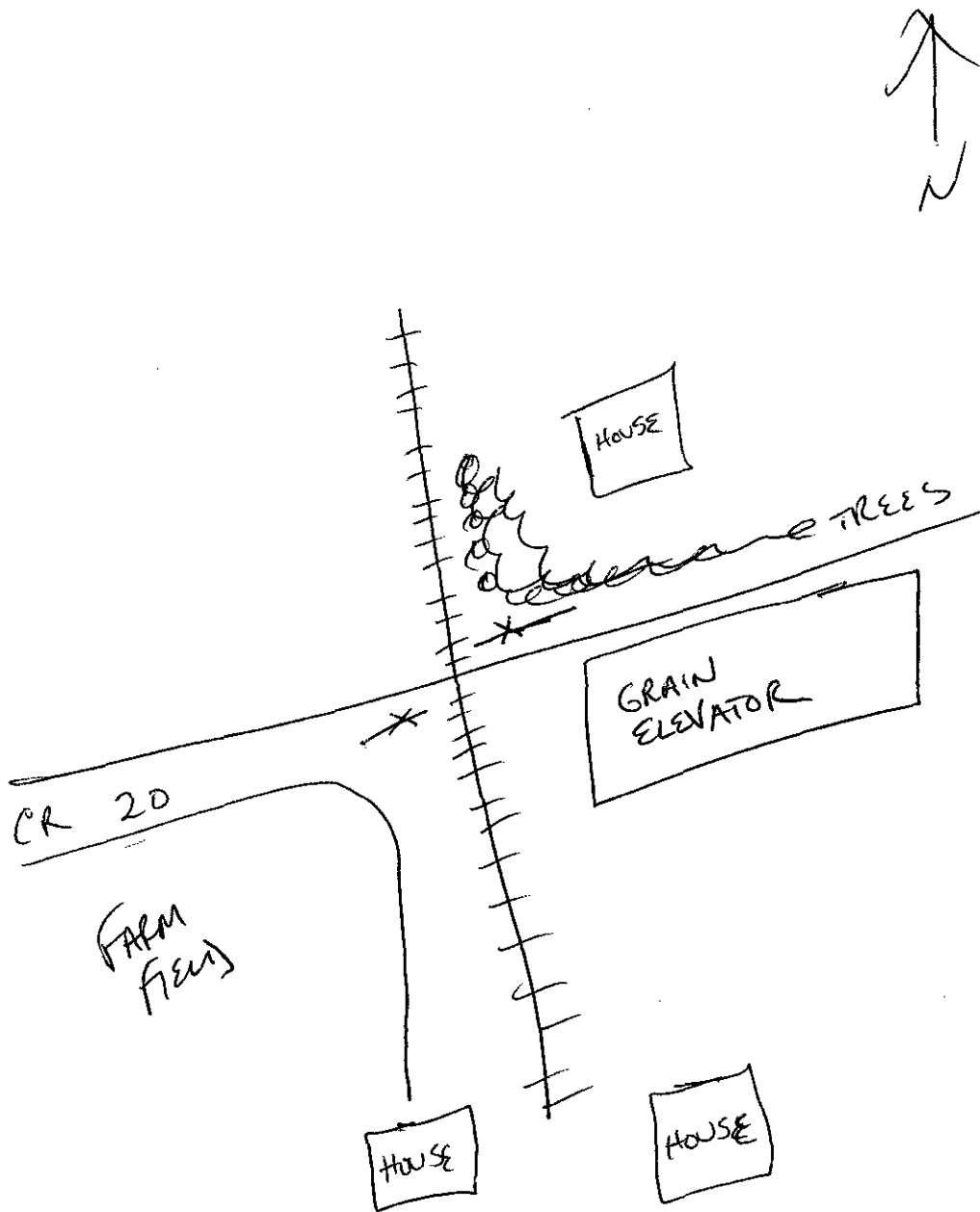


Show North  
Direction

Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in SW Quadrant?

Measurements by: GM

# Field Sketch



Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in SE Quadrant?

Sketch by: GM

TABLE 1

## Clearing Sight Distances

Maximum Authorized Train Speed	Distance (dT) Along Railroad from Crossing (ft)
1 - 10	240
15	360
20	480
25	600
30	720
35	840
40	960
45	1080
50	1200
55	1320
60	1440
65	1560
70	1680
75	1800
80	1920
85	2040
90	2160

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers and level single track 90 degree crossings; and may need to be adjusted for multiple tracks, skewed crossings or approaches on grades.

Clearing Sight Distance is to be measured in each vehicle travel direction at non-gated crossings as viewed from a point 25 feet from centerline of nearest track in the center of whichever travel lane is nearest the direction along track being measured.

Table 2

## Stopping Sight Distances

Highway Vehicle Speed	Distance (dH) Along Roadway from Crossing (ft)
0	n/a
5	50
10	70
15	105
20	135
25	180
30	225
35	280
40	340
45	410
50	490
55	570
60	660
65	760
70	865

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers on dry level pavements.

Stopping Sight Distance is to be measured on each roadway approach to crossing from stop bar.



# Traffic Crash Report

LOEAN, CR 20, CSX  
513789 G

Local Report # 80-0830-46	Crash Severity PDO	Private Property N	Hit/Skip Unsolved	Photos Taken N	NCIC # OHP80
Reporting Agency OHIO STATE HIGHWAY P	# Units 2	Unit Error 2	Date and Time of Crash 10/10/2009 2:23:00 PM		
Day of Week SAT	City Village Township Township	Name (of City, Village or Township) Bokescreek	County # 46	Latitude 40 27 11.22	Longitude 83 33 17.18
Crash Occurred On			Local Information		
Prefix 0020	Crash Location		Type Loc Numbered Route		
At / Reference			Ref Point		
Dist Reference 100	DR W	Prefix 0142	Intersection 2 Streets		
Type of Intersection Railway Grade Crossing	Occurrence On Roadway	Road Contour Straight Grade	Road Conditions Primary Dry Secondary Unknown	** Secondary Road Conditions ONLY	

Police Action					
Date and Time Crash Reported 10/10/2009 2:23:00 PM	Dispatch 10/10/2009 2:23:00 PM	Arrived 10/10/2009 2:55:00 PM	Cleared 10/10/2009 3:45:00 PM	Other 60	Total Minutes 142
Officer's Name* STANLEY, RYAN	Badge #* 0608	Checked By MHAISON	Date Report Filed* 11/4/2009 12:00:00 AM		
Report Taken By Police Agency	Report Taken At Other				

Manner of Collision or Impact Angle	Diagram 
School Bus Related No	
Work Zone Related No	
Weather Clear	
Type of Work Zone	
Workers Present	
Location of Crash in Work Zone	
Light Conditions Primary Daylight Secondary Unknown	

**Narrative**  
UNIT #1 WAS TRAVELING SOUTHEAST ON THE RAILROAD TRACKS. UNIT #2 WAS TRAVELING NORTH EAST ON CR 20. UNIT #2 FAILED TO YIELD TO UNIT #1 AND WAS STRUCK. UNIT #2 LEFT THE SCENE OF THE CRASH. SUPPLEMENTED TO SHOW NO PHOTOS.



# Traffic Crash Report

## Vehicle Information

Unit # 1	Owner First	Owner Middle	Owner Last	LP State	LP #
			CSX TRANSPORTATION	NS	
	Owner Address	Owner City	Owner State	Owner Zip	Owner Phone #
	405 MADISON AVE 2100	TOLEDO	OH	43604	4192465757
	Year	Make	Model	Color	VIN
	1994	UNK	UNK		
	Insurance Company	In Emergency Response	Speed Detected	Speed	Posted Speed
	SELF INSURED	Unknown	Stated	47	
	Non-Motorist Location	Action	Towing Service	Damage Scale	Direction
	UnKnown	Striking		None	NorthEast
	Type of Unit	Point of Impact	Most Damaged Area	Vehicle Defect	
	Train	Left Side	Left Side		
	Pre-Crash Actions	Striking Vehicle O/U	Contributing Circumstances	First Harmful Event	Most Harmful Event
	Movements Essentially Straight Ahead	No Underride or Override	None	1	1
	Traffic Control	Sequence of Events 1	Sequence of Events 2	Sequence of Events 3	Sequence of Events 4
	No Controls	Motor Vehicle in Transport	Unknown	Unknown	Unknown
	Company (From Shipping Papers)	Company Phone	US DOT	ICC MC	PUCO
	Address	City	State	Zip	
	Trailer LP St.	Trailer LP Year	Trailer LP #	Placard #	# DIA.
	Cargo Body Type	CDL Class	Weight (GVWR)	Haz Material Placard	Haz Material Release
	Not Applicable			Unknown	Not Applicable

## Person Information

Unit # 1	First	Middle	Last	Type
	Address	City	State	Zip
	Date of Birth	Age	Sex	Home Phone #
	#Error			
	DL State	DL #	Offense Charged	Injured Taken By
	Seating Position	Ejection	Offense Description	Air Bag
	Condition	Trapped	Safety Equipment	Injuries
	Alcohol Test Status	Alcohol/Drug Suspected	Alcohol Test Type	Alcohol Test Result
	Drug Test Status	Drug Test Type	Drug Test Result 1	Drug Test Result 2

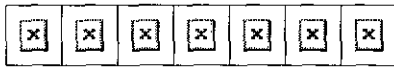


# Driver Information

Unit # 2	Owner First	Owner Middle	Owner Last	LP State	LP #
			UNKNOWN	NS	
	Owner Address	Owner City	Owner State	Owner Zip	Owner Phone #
	UNKNOWN				
	Year	Make	Model	Color	VIN
		UNK	UNK		
	Insurance Company	In Emergency Response	Speed Detected	Speed	Posted Speed
	UNKNOWN	Unknown			55
	Non-Motorist Location	Action	Towing Service	Damage Scale	Direction
	Unknown	Struck		Non Functional Damage	SouthWest
	Type of Unit	Point of Impact	Most Damaged Area	Vehicle Defect	
	Minivan	Left Rear	Left Rear		
	Pre-Crash Actions	Striking Vehicle O/U	Contributing Circumstances	First Harmful Event	Most Harmful Event
	Movements Essentially Straight Ahead	Unknown	Failure to Yield	1	1
	Traffic Control	Sequence of Events 1	Sequence of Events 2	Sequence of Events 3	Sequence of Events 4
	Railroad Crossbucks	Railway Vehicle	Unknown	Unknown	Unknown
	Company (From Shipping Papers)	Company Phone	US DOT	ICC MC	PUCO
	Address	City	State	Zip	
	Trailer LP St.	Trailer LP Year	Trailer LP #	Placard #	# DIA.
	Cargo Body Type	CDL Class	Weight (GVWR)	Haz Material Placard	Haz Material Release
	Not Applicable			Unknown	Not Applicable

# People Information

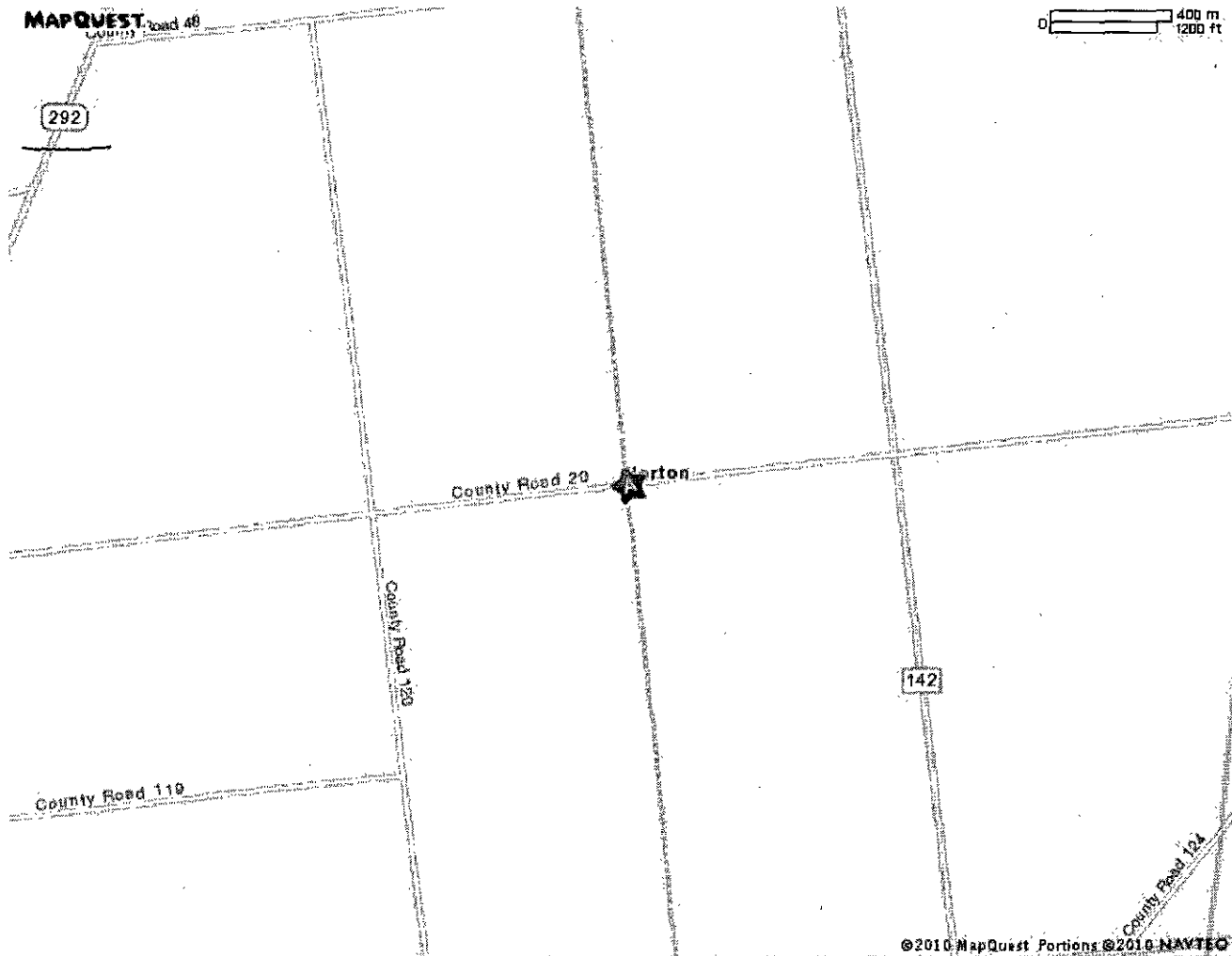
Unit # 2	First	Middle	Last	Type
	Address	City	State	Zip
	Date of Birth	Age	Sex	Home Phone #
	#Error			
	DL State	DL #	Offense Charged	Injured Taken By
				Transported By
	Seating Position	Ejection	Offense Description	Air Bag
				Citation #
	Condition	Trapped	Safety Equipment	Injuries
				Air Bag Switch
	Alcohol Test Status	Alcohol/Drug Suspected	Alcohol Test Type	Alcohol Test Result
	Drug Test Status	Drug Test Type	Drug Test Result 1	Drug Test Result 2

**MAPQUEST.**

Sorry! When printing directly from the browser your directions or map may not print correctly. For best results, try clicking the Printer-Friendly button.

★ Latitude: 40.4531295  
Longitude: -83.5547822  
West Mansfield, OH 43358

LOGAN-PSK CR 20 5137896



Directions and maps are informational only. We make no warranties on the accuracy of their content, road conditions or route usability or expeditiousness. You assume all risk of use. MapQuest and its suppliers shall not be liable to you for any loss or delay resulting from your use of MapQuest.

33 TO E. LIBERTY -  
PICK UP SR 292 NORTH

~~8:30 AM~~

830 AM

5/4



## Diagnostic Review Team Survey

Date: 4/29/10 9 AM

### Location Data

Street or Road Name:

OAKLAND AVE

Route/Road Number (i.e.

(include SLM if State or US route)

AAR-DOT

No.:

151917K

County:

FAYETTE

Township:

City: (In  
or Near)

WASHINGTON COURT HOUSE

Railroad

Name:

INOH

Railroad

Division:

LOUISVILLE

Branch/Line

Name:

MIDLAND

Nearest RR

Timetable Station:

WASH CH

RR Milepost:

BR 76.85

### On-Site Review Team

(Include: Name - Organization - Phone Number)

1. GEORGE MARTIN PUCO 614-752-9107
2. Mike Finkum IOWA Signal Dept 513-739-3041
3. BIFF KONRAD FORY 513-505-3155
4. Timothy Mitchel City WCH 740-636-2380
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

### Existing Traffic Control Devices

Type of Warning Devices	Installed?		Quantity/Comments
Advance Warning Signs	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	① N BOUND
'Stop' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
'Stop Ahead' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Pavement Markings	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	① N BOUND
Crossbucks	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Number of Tracks Signs	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2
Inventory Tags	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2
Interconnected Highway Traffic Signal	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Mast-Mounted Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Cantilever Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number: Length:
Side Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Automatic Gates	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number: Length:
Bells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Sidewalk Gate Arms	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
'No Turn' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Illumination	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	ON
Is crossing flagged by train crew?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**Safety Data (Obtain crash reports, if possible, prior to review)**

	Initial Information (from database)	Revised
Number & dates of crashes in previous 5 years	1 1/11/10	
Hazard Ranking 20	Date Run: 4/15/10	19 5/6/10

**Railroad Data**

Railroad Characteristics	Initial Information (from database)	Revised
Total trains per day	19	
< 1 per day		
Day thru trains	2	
Night thru trains	2	
Daytime switching movements	8	
Nighttime switching movements	7	
Total number of tracks	3	
Number of main tracks	2	
Number of other tracks	1	
Maximum train speed	40	
Typical train speed		
Amtrak	NO	

If non-gated crossing, is clearing sight distance adequate in all quadrants? (See Table 1) ☒ Yes ☐ No

If multiple tracks, can two trains occupy crossing at the same time? ☒ Yes ☐ No

Can one train block the motorists' view of another train at crossing? ☒ Yes (Explain below) ☐ No

Are there other track(s) crossing this same roadway within 100 ft of this crossing? ☒ Yes ☐ No

If yes, Crossing DOT #(if different) \_\_\_\_\_

If yes, distance \_\_\_\_\_ (take measurement between track centerlines at closest point along roadway)

**Roadway Data**

Local Highway Authority:  
(Who maintains this roadway?)

CITY OF WASHINGTON COURT HOUSE

Roadway Characteristics	Initial Information (from database)	Revised
Average daily traffic	3026 (2004)	3200 (2010)
Highway paved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Roadway Surface: <input checked="" type="checkbox"/> Blacktop <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____		
Roadway width: 20 ft.		
Number of highway lanes	2	2
Urban or Rural?	URBAN	URBAN
Vehicle Speed: 25 MPH		
School Bus Operation: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes 50 Amount		
Hazardous Materials Trucks: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes VERY FEW Amount		
Shoulders: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Is the shoulder surfaced? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Is there existing guardrail along roadway in crossing vicinity? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Is stopping site distance adequate? (See Table 2) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, deficient approach(es) _____		

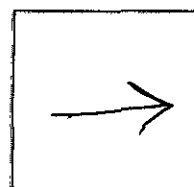
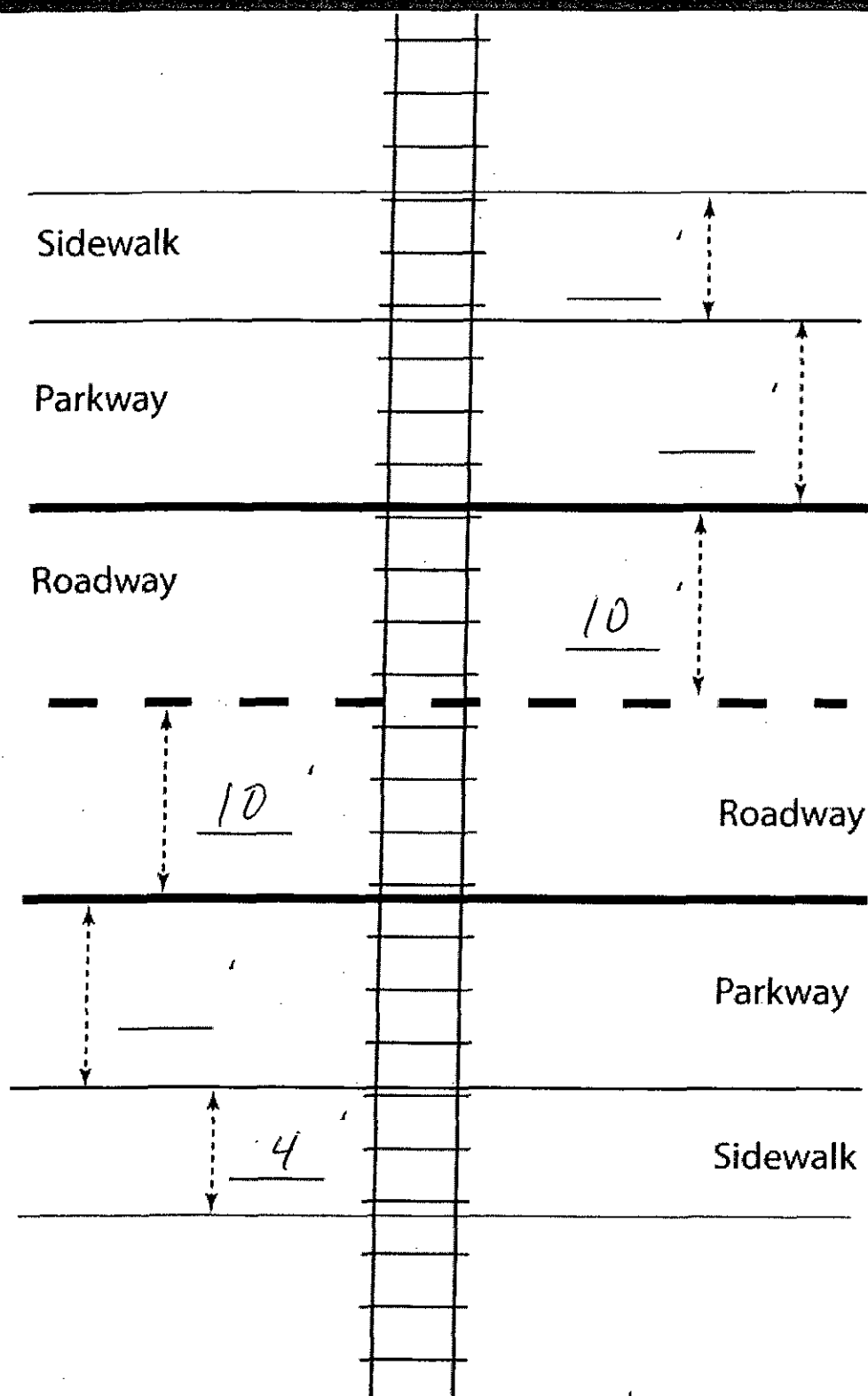
Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input type="checkbox"/> Non-functional (Curb height = Less than 4") <input checked="" type="checkbox"/> None	Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input type="checkbox"/> Non-functional (Curb height = Less than 4") <input checked="" type="checkbox"/> None
Pedestrians: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Is sidewalk present? <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Is there a nearby intersection that could cause queuing over the crossing? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, Distance _____	
Is this intersection signalized? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Are the signals currently interconnected with the existing crossing warning devices? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Is it the consensus of the Diagnostic Review Team that this is a potential closure project? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Explain reasons:	

Type of Development	
<input type="checkbox"/> Open Space <input type="checkbox"/> Institutional <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential	Location of nearby schools: <div style="text-align: center; font-size: 1.2em;">AT CROSSING</div>

Utility Information	
Is commercial power available? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Utility Provider (Company Name) <u>DP&amp;L</u>	Phone Number _____
Nearest Available Power Source <u>AT XING</u>	
What other utilities are present? <u>GAS &amp; WATER</u>	
Is there potential utility conflict(s) <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown	

Diagnostic Team Recommendations	
	Quadrants Needed
<input checked="" type="checkbox"/> Install/upgrade active devices	
<input type="checkbox"/> Automatic Flashing Lights (AFLS)	
<input type="checkbox"/> AFLS / Cants	
<input checked="" type="checkbox"/> AFLS / Gates	
<input type="checkbox"/> AFLS / Gates / Cants	
<input type="checkbox"/> Upgrade circuitry	POSSIBLY PEDESTRIAN GATES
<input type="checkbox"/> Sidelights	
<input type="checkbox"/> Guardrail Needed	
<input type="checkbox"/> Install/Replace curb	
<input type="checkbox"/> Other (define)	
Comments: <u>WCH MAY INSTALL SIDEWALKS</u> <u>POSSIBLY BOTH SIDES OF CROSSING.</u>	
<input type="checkbox"/> Install/upgrade traffic signal preemption	
<input type="checkbox"/> No improvements needed	
<input type="checkbox"/> Other (define)	

# Field Dimensions

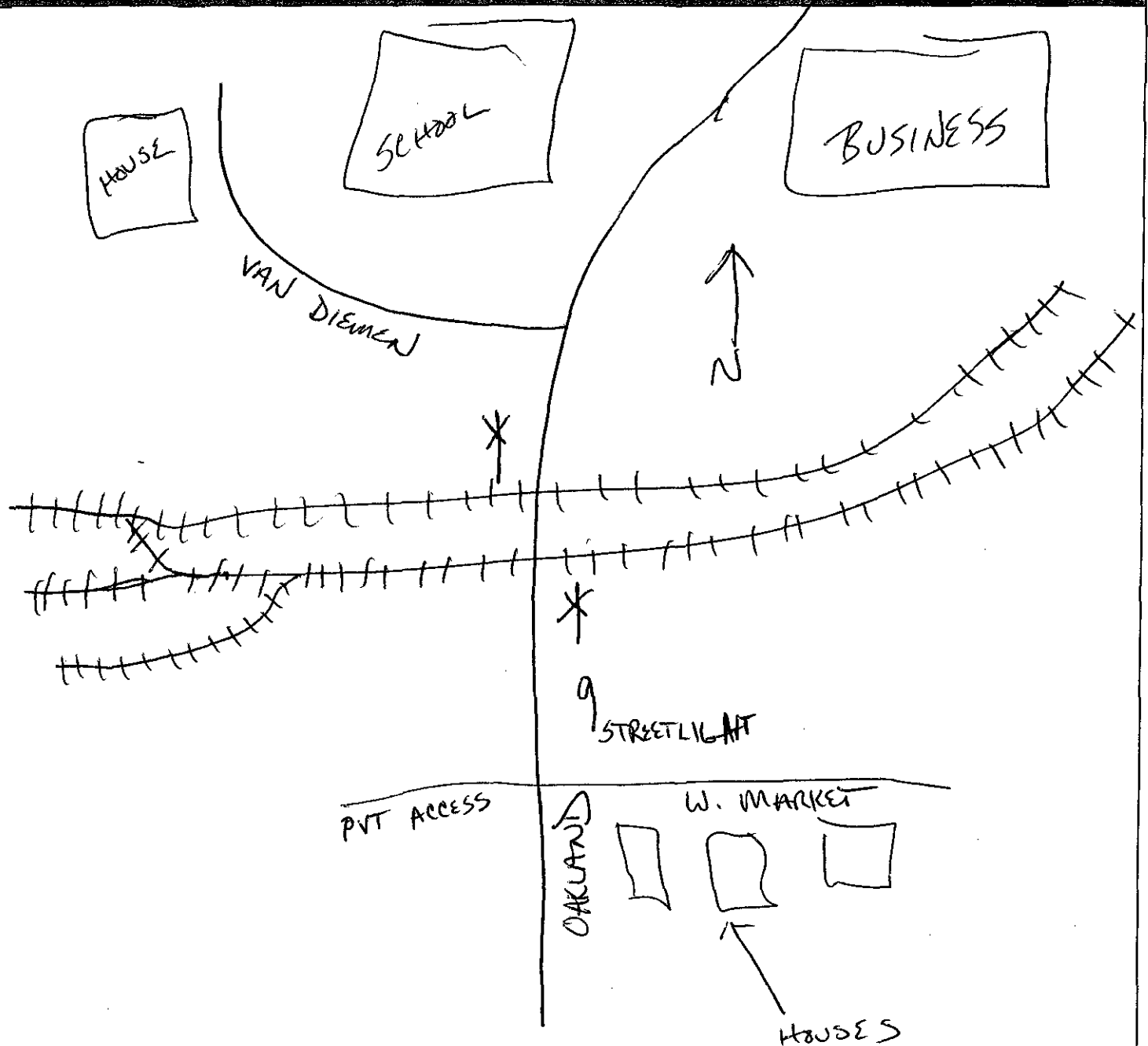


Show North  
Direction

Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in NW Quadrant?

Measurements by: Gm

# Field Sketch



Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in NW Quadrant?

Sketch by: Gm

TABLE 1

## Clearing Sight Distances

Maximum Authorized Train Speed	Distance (dT) Along Railroad from Crossing (ft)
1 - 10	240
15	360
20	480
25	600
30	720
35	840
40	960
45	1080
50	1200
55	1320
60	1440
65	1560
70	1680
75	1800
80	1920
85	2040
90	2160

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers and level single track 90 degree crossings; and may need to be adjusted for multiple tracks, skewed crossings or approaches on grades.

Clearing Sight Distance is to be measured in each vehicle travel direction at non-gated crossings as viewed from a point 25 feet from centerline of nearest track in the center of whichever travel lane is nearest the direction along track being measured.

Table 2

## Stopping Sight Distances

Highway Vehicle Speed	Distance (dH) Along Roadway from Crossing (ft)
0	n/a
5	50
10	70
15	105
20	135
25	180
30	225
35	280
40	340
45	410
50	490
55	570
60	660
65	760
70	865

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers on dry level pavements.

Stopping Sight Distance is to be measured on each roadway approach to crossing from stop bar.



I&O, FAYETTE, OAKLAND AVE, 151917K

OHIO

# TRAFFIC CRASH REPORT

OH-1 (Rev. 10/88)

Local Report # \*

2010-13

Crash Severity

2 1 Fatal 3 PDO  
2 Injury 4 Unknown

Private Property

X If Yes

Hit / Skip

1 1 Not Hit / Skip  
2 Solved  
3 Unsolved

Photos Taken

X If Yes

OH-2

OH-3

OH-1P

OTHER

X

X

X

X

N.C.I.C. # \*

02401

Reporting Agency \*

Washington C H Police Department

# Units

02

Unit Error

01 98 = Animal  
99 = Unknown

Date of Crash \*

01112010

Time of Crash

0905

Day of Week

MON

City \*

X

Village \*

TWP \*

Name (Of City, Village or Township) \*

Washington Court House

County # \*

24

Latitude

Longitude

CRASH OCCURRED ON

Prefix Crash Location

W Oakland

Type Loc

1

Type Location Point Used

1 Named Street 3 Numbered Route  
2 Numbered Street

LOCAL INFORMATION

AT / REFERENCE

Dist Reference DR Prefix Reference

S 276

Ref Point

04

Reference Point Used

01 State Line  
02 Intersection 2 Streets  
03 County Line

04 House Number

05 Township Boundary  
06 Mile Post  
07 Corporation Limit

08 Place Name W/O Reference

09 Driveway  
10 Street or Route W/O Reference

Unit #

A 01

# of Occ.

01

Name (Last, First, Middle)

Williams Kevin C

Address (Street, City, State, Zip Code)

822 Lakeview Ave

Washington C H OH 43160

Social Security Number

Date of Birth

04021966

Age

43

Sex

M

Home Phone #

(740) 333-1501

Work Phone #

DL State

OH

DL #

RQ533384

LP State

OH

LP #

DBB4647

Injured Taken By

2

1 None  
2 EMS  
3 Police

4 Other  
5 Unknown

Transported By

Fayette County Life Squad

Injured Taken To

Fayette County Memorial E.

Owner Name (If same, write "SAME")

Cook Gail

Address (Street, City, State, Zip Code)

822 Lakeview Av

Washington C H OH 43160

Year

1999

Make

DODG

Model

DAK

Color

DBL

Insurance Company

Towing Service

3-C Towing 572-14

Owner Phone #

(740) 333-1501

Offense Charged

72.039

Offense Description

Drive Across Grade Crossing

Citation #

WPD48495

Local Code? 'X' If Yes

X

Unit #

B 02

# of Occ.

01

Name (Last, First, Middle)

Address (Street, City, State, Zip Code)

Social Security Number

Date of Birth

Age

Sex

Home Phone #

Work Phone #

DL State

DL #

LP State

LP #

4030

Injured Taken By

1 None  
2 EMS  
3 Police

4 Other  
5 Unknown

Transported By

Injured Taken To

Owner Name (If same, write "SAME")

Indiana & Ohio Railroad

Address (Street, City, State, Zip Code)

222 W Paint St

Washington C H OH 43160

Year

1972

Make

Model

Color

LGR/BLK

Insurance Company

Towing Service

Owner Phone #

(800) 979-4958

Offense Charged

Offense Description

Citation #

Local Code? 'X' If Yes

Unit #

C 02

# of Occ.

Name (Last, First, Middle)

Fogle John III

Home Phone #

(937) 783-1405

Date of Birth

Age

Sex

M

Address (Street, City, State, Zip Code)

795 S Broadway St

Blanchester Oh 45107

Injured Taken By

1 None 4 Other  
2 EMS 5 Unknown  
3 Police

Transported By

Injured Taken To

Unit #

D

# of Occ.

Name (Last, First, Middle)

Home Phone #

Date of Birth

Age

Sex

Address (Street, City, State, Zip Code)

Injured Taken By

1 None 4 Other  
2 EMS 5 Unknown  
3 Police

Transported By

Injured Taken To

01

Seating Position  
01 Front - Left (MC Driver)  
02 Front - Middle  
03 Front - Right  
04 Second - Left (MC Pass)  
05 Second - Middle  
06 Second - Right  
07 Third - Left  
08 Third - Middle  
09 Third - Right  
10 Sleeper Section Of Cab  
11 Enclosed Cargo Area  
12 Unenclosed Cargo Area  
13 Trailing Unit  
14 Exterior  
15 Other  
16 Non-Motorist  
17 Unknown

04

Safety Equipment  
Motorist  
01 None Used  
02 Shoulder Belt Only  
03 Lap Belt Only  
04 Shoulder /Lap Belt  
05 Child Safety Seat  
06 MC Helmet Used  
07 Use Unknown  
Non-Motorist  
08 Non Used  
09 Helmet Used  
10 Protective Pads  
11 Reflective Clothing  
12 Lighting  
13 Other  
14 Unknown

1

Air Bag  
1 Not Deployed  
2 Deployed-Front  
3 Deployed-Side  
4 Deployed Both Front/Side  
5 Not Applicable  
6 Unknown

1

Air Bag Switch  
1 Not Present  
2 In On Position  
3 In Off Position  
4 Unknown

1

Ejection  
1 Not Ejected  
2 Totally Ejected  
3 Partially Ejected  
4 Not Applicable  
5 Unknown

2

Trapped  
1 Not Trapped  
2 Extricated By Mechanical Means  
3 Freed BY Non-Mechanical Means  
4 Unknown

3

Injuries  
1 No Injury  
2 Possible  
3 Non-Incapacitating  
4 Incapacitating  
5 Fatal Injury  
6 Unknown

Supplement \*  
'X' If Yes

<b>Unit Numbers</b> <div>01 02</div> <b>Non-Motorist Location</b> <div> <div> <div></div> <div></div> </div> <div> <div></div> <div></div> </div> </div> 01 Marked Crosswalk At Intersection 02 Intersection/ No Crosswalk 03 Non-Intersection Crosswalk 04 Driveway Access Crosswalk 05 In Roadway 06 Not In Roadway 07 Median (But Not Shoulder) 08 Island 09 Shoulder 10 Sidewalk 11 Within 10 Feet Of Roadway (Not Shoulder, Median, Sidewalk, Island) 12 Beyond 10 Feet Of Roadway (Within Trafficway) 13 Outside Trafficway 14 Shared Use Paths Or Trails 15 Unknown	<b>Damage Area</b> <div> <div> <div>Front</div> <div> <div></div> <div></div> <div></div> </div> </div> <div> <div> <div></div> <div></div> </div> </div> </div> <div> <div> <div>Front</div> <div> <div></div> <div></div> <div></div> </div> </div> <div> <div> <div></div> <div></div> </div> </div> </div> <b>Most Damaged Area</b> <div>08 02</div>	<b>Pre-Crash Actions</b> <div>01 01</div> <b>Motorist</b> 01 Movements Essentially Straight Ahead 02 Backing 03 Changing Lanes 04 Overtaking/Passing 05 Turning Right 06 Turning Left 07 Making U-Turn 08 Entering Traffic Lane 09 Leaving Traffic Lane 10 Parked 11 Slowing/Stopped In Traffic 12 Driverless 13 Other 14 Unknown <b>Non-Motorist</b> 15 Entering/Crossing In Specified Location 16 Walking, Running, Jogging, Playing, Cycling 17 Working 18 Pushing Vehicle 19 Approaching/Leaving Vehicle 20 Playing/Working On Vehicle 21 Standing 22 Other 23 Unknown	<b>Sequence Of Events</b> <div> <div> <div>A</div> <div>16</div> </div> <div> <div>B</div> <div>20</div> </div> </div> <div> <div>2</div> <div>2</div> </div> <div> <div>3</div> <div>3</div> </div> <div> <div>4</div> <div>4</div> </div> <b>Non-Collision</b> 01 Overtum/Rollover 02 Fire/Explosion 03 Immersion 04 Jackknife 05 Cargo/Equipment Loss/Shift 06 Equipment Failure 07 Separation Of Units 08 Ran Off Road Right 09 Ran Off Road Left 10 Cross Median/Centerline 11 Downhill Runaway 12 Other Non-Collision 13 Unknown Non-Collision <b>Collision w/ Person, Vehicle, Or Object Not Fixed</b> 14 Pedestrian 15 Pedalcycle 16 Railway Vehicle 17 Animal - Farm 18 Animal - Deer 19 Animal - Other 20 Motor Vehicle In Transport 21 Parked Motor Vehicle 22 Work Zone Maintenance Equipment 23 Other Movable Object 24 Unknown Movable Object <b>Collision with Fixed Object</b> 25 Impact Attenuator/Crash Cushion 26 Bridge Overhead Structure 27 Bridge Pier Or Abutment 28 Bridge Parapet 29 Bridge Rail 30 Guardrail Face 31 Guardrail End 32 Median Barrier 33 Highway Traffic Sign Post 34 Overhead Sign Post 35 Light/Luminaries Support 36 Utility Pole 37 Other Post, Pole Or Support 38 Culvert 39 Curb 40 Ditch 41 Embankment 42 Fence 43 Mailbox 44 Tree 45 Other Fixed Object 46 Work Zone Maintenance Equipment 47 Unknown Fixed Object 48 Other 49 Unknown	<b>Posted Speed</b> <div>25 10</div> <b>Traffic Control</b> <div>07 01</div> 01 No controls 02 Stop Sign 03 Yield Sign 04 Traffic Signal 05 Traffic Flashers 06 School Zone 07 Railroad Crossbucks 08 Railroad Flashers 09 Railroad Gates 10 Construction Barricade 11 Police Officer 12 Pavement Markings 13 Crosswalk Lines 14 Walk/Don't Walk Signal 15 Traffic Control Device Inoperative, Missing, Obscured 16 Other	<b>Drug Test Status</b> <div>1</div> 1 None 2 Test Refused 3 Test Given, Contaminated Sample/Unusable 4 Test Given, Results Known 5 Test Given, Results Unknown 6 Unknown <b>Drug Test Type</b> <div>1</div> 1 None 2 Blood 3 Urine 4 Other <b>Drug Test 1&amp;2 Result</b> <div> <div>1</div> <div>2</div> </div> 1 None 2 Marijuana 3 Cocaine 4 Opiates 5 Amphetamines 6 PCP 7 Other 8 Unknown at Time Of Reporting
<b>Type Of Unit</b> <div>07 29</div> <b>Motorist</b> 01 Sub-Compact 02 Compact 03 Mid Size 04 Full Size 05 Minivan 06 Sport Utility Vehicle 07 Pickup 08 Panel/Van 09 Single Unit Truck; 2 Axles, 6 Tires 10 Single Unit Truck; 3+ Axles 11 Truck/Trailer 12 Truck Tractor (Bobtail) 13 Tractor/Semi-Trailer 14 Tractor/Double Short 15 Tractor/Double Long 16 Fifth Wheel Or Converter Dolly 17 Tractor/Triples 18 Motorcycle 19 Motorized Bicycle 20 School Bus 21 Church Bus 22 Public Bus 23 Other Bus 24 Police Vehicle 25 Fire Truck 26 Ambulance/Rescue 27 Taxi 28 Motor Home 29 Train 30 Farm Vehicle 31 Farm Equipment 32 Snowmobile 33 Construction Equipment 34 All Others <b>Non-Motorist</b> 35 Animal W/Rider 36 Animal W/Buggy 37 Bicycle 38 Pedestrian 39 Pedalcyclist 40 Skater 41 Other-Non Motorist 42 Unknown	<b>Contributing Circumstances</b> <div>02 01</div> <b>Motorist</b> 01 None 02 Failure To Yield 03 Ran Red Light, Or Stop Sign 04 Exceeded Speed Limit 05 Unsafe Speed 06 Improper Turn 07 Left Of Center 08 Followed Too Closely/ACDA 09 Improper Lane Change/ Drove Off Road/ Improper Passing 10 Improper Backing 11 Improper Start From Parked Position 12 Stopped or Parked Illegally 13 Operating Vehicle In Erratic, Reckless, Careless, Negligent or Aggressive Manner 14 Swerving to Avoid (Due to Wind, Slippery Surface, Vehicle, Object, Non-Motorist In Roadway, Etc) 15 Failure To Control 16 Vision Obstruction 17 Driver Inattention 18 Fatigue/Asleep 19 Operating Defective Equipment 20 Load Shifting/Falling/Spilling 21 Other Improper Action 22 Unknown <b>Non-Motorist</b> 23 None 24 Improper Crossing 25 Daring 26 Lying And/Or Illegally In Roadway 27 Failure To Yield Right Of Way 28 Not Visible (Dark Clothing) 29 Inattentive 30 Failure to Obey Traffic Signs, Signals, Or Officer 31 Wrong Side Of The Road 32 Other 33 Unknown	<b>Point Of Impact</b> <div>04 02</div> 01 None 02 Center Front 03 Right Front 04 Right Side 05 Right Rear 06 Rear Center 07 Left Rear 08 Left Side 09 Left Front 10 Top And Windows 11 Undercarriage 12 Load / Trailer 13 Total (All Areas) 14 Other 15 Unknown	<b>Direction</b> <div> <div>From To</div> <div>21 34</div> </div> 1 North 2 South 3 East 4 West 5 Northeast 6 Northwest 7 Southeast 8 Southwest 9 Unknown <b>Condition</b> <div>1</div> 1 Apparently Normal 2 Physical Impairment 3 Emotional 4 Illness 5 Fell Asleep, Fainted, Fatigued, Etc. 6 Under The Influence Of Medications/Drugs/Alcohol 7 Other 8 Unknown <b>Alcohol/Drug Suspected</b> <div>1</div> 1 None 2 Yes-Alcohol Suspected 3 Yes-HBD Not Impaired 4 Yes-Drugs Suspected 5 Yes-Alcohol / Drugs Suspected 6 Unknown	<b>Type Of Intersection</b> <div>11</div> 01 Not An Intersection 02 Four-Way Intersection 03 T-Intersection 04 Y-Intersection 05 Traffic Circle/Roundabout 06 Five-Point, Or More 07 On Ramp 08 Off Ramp 09 Crossover 10 Driveway/Access 11 Railway Grade Crossing 12 Shared-Use Paths Or Trails 13 Unknown <b>Occurrence</b> <div>1</div> 1 On Roadway 2 On Shoulder 3 In Median 4 On Roadside 5 On Gore 6 Outside Trafficway 7 Unknown	
<b>In Emergency Response</b> <div> <div>A</div> <div>B</div> </div> 1 No 2 Yes 3 Unknown <b>Damage Scale</b> <div>5 2</div> 1 None 2 Non-Functional Damage 3 Functional Damage 4 Disabling Damage 5 Severe 6 Unknown	<b>Action</b> <div>4 3</div> 1 Non-Contact 2 Non-Collision 3 Striking 4 Struck 5 Both Striking And Struck 6 Unknown <b>Striking Vehicle:</b> <b>Override/ Underride</b> <div> <div>A</div> <div>1</div> </div> 1 No Underride Or Override 2 Underride, Compartment Intrusion 3 Underride, No Compartment Intrusion 4 Underride, Compartment Intrusion Unknown 5 Override, Motor Vehicle In Transport 6 Override, Other Vehicle 7 Unknown	<b>Vehicle Defect</b> <b>Code Only If '19' Selected Above</b> <div> <div>A</div> <div>B</div> </div> 01 Turn Signals 02 Head Lamps 03 Tail Lamps 04 Brakes 05 Steering 06 Tire Blowout 07 Worn Or Slick Tires 08 Trailer Equipment Defective 09 Motor Trouble 10 Disabled From Prior Crash 11 Other Defects	<b>First Harmful Event</b> <div>1 1</div> Of the Sequence of Events - Which one is the First Harmful Event (1-4) <b>Most Harmful Event</b> <div>1 1</div> Of the Sequence of Events - Which One is the Most Harmful event (1-4) <b>Speed Detected</b> <div>2 1</div> 1 Stated 2 Estimated Speed <b>Speed</b> <div>10 8</div>	<b>Alcohol Test Status</b> <div>1</div> 1 None 2 Test Refused 3 Test Given, Contaminated Sample/Unusable 4 Test Given, Results Known 5 Test Given, Results Unknown 6 Unknown <b>Alcohol Test Type</b> <div>1</div> 1 None 2 Blood 3 Urine 4 Breath 5 Other <b>Alcohol Test Result</b> <div> <div>A</div> <div>B</div> </div>	<b>Road Contour</b> <div>2</div> 1 Straight Level 2 Straight Grade 3 Curve Level 4 Curve Grade <b>Road Conditions</b> <div>02</div> <b>Primary</b> 01 Dry 02 Wet 03 Snow 04 Ice 05 Sand, Mud, Dirt, Oil, Gravel 06 Water (Standing, Moving) 07 Slush 08 Debris** 09 Rut, Holes, Bumps, Uneven Pavement ** 10 Other 11 Unknown <b>Secondary</b> <b>** Secondary Road Conditions ONLY</b>

## Narrative

Unit #1 was traveling northbound on W. Oakland Ave. at the railroad crossing in the 200 block. Unit #2 was traveling westbound on the railroad tracks approaching Oakland Ave. when unit #1 proceeded to crossing the railroad tracks. Unit #2 struck unit #1 in the passenger side eventually stopping approximately 100 feet west of the Oakland Ave. crossing.

Witness heard the audible horn of the train prior to the collision.

Unit #2  
Engine 4030  
E.M.D., GP 40

### Manner Of Collision or Impact

**6**

- 1 Not Collision Between Two Vehicles In Transport
- 2 Rear-end
- 3 Head-on
- 4 Rear-To-Rear
- 5 Backing
- 6 Angle
- 7 Sideswipe, Same Direction
- 8 Sideswipe, Opposite Direction
- 9 Unknown

### Weather

**02**

- 01 Clear
- 02 Cloudy
- 03 Fog, Smog, Smoke
- 04 Rain
- 05 Sleet, Hail (Freezing Rain Drizzle)
- 06 Snow
- 07 Severe Crosswinds
- 08 Blowing Sand, Soil, Silt, Snow
- 09 Other
- 10 Unknown

### Light Conditions

Primary Secondary

**1**

- 1 Daylight
- 2 Dawn
- 3 Dusk
- 4 Dark - Lighted Roadway
- 5 Dark - Not Lighted
- 6 Dark - Unknown Lighting
- 7 Glare
- 8 Other
- 9 Unknown

### School Bus Related

**1**

- 1 No
- 2 Yes, Directly Involved
- 3 Yes, Indirectly Involved
- 4 Unknown

### Work Zone Related

**1**

- 1 No
- 2 Yes
- 3 Unknown

### Type of Work Zone

**1**

- 1 Lane Closure
- 2 Lane Shift/Crossover
- 3 Work On Shoulder Or Median
- 4 Intermittent/Moving Work
- 5 Other

### Location Of Crash In

**1**

- 1 Before First Work Zone Warning Sign
- 2 Advance Warning Area
- 3 Transition Area
- 4 Activity Area

### Workers Present

**1**

- 1 No
- 2 Yes
- 3 Unknown

## Diagram



Write an "N" on the compass diagram to indicate the direction of north.

## Truck/Bus

The Crash INVOLVED one or more of the following:

- A truck (motor vehicle) with a GVWR more than 10,000 pounds; or
- A truck (motor vehicle) with a hazardous materials placard; or
- A bus designed for at least 8 persons, including driver.

Company (From Shipping Papers)

Address (Street, City, St, Zip Code)

AND

The crash RESULTED in one or more of the following:

- A fatality; or
- An injury requiring transportation for immediate medical treatment; or
- At least one vehicle was towed due to disabling damage or required intervening assistance before proceeding under its own power.

Company Phone

Unit #

US DOT

ICC MC

PUCO

Trailer LP St.

Trailer LP Year

Trailer LP #

Placard #

# Dia.

### Cargo Body Type

**01**

- 01 Not Applicable
- 02 Bus (8-15) Including Driver
- 03 Van/Enclosed Box
- 04 Grain/Chips/Gravel
- 05 Pole
- 06 Cargo Tan
- 07 Flatbed
- 08 Dump
- 09 Concrete Mixer
- 10 Auto Transporter
- 11 Garbage/Refuse
- 12 Other
- 13 Unknown

### Weight (GVWR)

**1**

- 1 Less/Equal 10,000
- 2 10,001 - 26,000
- 3 More Than 26,000

### CDL Class

**1**

- 1 Class A
- 2 Class B
- 3 Class C
- 4 Class M
- 5 Class D

### Hazardous Materials Placard

**1**

- 1 No
- 2 Yes
- 3 Unknown

### Hazardous Material Released

**1**

- 1 No
- 2 Yes
- 3 Not Applicable
- 4 Unknown

## Police Action

Date Crash Reported

01112010

Time Rec Call

0905

Dispatch

0905

Arrived

0907

Cleared

0930

Other

60

Total Minutes

84

Officer's Name \*

Pfeifer, Matthew

Badge # \*

21

Checked By

Page, David

Date Report Filed \*

01112010

Report Taken By

**1**

- 1 Police Agency
- 2 Motorist

Report Taken At

**1**

- 1 Scene
- 2 Station
- 3 Other

Supplement \*  
X If Yes

Local Report # \*

2010-13

## OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 REV 1/82

LOCAL REPORT NUMBER 2010-13	REPORTING AGENCY Washington C H Police Department	DATE OF ACCIDENT M 01/11/2010 Y
IN COUNTY OF 24-Fayette	ACCIDENT LOCATION W Oakland	

TRAIN INTO A CAR.

OFFICERS SIGNATURE

BADGE NO.



## OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 REV 1/82

LOCAL REPORT NUMBER 2010-13	REPORTING AGENCY Washington C H Police Department	DATE OF ACCIDENT M 01/11/2010 Y
IN COUNTY OF 24-Fayette	ACCIDENT LOCATION W Oakland	

FAILURE TO YIELD TO KEVIN C WILLIAMS, 2010-13

OFFICERS SIGNATURE

BADGE NO.

## OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 REV 1/82

LOCAL REPORT NUMBER	2010-13	REPORTING AGENCY	Washington C H Police Department	DATE OF ACCIDENT	
IN COUNTY OF	24-Fayette	ACCIDENT LOCATION	W Oakland	M	01/11/2010 y

The driver of the vehicle Kevin Williams was transported form the Fayette County E.R. to Grant Hospital for further treatment.  
A citation has not been issued to Mr. Williams in reference to the accident due to his injuries and being transported to Grant Hospital.

OFFICERS SIGNATURE

BADGE NO.

## OHIO TRAFFIC ACCIDENT - DIAGRAM/NARRATIVE CONTINUATION

OH-2 REV 1/82

LOCAL REPORT NUMBER <b>2010-13</b>	REPORTING AGENCY <b>Washington C H Police Department</b>	DATE OF ACCIDENT M. <b>01/11/2010</b> Y.
IN COUNTY OF <b>24-Fayette</b>	ACCIDENT LOCATION <b>W Oakland</b>	

Your Honor,

On 1-11-2010 officers were dispatched to a vehicle accident involving a train at the crossing in the 200 block of Oakland Ave. Upon arrival officers made contact with the drivers of the vehicle, later identified as Kevin Williams. Mr. Williams was unable to advised the reason for the accident due to him being injured and once extradited from his vehicle, transported to the Fayette County E.R. by ambulance.

I made contact with the conductor of the train, James Kehn, who advised he was traveling westbound on the tracks and blew the train horn prior to the crossing Oakland Ave. Mr. Kehn advised he never saw a vehicle. He advised his passenger in the train, John Fogle III said, "got one" in reference to striking the vehicle at which time he stopped the train. Mr. Fogle III advised the same.

A witness, Pete Pierce, advised that he was at his residence at 239 Draper when he heard a train horn then a large crash.

Upon the initial investigation through witnesses and the conductor the train horn was blown and the light was on the front of the train.

On 1-14-2010 I made contact again with Kevin Williams to conclude the investigation. Mr. Williams advised he was traveling northbound on Oakland Ave. approaching the railroad crossing. He advised he did not see or hear a train so he proceeded to cross the tracks at which time he heard the train horn and was struck by the train. Mr. Williams advised there was a large RV parked between the tracks and a storage building that made it hard for him to see down the tracks. Mr. Williams was treated and released from Grant Hospital.

I went to the location of the accident and took photographs of the scene, where the RV was parked in reference to where Mr. Williams was prior to the tracks. The RV was not a deciding factor in the accident. There is a full view of the tracks in both directions at the stop block and prior to the stop block.

On 1-14-2010 Kevin Williams was served his copy of the citation for Driving across grade crossing. Mr. Williams was given his copy of the citation and advised of his court date and time.

Court Date: January 25, 2010

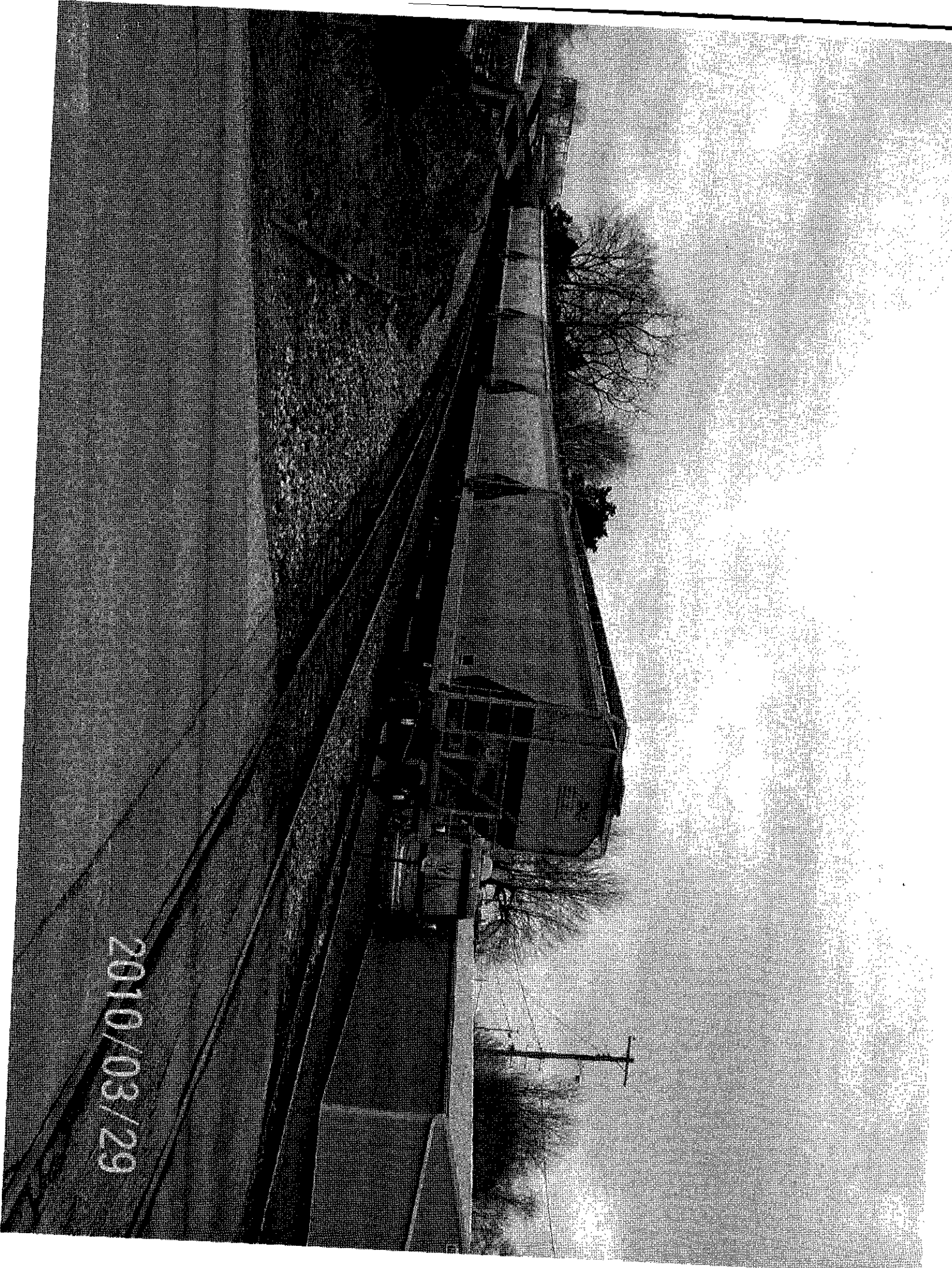
Ptl. M. Pfeifer

OFFICERS SIGNATURE

BADGE NO.



2010/03/29



**CSX**

TRANSPORTATION

TO REPORT STALLED VEHICLE BLOCKING  
CROSSING OR OTHER EMERGENCY

CALL 1-800-232-0144

REFER TO CROSSING

LOCATED AT

151917K

BR 76.85

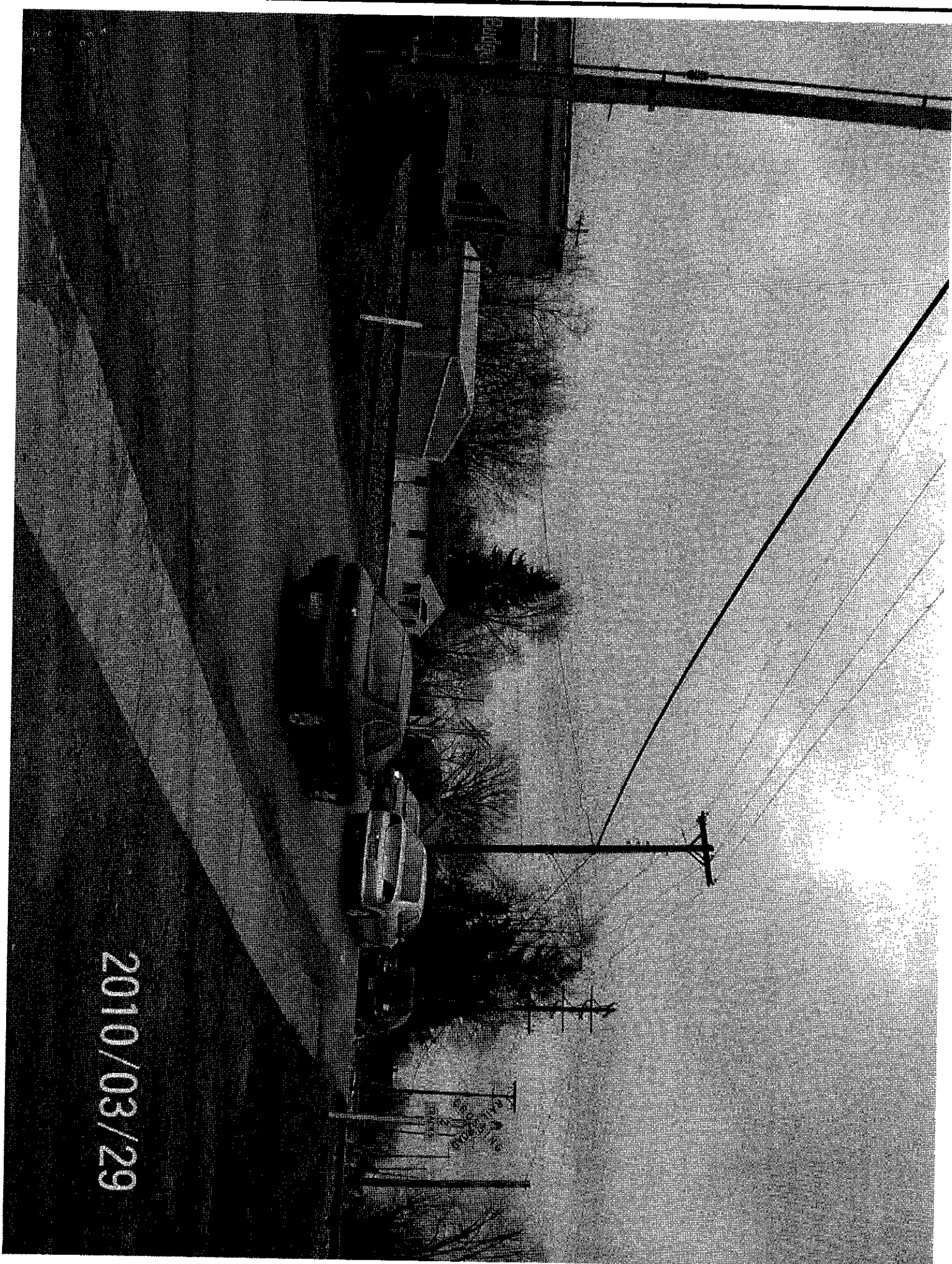
ID NUMBER

MILE POST

2010/03/29



2010/03/29





**MAPQUEST.**

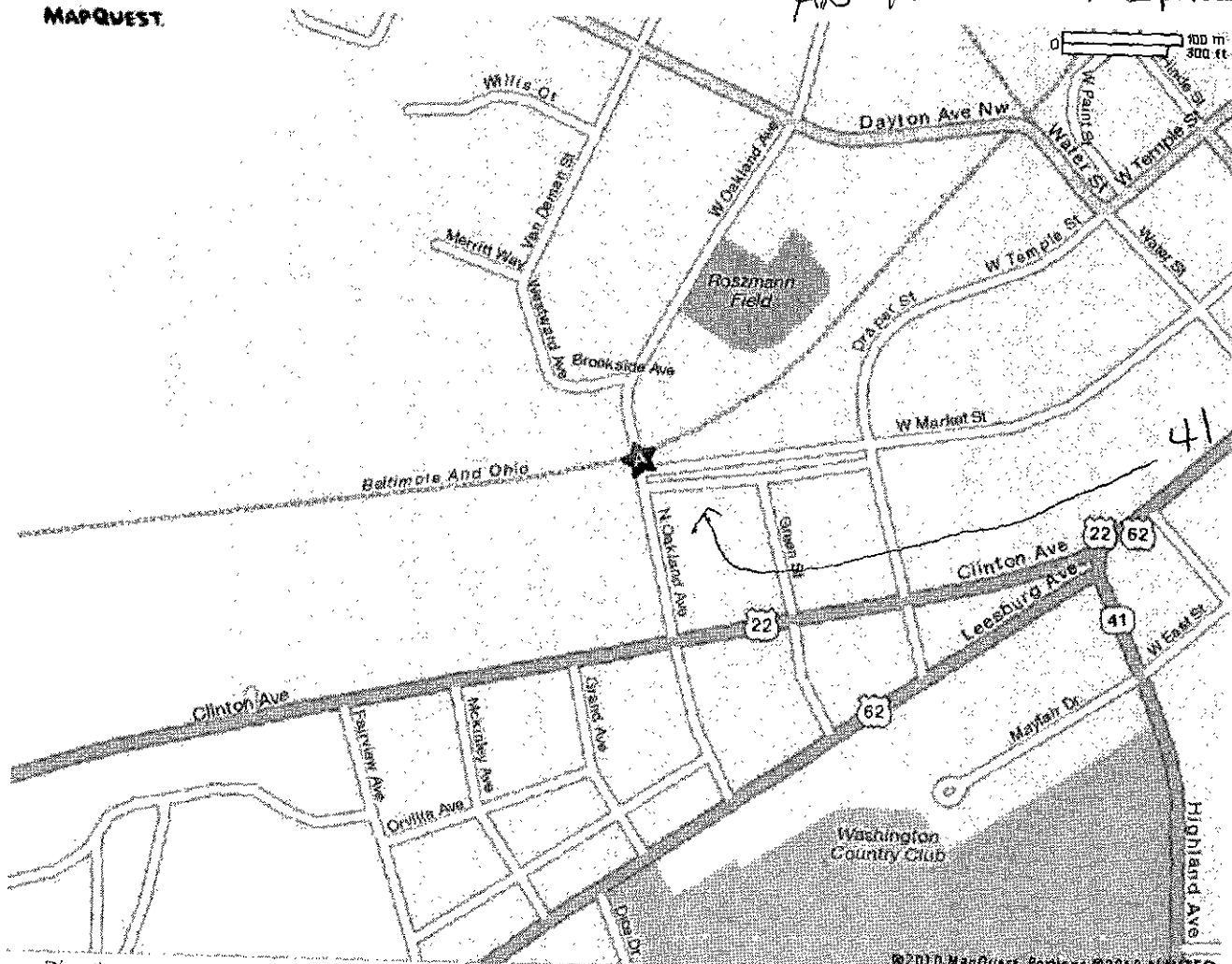
Sorry! When printing directly from the browser your directions or map may not print correctly. For best results, try clicking the Printer-Friendly button.

★ Latitude: 39.5335366  
Longitude: -83.4498315  
Washington Court House, OH 43160

FAYETTE IN OH OAKLAND AVE  
151917K

AN HOUR ~~45 MIN~~

MAPQUEST.



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71 S TO EXIT 69, SR 41  
4/29 9AM

OR  
71 TO 62



## Diagnostic Review Team Survey

Date: 5/5/10 10 AM

Location Data			
Street or Road Name: <u>BUCKLAND-HOLDEN RD / CR 190</u>			
Route/Road Number (i.e. Twp., Co., SR or US) <u>CR 190</u> (include SLM if State or US route)		AAR-DOT No.: <u>258626V</u>	
County: <u>AVGLAIZE</u>	Township:	City: (In or Near) <u>UNIOPOLIS</u>	
Railroad Name: <u>IORY</u>	Railroad Division: <u>DETROIT</u>	Branch/Line Name: <u>FLAT ROCK</u>	
Nearest RR Timetable Station: <u>LIMA</u>		RR Milepost: <u>140.14</u>	

On-Site Review Team			
(Include: Name - Organization - Phone Number)			
1.	<u>GEORGE MARTIN</u>	<u>PUCO</u>	<u>614-752-9107</u>
2.	<u>TIM PERKINS</u>	<u>ORDC</u>	<u>614-644-0284</u>
3.	<u>DOUGLAS REINHART</u>	<u>Augl. Co.</u>	<u>419-739-6520</u>
4.	<u>BIFF KONRAD</u>	<u>IORY</u>	<u>513-505-3155</u>
5.			
6.			
7.			
8.			
9.			
10.			

Existing Traffic Control Devices			
Type of Warning Devices	Installed?		Quantity/Comments
Advance Warning Signs	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<u>2</u>
'Stop' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
'Stop Ahead' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Pavement Markings	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<u>2</u>
Crossbucks	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<u>2 BUCKEYE</u>
Number of Tracks Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Inventory Tags	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<u>2</u>
Interconnected Highway Traffic Signal	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Mast-Mounted Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Cantilever Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number: Length:
Side Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Automatic Gates	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number: Length:
Bells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Sidewalk Gate Arms	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
'No Turn' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Illumination	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Is crossing flagged by train crew?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**Safety Data (Obtain crash reports, if possible, prior to review)**

	Initial Information (from database)	Revised
Number & dates of crashes in previous 5 years	1 3/8/10	
Hazard Ranking 80	Date Run: 4/15/10	97 5/6/10

**Railroad Data**

Railroad Characteristics	Initial Information (from database)	Revised
Total trains per day	6	
< 1 per day		
Day thru trains	3	
Night thru trains	3	
Daytime switching movements		
Nighttime switching movements		
Total number of tracks	1	
Number of main tracks	1	
Number of other tracks		
Maximum train speed	40	25
Typical train speed		
Amtrak		

If non-gated crossing, is clearing sight distance adequate in all quadrants? (See Table 1) ☒ Yes ☐ No

If multiple tracks, can two trains occupy crossing at the same time? ☐ Yes ☒ No

Can one train block the motorists' view of another train at crossing? ☐ Yes (Explain below) ☒ No

Are there other track(s) crossing this same roadway within 100 ft of this crossing? ☐ Yes ☒ No

If yes, Crossing DOT #(if different) \_\_\_\_\_

If yes, distance \_\_\_\_\_ (take measurement between track centerlines at closest point along roadway)

**Roadway Data**

Local Highway Authority:  
(Who maintains this roadway?)

AUGLAIZE COUNTY

Roadway Characteristics	Initial Information (from database)	Revised
Average daily traffic	893 (2008)	SAME 2010
Highway paved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Roadway Surface: <input checked="" type="checkbox"/> Blacktop <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Other _____		
Roadway width: 20 ft.		
Number of highway lanes	2	2
Urban or Rural?	RURAL	RURAL
Vehicle Speed: 55 MPH		
School Bus Operation: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes _____ Amount		
Hazardous Materials Trucks: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes _____ Amount		FERTILIZER & PROPANE
Shoulders: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Is the shoulder surfaced? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Is there existing guardrail along roadway in crossing vicinity? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Is stopping site distance adequate? (See Table 2) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If no, deficient approach(es) _____

Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input type="checkbox"/> Non-functional (Curb height = Less than 4") <input checked="" type="checkbox"/> None	Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input type="checkbox"/> Non-functional (Curb height = Less than 4") <input checked="" type="checkbox"/> None
---	---

Pedestrians: ☒ No ☐ Yes  
 Is sidewalk present? ☒ No ☐ Yes  
 Is there a nearby intersection that could cause queuing over the crossing? ☒ No ☐ Yes  
 If yes,  
 Distance \_\_\_\_\_  
 Is this intersection signalized? ☒ No ☐ Yes  
 Are the signals currently interconnected with the existing crossing warning devices? ☒ No ☐ Yes  
 Is it the consensus of the Diagnostic Review Team that this is a potential closure project? ☒ No ☐ Yes  
 Explain reasons: \_\_\_\_\_

### Type of Development

<input checked="" type="checkbox"/> Open Space <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Residential	<input type="checkbox"/> Institutional <input checked="" type="checkbox"/> Commercial Farm	Location of nearby schools: WITHIN 2 MILES
--	--	---

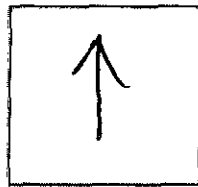
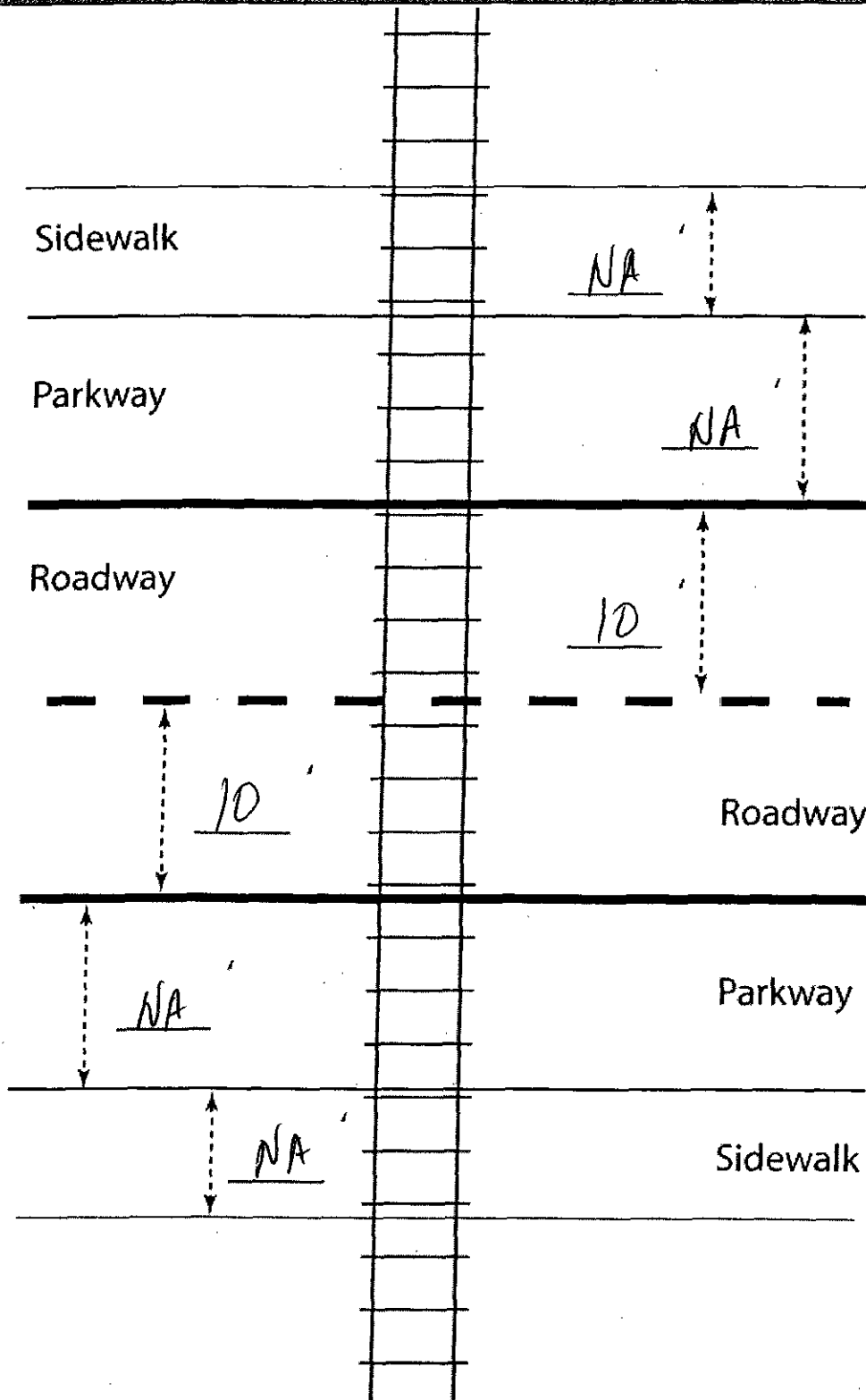
### Utility Information

Is commercial power available? ☐ No ☐ Yes  
 Utility Provider (Company Name) DP&L - PIONEER Phone Number \_\_\_\_\_  
 Nearest Available Power Source SR 65  
 What other utilities are present? PETROLEUM PIPELINE, CABLE, OH LINE  
 Is there potential utility conflict(s) ☐ Yes ☐ No ☒ Unknown

### Diagnostic Team Recommendations

	Quadrants Needed
<input checked="" type="checkbox"/> Install/upgrade active devices	
<input type="checkbox"/> Automatic Flashing Lights (AFLS)	
<input type="checkbox"/> AFLS / Cants	
<input checked="" type="checkbox"/> AFLS / Gates	
<input type="checkbox"/> AFLS / Gates / Cants	
<input type="checkbox"/> Upgrade circuitry	
<input type="checkbox"/> Sidelights	
<input type="checkbox"/> Guardrail Needed	
<input type="checkbox"/> Install/Replace curb	
<input type="checkbox"/> Other (define)	
Comments:	
<input type="checkbox"/> Install/upgrade traffic signal preemption	
<input type="checkbox"/> No improvements needed	
<input type="checkbox"/> Other (define)	

# Field Dimensions



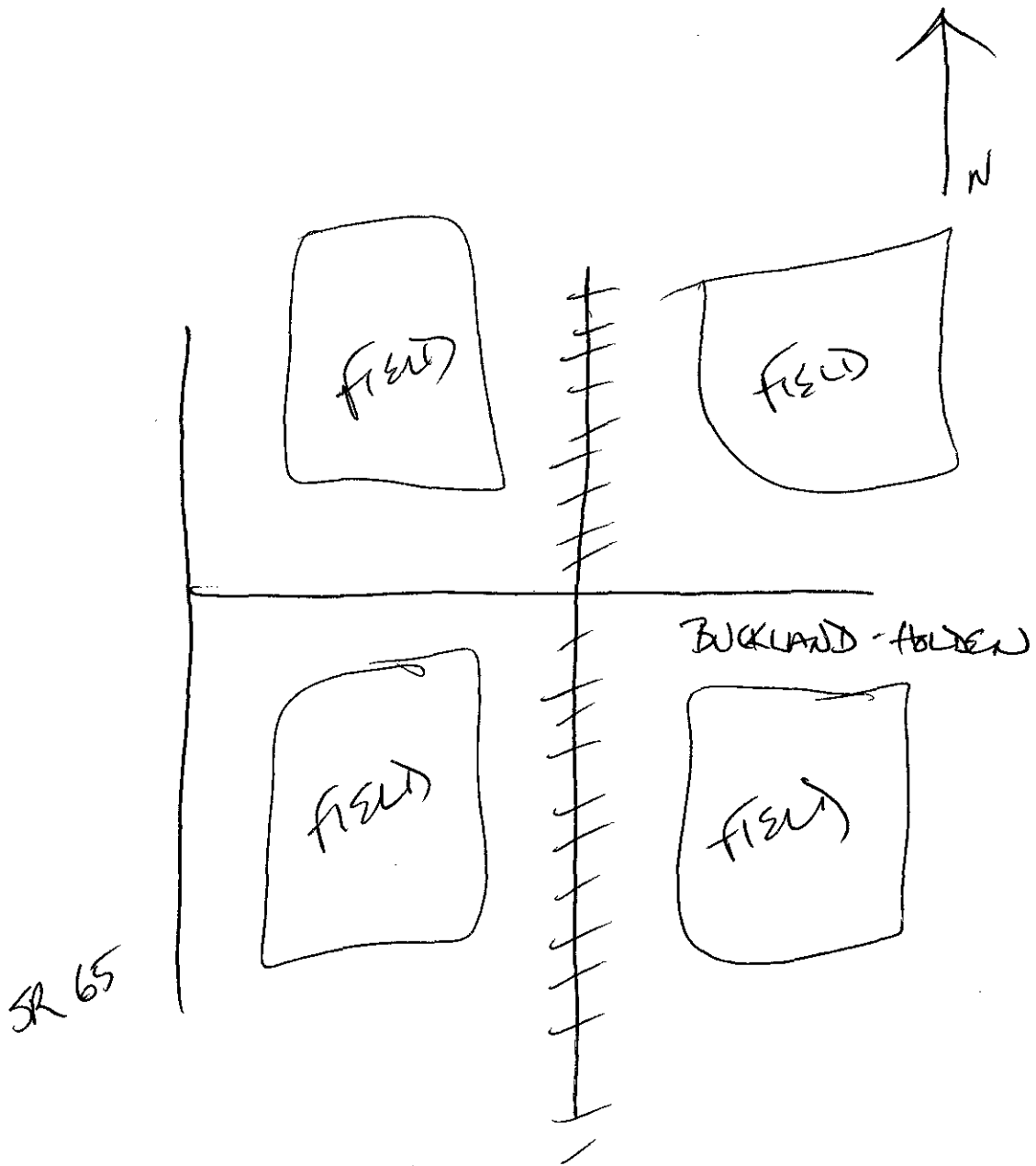
Show North Direction

Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in SW Quadrant?

Measurements by: BM



# Field Sketch



Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in NE Quadrant?

Sketch by: GM

TABLE 1

## Clearing Sight Distances

Maximum Authorized Train Speed	Distance (dT) Along Railroad from Crossing (ft)
1 - 10	240
15	360
20	480
25	600
30	720
35	840
40	960
45	1080
50	1200
55	1320
60	1440
65	1560
70	1680
75	1800
80	1920
85	2040
90	2160

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers and level single track 90 degree crossings; and may need to be adjusted for multiple tracks, skewed crossings or approaches on grades.

Clearing Sight Distance is to be measured in each vehicle travel direction at non-gated crossings as viewed from a point 25 feet from centerline of nearest track in the center of whichever travel lane is nearest the direction along track being measured.

Table 2

## Stopping Sight Distances

Highway Vehicle Speed	Distance (dH) Along Roadway from Crossing (ft)
0	n/a
5	50
10	70
15	105
20	135
25	180
30	225
35	280
40	340
45	410
50	490
55	570
60	660
65	760
70	865

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers on dry level pavements.

Stopping Sight Distance is to be measured on each roadway approach to crossing from stop bar.



# Traffic Crash Report

AVGLAIZE - I&O - BUCKLAND - HOLDEN  
258626V

Local Report # 06-0145-06	Crash Severity Injury	Private Property N	Hit/Skip Not Hit/Skip	Photos Taken Y	NCIC # OHP06
Reporting Agency OHIO STATE HIGHWAY P	# Units 2	Unit Error 1	Date and Time of Crash 3/8/2010 1:45:00 PM		
Day of Week MON	City Village Township Township	Name (of City, Village or Township) Union	County # 6	Latitude 40 37 46.02	Longitude 84 5 5.50
Crash Occurred On			Local Information		
Prefix	Crash Location BUCKLAND HOLDEN		Type Loc Named Street		
At / Reference			Ref Point		
Dist Reference 20	DR E	Prefix	Reference 0065	Intersection 2 Streets	

Type of Intersection Railway Grade Crossing	Occurrence On Roadway	Road Contour Straight Grade	Road Conditions Primary Dry Secondary Unknown	** Secondary Road Conditions ONLY
--	--------------------------	--------------------------------	---	-----------------------------------

Police Action					
Date and Time Crash Reported 3/8/2010 1:49:00 PM	Dispatch 3/8/2010 1:49:00 PM	Arrived 3/8/2010 1:57:00 PM	Cleared 3/8/2010 3:51:00 PM	Other 90	Total Minutes 212
Officer's Name* SCHMENK, MATTHEW	Badge #* 0849	Checked By RALBERS	Date Report Filed* 3/11/2010 12:00:00 AM		
Report Taken By Police Agency	Report Taken At Scene				

Manner of Collision or Impact Angle	Diagram 
School Bus Related No	
Work Zone Related No	
Weather Clear	
Type of Work Zone Workers Present	
Location of Crash in Work Zone	
Light Conditions Primary Daylight Secondary Unknown	

Narrative
UNIT #1 WAS WESTBOUND ON BUCKLAND HOLDEN ROAD. UNIT #2 WAS SOUTHBOUND. UNIT #1 FAILED TO YIELD AT THE TRAIN CROSSING AND DROVE INTO THE PATH OF UNIT #2. UNIT #1 WAS STRUCK IN THE RIGHT REAR AND CAME TO FINAL REST ON THE SOUTHWEST SIDE OF BUCKLAND HOLDEN ROAD.

## Traffic Crash Report

## Unit Information

Unit #	Owner First	Owner Middle	Owner Last	LP State	LP #
1	MICHAEL	R.	THOMPSON	OH	CKU7643
	Owner Address	Owner City	Owner State	Owner Zip	Owner Phone #
	25781 FAIRMONT RD	WAYNESFIELD	OH	45896	5672040819
	Year	Make	Model	Color	VIN
	1997	HOND	ACC		
	Insurance Company	In Emergency Response	Speed Detected	Speed	Posted Speed
	PROGRESSIVE	Unknown	Stated	5	55
	Non-Motorist Location	Action	Towing Service	Damage Scale	Direction
	UnKnown	Struck		Severe	East
	Type of Unit	Point of Impact	Most Damaged Area	Vehicle Defect	
	Compact	Right Rear	Right Rear		
	Pre-Crash Actions	Striking Vehicle O/U	Contributing Circumstances	First Harmful Event	Most Harmful Event
	Movements Essentially Straight Ahead	Unknown	Failure to Yield	1	1
	Traffic Control	Sequence of Events 1	Sequence of Events 2	Sequence of Events 3	Sequence of Events 4
	Railroad Crossbucks	Railway Vehicle	Ran Off Road Left	Unknown	Unknown
	Company (From Shipping Papers)	Company Phone	US DOT	ICC MC	PUCO
	Address	City	State	Zip	
	Trailer LP St.	Trailer LP Year	Trailer LP #	Placard #	# DIA.
	Cargo Body Type	CDL Class	Weight (GVWR)	Haz Material Placard	Haz Material Release
	Not Applicable			Unknown	Not Applicable

## People Information

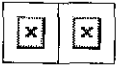
Unit #	First	Middle	Last	Type
1	Michael	R.	Thompson	Driver
	Address	City	State	Zip
	25781 FAIRMONT RD	WAYNESFIELD	OH	45896
	Date of Birth	Age	Sex	Home Phone #
	04/03/1981	28	M	5672040819
	DL State	DL #	Offense Charged	Injured Taken By
	OH	RQ817014	4511.62	None
	Seating Position	Ejection	Offense Description	Air Bag
	Front Left (MC Driver)	Not Ejected	DRIVER'S DUTIES RELA	Deployed Front
	Condition	Trapped	Safety Equipment	Injuries
	Apparently Normal	Not Trapped	None Used	Non-Incapacitating
	Alcohol Test Status	Alcohol/Drug Suspected	Alcohol Test Type	Alcohol Test Result
	None	None	None	
	Drug Test Status	Drug Test Type	Drug Test Result 1	Drug Test Result 2
	None	None	None	None

## Unit Information

Unit # 2	Owner First	Owner Middle	Owner Last	LP State	LP #
			INDIANA&OHIO CENTRAL RAIL	NS	
	Owner Address	Owner City	Owner State	Owner Zip	Owner Phone #
	222 WEST PAINT ST	WASHINGTON COUR	OH	43160	
	Year	Make	Model	Color	VIN
	1976	UNK	UNK		
	Insurance Company	In Emergency Response	Speed Detected	Speed	Posted Speed
	SELF INSURED	Unknown	Stated	25	25
	Non-Motorist Location	Action	Towing Service	Damage Scale	Direction
	UnKnown	Striking		None	North
	Type of Unit	Point of Impact	Most Damaged Area	Vehicle Defect	
	Train	Left Rear	None		
	Pre-Crash Actions	Striking Vehicle O/U	Contributing Circumstances	First Harmful Event	Most Harmful Event
	Movements Essentially Straight Ahead	No Underride or Override	None	1	1
	Traffic Control	Sequence of Events 1	Sequence of Events 2	Sequence of Events 3	Sequence of Events 4
	No Controls	Motor Vehicle in Transport	Unknown	Unknown	Unknown
	Company (From Shipping Papers)	Company Phone	US DOT	ICC MC	PUCO
	Address	City	State	Zip	
	Trailer LP St.	Trailer LP Year	Trailer LP #	Placard #	# DIA.
	Cargo Body Type	CDL Class	Weight (GVWR)	Haz Material Placard	Haz Material Release
	Not Applicable			Unknown	Not Applicable

## People Information

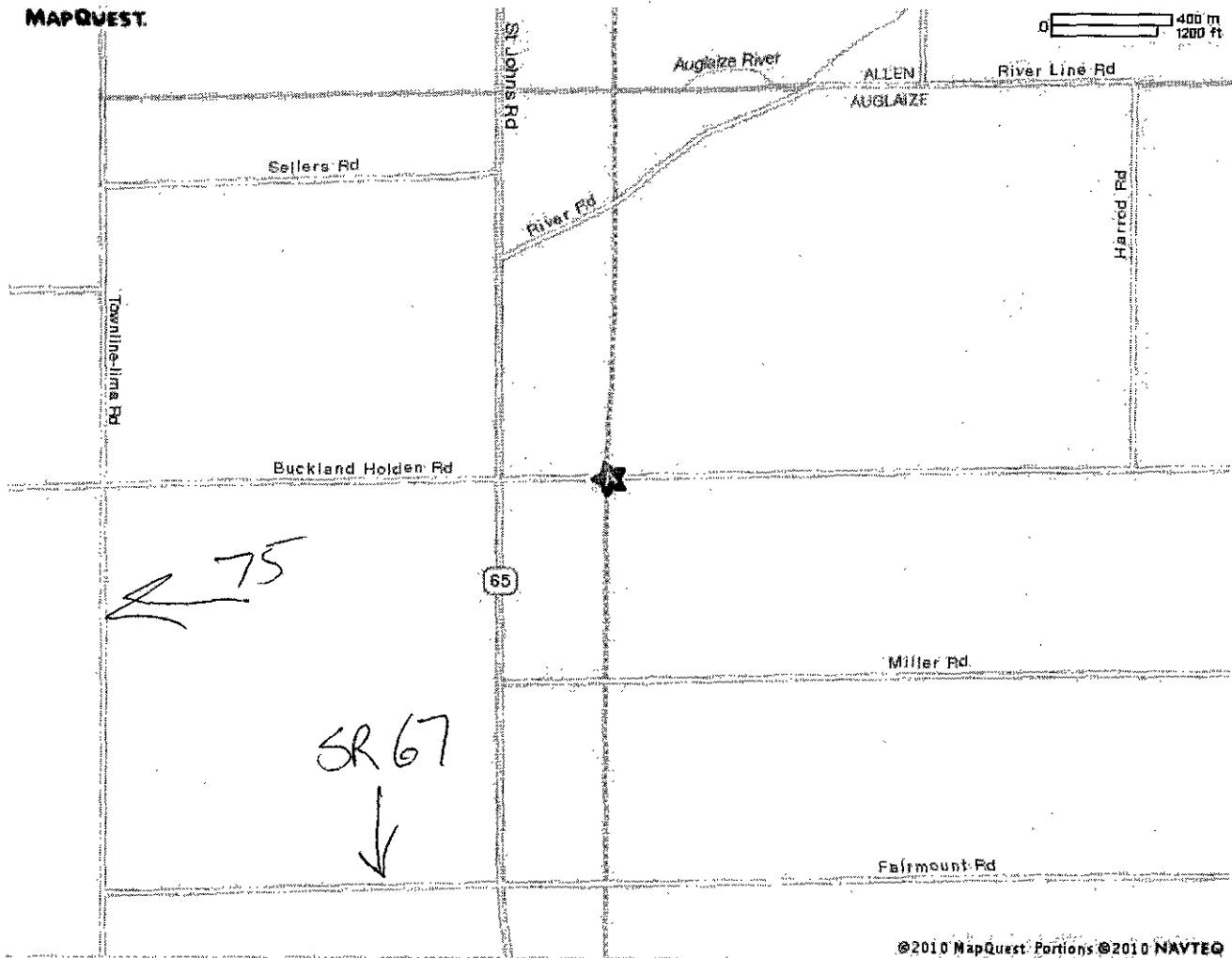
Unit # 2	First	Middle	Last	Type
				Driver
	Address	City	State	Zip
	Date of Birth	Age	Sex	Home Phone #
	#Error		U	
	DL State	DL #	Offense Charged	Injured Taken By
				Unknown
	Seating Position	Ejection	Offense Description	Air Bag
	Unknown	Unknown		Unknown
	Condition	Trapped	Safety Equipment	Injuries
	Unknown	Unknown	Use Unknown	Unknown
	Alcohol Test Status	Alcohol/Drug Suspected	Alcohol Test Type	Alcohol Test Result
	None	Unknown	None	
	Drug Test Status	Drug Test Type	Drug Test Result 1	Drug Test Result 2
	None	None	None	None

**MAPQUEST.**

Sorry! When printing directly from the browser your directions or map may not print correctly. For best results, try clicking the Printer-Friendly button.

★ Latitude: 40.6294545  
 Longitude: -84.0848654  
 Wapakoneta, OH 45895

AUGLAIZE TORY BUCKLAND - HOLDEN/CR 190  
 258626V



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75 N TO SR 67 (EXIT 113)  
 TO 65 N TO BUCKLAND HOLDEN  
 10 AM 5/5



## Diagnostic Review Team Survey

Date: 5/4/10 11:15 AM

### Location Data

Street or Road Name: DALLAS RD / CR 184

Route/Road Number (i.e. Twp., Co., SR or US) CR 184 (include SLM if State or US route)

AAR-DOT No.: 5279605

County: CHAMPAIGN Township:

City: (In or Near) URBANA

Railroad Name: IOCR Railroad Division: INDIANAPOLIS Branch/Line Name: BELLEFONTAINE BR

Nearest RR Timetable Station: BOWLUSVILLE RR Milepost: 120.6

### On-Site Review Team

(Include: Name - Organization - Phone Number)

1. GEORGE MARTIN PUCO 614-752-9107
2. MARK MOWREY CHAMPAIGN CO. 937 853-4848
3. BIFF KONRAD TORV 513 505-3155
4. Fereidoun Shahrach Champaign 937-653-4848
5. TIM PERKINS ORDC 614-644-0284
- 6.
- 7.
- 8.
- 9.
- 10.

### Existing Traffic Control Devices

Type of Warning Devices	Installed?		Quantity/Comments	
Advance Warning Signs	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2	BUCKEYE
'Stop' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
'Stop Ahead' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Pavement Markings	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2	
Crossbucks	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2	
Number of Tracks Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Inventory Tags	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Interconnected Highway Traffic Signal	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	1	
Mast-Mounted Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Cantilever Flashing Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number:	Length:
Side Lights	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Automatic Gates	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Number:	Length:
Bells	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Sidewalk Gate Arms	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
'No Turn' Signs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Illumination	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Is crossing flagged by train crew?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

**Safety Data (Obtain crash reports, if possible, prior to review)**

	Initial Information (from database)	Revised
Number & dates of crashes in previous 5 years	2 6/14/07 6/11/09	
Hazard Ranking 53	Date Run: 4/15/10	38 5/6/10

**Railroad Data**

Railroad Characteristics	Initial Information (from database)	Revised
Total trains per day	2	
< 1 per day		
Day thru trains	2	
Night thru trains		
Daytime switching movements		
Nighttime switching movements		
Total number of tracks	1	
Number of main tracks	1	
Number of other tracks		
Maximum train speed	50	
Typical train speed		
Amtrak		

If non-gated crossing, is clearing sight distance adequate in all quadrants? (See Table 1) ☒ Yes ☐ No SIGHT VIEW PARTIALLY OBSCURED WEST BOUND

If multiple tracks, can two trains occupy crossing at the same time? ☐ Yes ☒ No

Can one train block the motorists' view of another train at crossing? ☐ Yes (Explain below) ☒ No

Are there other track(s) crossing this same roadway within 100 ft of this crossing? ☒ Yes ☐ No

If yes, Crossing DOT # (if different) \_\_\_\_\_

If yes, distance \_\_\_\_\_ (take measurement between track centerlines at closest point along roadway)

**Roadway Data**

Local Highway Authority:  
(Who maintains this roadway?)

CHAMPAIGN COUNTY

Roadway Characteristics	Initial Information (from database)	Revised
Average daily traffic	254 (2003)	376 (2007)
Highway paved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Roadway Surface: ☒ Blacktop ☐ Gravel ☐ Concrete ☐ Other \_\_\_\_\_

Roadway width: 16 ft.

Number of highway lanes

2

2

Urban or Rural?

RURAL

RURAL

Vehicle Speed: 55 MPH

School Bus Operation: ☐ No ☒ Yes \_\_\_\_\_ Amount

Hazardous Materials Trucks: ☐ No ☒ Yes \_\_\_\_\_ Amount

ANhydrous, FERTILIZER

Shoulders: ☒ No ☐ Yes

Is the shoulder surfaced? ☒ No ☐ Yes

Is there existing guardrail along roadway in crossing vicinity? ☒ No ☐ Yes

Is stopping site distance adequate? (See Table 2) ☒ Yes ☐ No If no, deficient approach(es) \_\_\_\_\_



Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input type="checkbox"/> Non-functional (Curb height = Less than 4") <input checked="" type="checkbox"/> None	Quadrant _____ Curb and Gutter: <input type="checkbox"/> Functional (Curb height = 4" or more) <input type="checkbox"/> Non-functional (Curb height = Less than 4") <input checked="" type="checkbox"/> None
---	---

Pedestrians: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Is sidewalk present? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Is there a nearby intersection that could cause queuing over the crossing? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, Distance _____
Is this intersection signalized? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Are the signals currently interconnected with the existing crossing warning devices? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Is it the consensus of the Diagnostic Review Team that this is a potential closure project: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Explain reasons:

### Type of Development

<input checked="" type="checkbox"/> Open Space <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Residential	<input type="checkbox"/> Institutional <input type="checkbox"/> Commercial FARM	Location of nearby schools: WITHIN 3 MILES
--	---	---

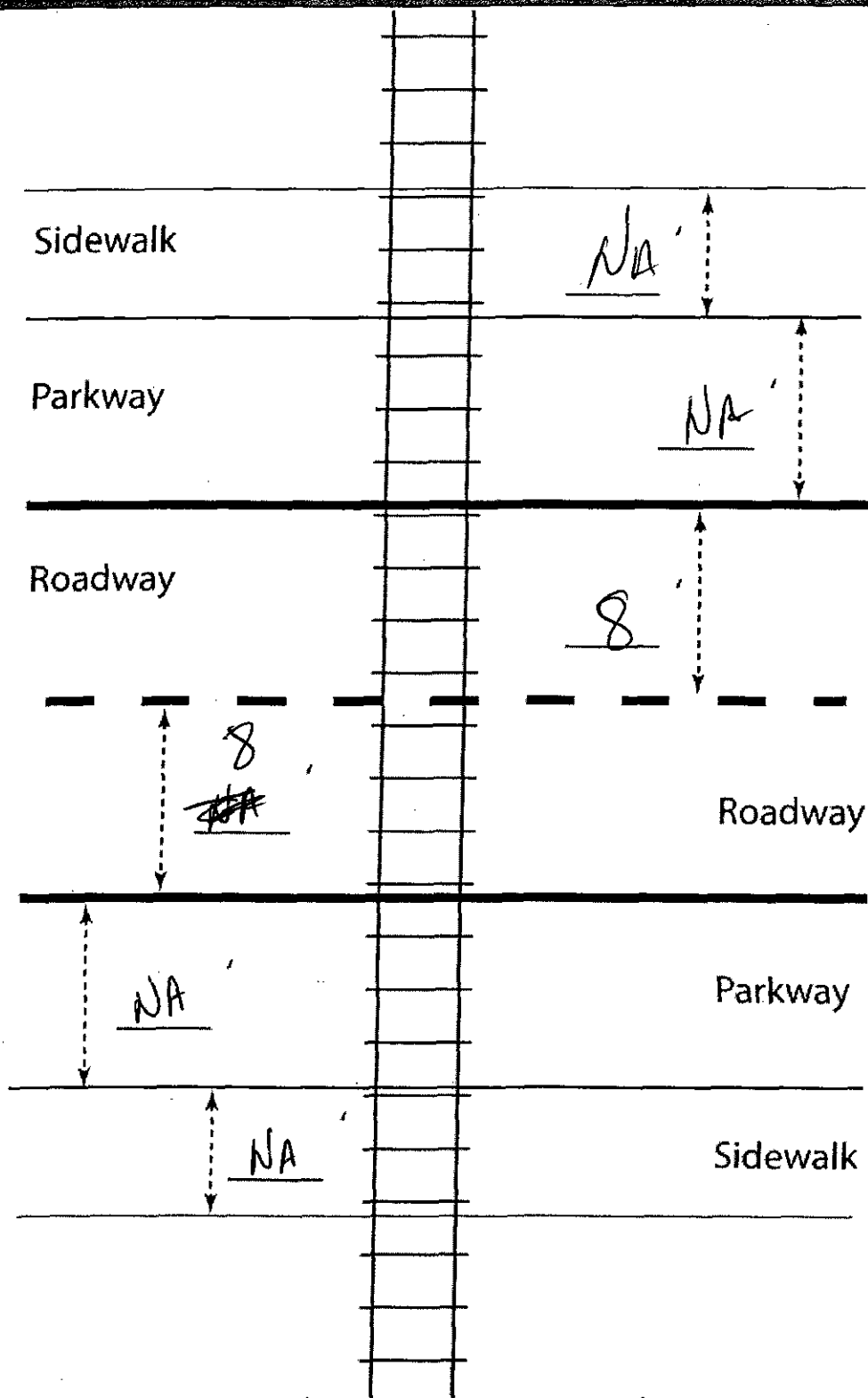
### Utility Information

Is commercial power available? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Utility Provider (Company Name) <u>DP &amp; L (PIONEER ELECTRIC)</u> Phone Number _____
Nearest Available Power Source <u>AT XING</u>
What other utilities are present? _____
Is there potential utility conflict(s) <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown

### Diagnostic Team Recommendations

Recommendations	Quadrants Needed
<input checked="" type="checkbox"/> Install/upgrade active devices	
<input type="checkbox"/> Automatic Flashing Lights (AFLS)	
<input type="checkbox"/> AFLS / Cants	
<input checked="" type="checkbox"/> AFLS / Gates	
<input type="checkbox"/> AFLS / Gates / Cants	
<input type="checkbox"/> Upgrade circuitry	
<input type="checkbox"/> Sidelights	
<input type="checkbox"/> Guardrail Needed	
<input type="checkbox"/> Install/Replace curb	
<input type="checkbox"/> Other (define)	
Comments:	
<input type="checkbox"/> Install/upgrade traffic signal preemption	
<input type="checkbox"/> No improvements needed	
<input type="checkbox"/> Other (define)	

# Field Dimensions

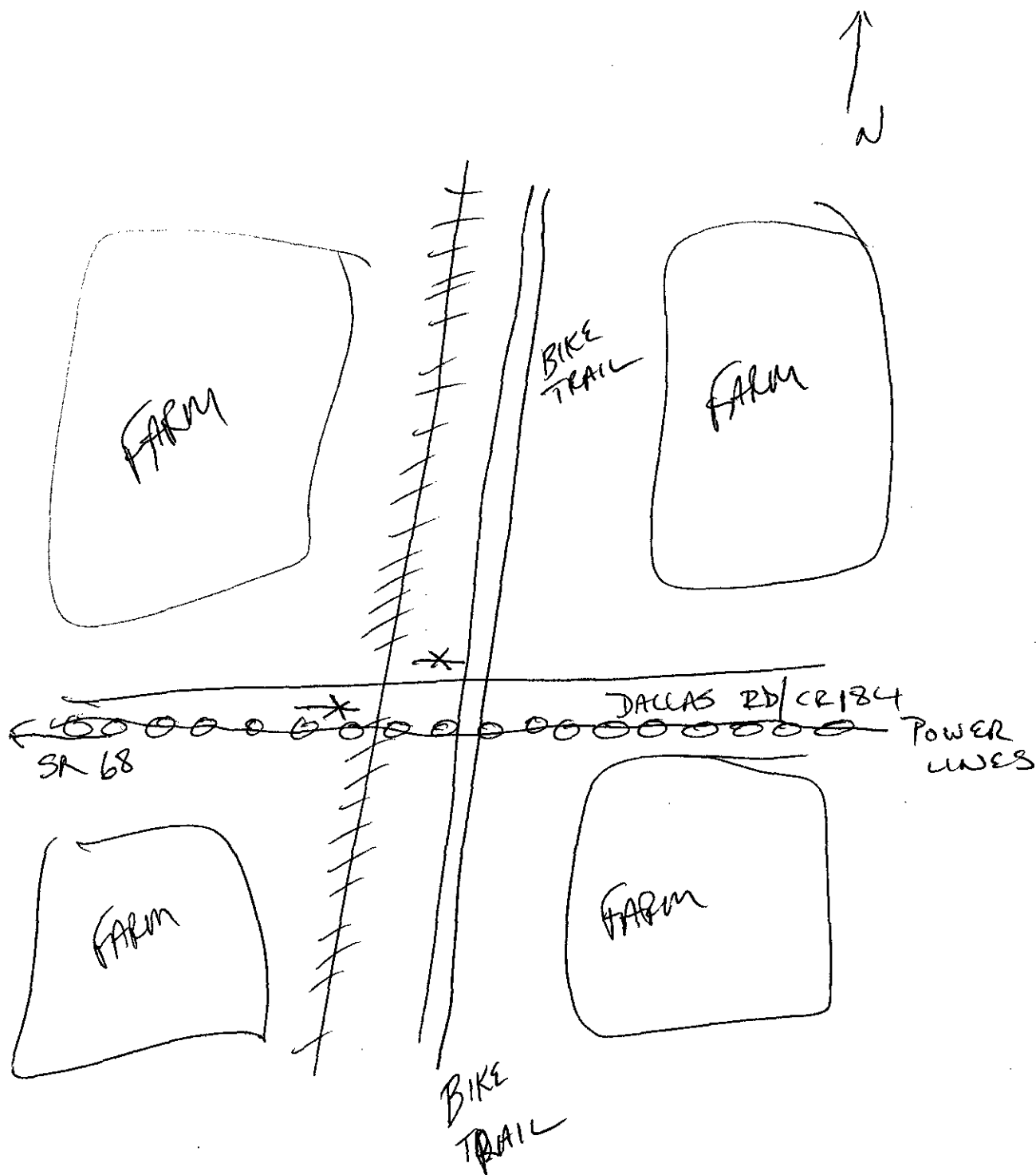


Show North  
Direction

Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in NW Quadrant?

Measurements by: Cam

# Field Sketch



Crossing Angle ☐ 0-29° ☐ 30-59° ☒ 60-90° Measured in NE Quadrant?

Sketch by: GM

TABLE 1

## Clearing Sight Distances

Maximum Authorized Train Speed	Distance (dT) Along Railroad from Crossing (ft)
1 - 10	240
15	360
20	480
25	600
30	720
35	840
40	960
45	1080
50	1200
55	1320
60	1440
65	1560
70	1680
75	1800
80	1920
85	2040
90	2160

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers and level single track 90 degree crossings; and may need to be adjusted for multiple tracks, skewed crossings or approaches on grades.

Clearing Sight Distance is to be measured in each vehicle travel direction at non-gated crossings as viewed from a point 25 feet from centerline of nearest track in the center of whichever travel lane is nearest the direction along track being measured.

Table 2

## Stopping Sight Distances

Highway Vehicle Speed	Distance (dH) Along Roadway from Crossing (ft)
0	n/a
5	50
10	70
15	105
20	135
25	180
30	225
35	280
40	340
45	410
50	490
55	570
60	660
65	760
70	865

Source: R-H Grade Crossing Handbook Table 36 (pp. 132-133)

## Notes:

All calculated distances are rounded up to the next higher 5-foot increment.

Distances indicated are for 65-ft double bottom semi-tractor trailers on dry level pavements.

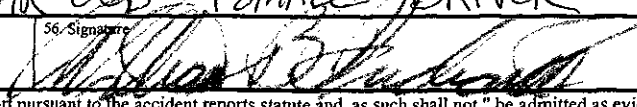
Stopping Sight Distance is to be measured on each roadway approach to crossing from stop bar.

NO OSP OR SHERIFF REPORT

3995

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)HIGHWAY-RAIL GRADE CROSSING  
ACCIDENT/INCIDENT REPORT

OMB Approval No: 2130-0500

1. Name of Reporting Railroad <b>Indiana &amp; Ohio Rwy</b>		1a. Alphabetic Code <b>IORY</b>		1b. Railroad Accident/Incident No. <b>IORYIX0703</b>	
2. Name of Other Railroad Involved in Train Accident/Incident		2a. Alphabetic Code		2b. Railroad Accident/Incident No.	
3. Name of Railroad Responsible for Track Maintenance (single entry) <b>Indiana &amp; Ohio Rwy</b>		3a. Alphabetic Code <b>IORY</b>		3b. Railroad Accident/Incident No. <b>IORYIX0703</b>	
4. U. S. DOT Grade Crossing Identification Number <b>527960J</b>		5. Date of Accident/Incident month <b>0</b> day <b>6</b> year <b>2007</b>		6. Time of Accident/Incident <b>02:19</b> AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	
7. Nearest Railroad Station <b>GLEN ECHO</b>		8. Division <b>SYSTEM</b>		9. County <b>CHAMPAIGN</b>	
11. City (if in a city) <b>URBANA</b>		12. Highway Name or Number <b>DALLAS ROAD</b>		10. State Abbr. Code <b>OH</b>	
13. Type C. Truck-trailer F. Bus J. Other motor vehicle A. Auto D. Pick-up truck G. School bus K. Pedestrian B. Truck E. Van H. Motorcycle M. Other (specify)		17. Equipment 1. Train (units pulling) 2. Train (units pushing) 3. Train (standing)		4. Car(s) (moving) 5. Car(s) (standing) 6. Light loco(s) (moving) 7. Light loco(s) (standing)	
14. Vehicle Speed (est. mph at impact)		15. Direction (geographical) 1. North 2. South 3. East 4. West		18. Position of Car Unit in Train <b>1</b>	
16. Position 1. Stalled on crossing 2. Stopped on crossing 3. Moving over crossing 4. Trapped		19. Circumstance 1. Rail equipment struck highway user 2. Rail equipment struck by highway user		20a. Was the highway user and/or rail equipment involved in the impact transporting hazardous materials? 1. Highway user 2. Rail equipment 3. Both 4. Neither	
20b. State here the name and quantity of the hazardous material released, if any.		20c. State here the name and quantity of the hazardous material released, if any.		20d. State here the name and quantity of the hazardous material released, if any.	
21. Temperature (specify if minus) <b>89</b> °F		22. Visibility (single entry) 1. Dawn 2. Day 3. Dusk 4. Dark		23. Weather (single entry) 1. Clear 2. Cloudy 3. Rain 4. Fog 5. Sleet 6. Snow	
24. Type of Equipment 1. Freight train 4. Work train 7. Yard/switching A. Spec. MoW Equip. Consist 2. Passenger train 5. Single car 8. Light loco(s) (single entry) 3. Commuter train 6. Cut of cars 9. Maint./inspect. car		25. Track Type Used by Rail Equipment Involved 1. Main 2. Yard 3. Siding 4. Industry		26. Track Number or Name <b>1 MAIN</b>	
27. FRA Track Class (1-9, X) <b>2</b>		28. Number of Locomotive Units <b>2</b>		29. Number of Cars <b>7</b>	
30. Consist Speed (Recorded speed if available) R - Recorded E - Estimated <b>25</b> MPH		31. Time Table Direction 1. North 3. East 2. South 4. West		32. Whistle Ban 1. Yes 2. No 3. Unknown	
33. Location of Warning 1. Both sides 2. Side of vehicle approach 3. Opposite side of vehicle approach		34. Crossing Warning Interconnected with Highway Signals 1. Yes 2. No 3. Unknown		35. Crossing Illuminated by Street Lights or Special Lights 1. Yes 2. No 3. Unknown	
36. Driver's Age <b>60</b>		37. Driver's Gender 1. Male 2. Female <b>2</b>		38. Driver Drove Behind or in Front of Train and Struck or was Struck by Second Train 1. Yes 2. No 3. Unknown	
39. Driver Passed Standing Highway Vehicle 1. Yes 2. No 3. Unknown		40. View of Track Obscured by (primary obstruction) 1. Permanent structure 2. Standing railroad equipment 3. Passing train 4. Topography 5. Vegetation 6. Highway vehicles 7. Other (specify)		41. Driver 1. Drove around or thru the gate 2. Stopped and then proceeded 3. Did not stop 4. Stopped on crossing 5. Other (specify)	
42. Highway-Rail Crossing Users 1. Yes 2. No 3. Unknown		43. Highway Vehicle Property Damage (est. dollar damage) <b>\$2,000</b>		44. Total Number of Highway-Rail Crossing Users (include driver) <b>1</b>	
45. Railroad Employees		46. Total Number of People on Train (include passengers and train crew) <b>2</b>		47. Is a Rail Equipment Accident/Incident Report Being Filed? 1. Yes 2. No	
48. Passengers on Train		49. Special Study Block		50. Special Study Block	
51. Narrative Description (Be specific, and continue on separate sheet if necessary) <b>CREW WAS HEADED TOWARD URBANA APPROACHING DALLAS RD AT MP 120.06 WHEN VEHICLE DROVE UP ON EDGE OF TRACK AND STOPPED. LOCOMOTIVE CLIPPED THE FRONT BUMPER OF VEHICLE. SITE DISTANCE WAS GOOD AT CROSSING. DRIVER STATED SHE DROVE UP TO VEHICLE AND DIDN'T NOTICE TRAIN UNTIL SHE WAS ON CROSSING. POLICE REPORT TO FOLLOW WHEN ACCESSIBLE.</b> <b>60 YEAR OLD FEMALE DRIVER</b>					
52. Signed Name and Title <b>LIAM B. HUDRAN</b> General Manager		53. Signature 		54. Date <b>6/29/2007</b>	
NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report .... 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).					



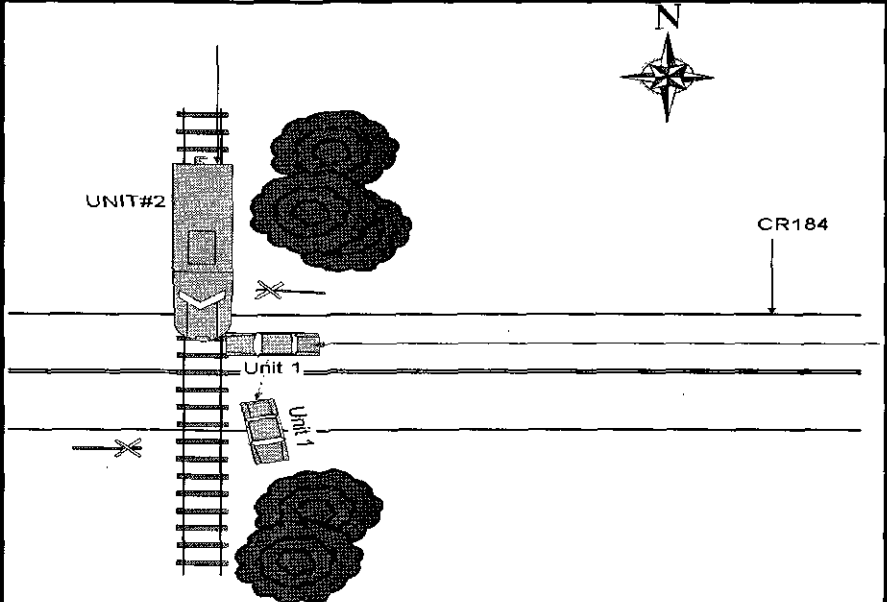
# Traffic Crash Report

CHAMPAIGN COUNTY, IACK  
DALLAS RD/CR 184  
527-9605

Local Report # 80-0493-11	Crash Severity PDO	Private Property N	Hit/Skip Not Hit/Skip	Photos Taken Y	NCIC # OHP80
Reporting Agency OHIO STATE HIGHWAY P	# Units 2	Unit Error 1	Date and Time of Crash 6/11/2009 4:45:00 PM		
Day of Week THU	City Village Township Township	Name (of City, Village or Township) URBANA	County # 11	Latitude 40 2 54.11	Longitude 83 47 32.62
Crash Occurred On			Local Information		
Prefix 0184	Crash Location		Type Loc Numbered Route		
At / Reference			Ref Point		
Dist Reference 70	DR W	Prefix 0068	Intersection 2 Streets		

Type of Intersection Railway Grade Crossing	Occurrence On Roadway	Road Contour Straight Level	Road Conditions Primary Dry	** Secondary Road Conditions ONLY Secondary Unknown	
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Police Action					
Date and Time Crash Reported 6/11/2009 5:01:00 PM	Dispatch 6/11/2009 5:01:00 PM	Arrived 6/11/2009 5:12:00 PM	Cleared 6/11/2009 6:53:00 PM	Other 10	Total Minutes 122
Officer's Name* THOMPSON, MERRILL	Badge #* 1748	Checked By KKBENNETT	Date Report Filed* 6/29/2009 12:00:00 AM		
Report Taken By Police Agency	Report Taken At Scene				

Manner of Collision or Impact Angle	Diagram 	
School Bus Related No		
Work Zone Related No		
Weather Clear		
Type of Work Zone		Workers Present
Location of Crash in Work Zone		
Light Conditions Primary Daylight		
Secondary Unknown		

Narrative UNIT#1 WAS WESTBOUND ON CR184 WHEN SHE FAILED TO YIELD AT THE RAILROAD CROSSING. UNIT#1 STRUCK A SOUTHBOUND TRAIN.
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# Traffic Crash Report

## Unit Information

Unit # 1	Owner First ROSE	Owner Middle	Owner Last RICKETTS	LP State OH	LP # BE45FG
Owner Address 2034 W DALLAS RD		Owner City URBANA	Owner State OH	Owner Zip 43078	Owner Phone #
Year 1998	Make DODG	Model NEO	Color	VIN	
Insurance Company PROGRESSIVE	In Emergency Response Unknown	Speed Detected Stated	Speed 20	Posted Speed 55	
Non-Motorist Location UnKnown	Action Striking	Towing Service	Damage Scale Functional Damage	Direction East	
Type of Unit Compact	Point of Impact Right Front	Most Damaged Area Right Front	Vehicle Defect		
Pre-Crash Actions Movements Essentially Straight Ahead	Striking Vehicle O/U No Underride or Override	Contributing Circumstances Failure to Yield	First Harmful Event	Most Harmful Event 1	
Traffic Control Railroad Crossbucks	Sequence of Events 1 Railway Vehicle	Sequence of Events 2 Ran Off Road Left	Sequence of Events 3 Unknown	Sequence of Events 4 Unknown	
Company (From Shipping Papers)	Company Phone	US DOT	ICC MC	PUCO	
Address		City	State	Zip	
Trailer LP St.	Trailer LP Year	Trailer LP #	Placard #	# DIA.	
Cargo Body Type Not Applicable	CDL Class	Weight (GVWR)	Haz Material Placard Unknown	Haz Material Release Not Applicable	

## People Information

Unit # 1	First Rose	Middle	Last Ricketts	Type Driver
Address 2034 WEST DALLAS RD		City URBANA	State OH	Zip 43078
Date of Birth 09/23/1930	Age 78	Sex F	Home Phone # 9374843529	Work Phone #
DL State OH	DL # RS490576	Offense Charged	Injured Taken By None	Transported By
Seating Position Front Left (MC Driver)	Ejection Not Ejected	Offense Description	Air Bag Not Deployed	Citation #
Condition Apparently Normal	Trapped Not Trapped	Safety Equipment Shoulder Lap/Belt	Injuries No Injury	Air Bag Switch Not Present
Alcohol Test Status None	Alcohol/Drug Suspected None	Alcohol Test Type None	Alcohol Test Result	
Drug Test Status None	Drug Test Type None	Drug Test Result 1 None	Drug Test Result 2 None	

# Unit Information

Unit # 2	Owner First AMERICA	Owner Middle	Owner Last RAIL	LP State NS	LP #
Owner Address 2856 CYPRESS WAY		Owner City	Owner State OH	Owner Zip 45212	Owner Phone # 5138601000
Year 1969	Make UNK	Model UNK	Color	VIN	
Insurance Company SELF INSURED	In Emergency Response Unknown	Speed Detected Stated	Speed 10	Posted Speed	
Non-Motorist Location Unknown	Action Struck	Towing Service	Damage Scale None	Direction North	
Type of Unit Train	Point of Impact Left Front	Most Damaged Area None	Vehicle Defect		
Pre-Crash Actions Movements Essentially Straight Ahead	Striking Vehicle O/U Unknown	Contributing Circumstances None	First Harmful Event 1	Most Harmful Event 1	
Traffic Control Railroad Crossbucks	Sequence of Events 1 Motor Vehicle in Transport	Sequence of Events 2 Unknown	Sequence of Events 3 Unknown	Sequence of Events 4 Unknown	
Company (From Shipping Papers)	Company Phone	US DOT	ICC MC	PUCO	
Address		City	State	Zip	
Trailer LP St.		Trailer LP Year	Trailer LP #	Placard #	# DIA.
Cargo Body Type Not Applicable	CDL Class	Weight (GVWR)	Haz Material Placard Unknown	Haz Material Release Not Applicable	

# People Information

Unit # 2	First Conductor	Middle	Last Train	Type Driver
Address		City	State	Zip
Date of Birth #Error	Age	Sex U	Home Phone #	Work Phone #
DL State	DL #	Offense Charged	Injured Taken By Unknown	Transported By
Seating Position Unknown	Ejection Unknown	Offense Description	Air Bag Unknown	Citation #
Condition Unknown	Trapped Unknown	Safety Equipment Use Unknown	Injuries Unknown	Air Bag Switch Unknown
Alcohol Test Status None	Alcohol/Drug Suspected Unknown	Alcohol Test Type None	Alcohol Test Result	
Drug Test Status None	Drug Test Type None	Drug Test Result 1 None	Drug Test Result 2 None	



BAIR RD

W DALLAS RD

WOODBURN RD

WOODBURN RD

WOODBURN RD

LOOKOUT CT

DEER RUN RD

W DALLAS RD

W DALLAS RD

W DALLAS RD

E DALLAS RD

S U S RT 68

CEDAR CREEK RD

S U S RT 68

BOGLES RUN RD



**MAPQUEST.**

Sorry! When printing directly from the browser your directions or map may not print correctly. For best results, try clicking the Printer-Friendly button.

★ Latitude: 40.0483659  
Longitude: -83.792525  
Urbana, OH 43078

CHAMPAIGN - IOCR DALLAS RD / CR 184 5279605

**MAPQUEST.**

0 200 m  
0 600 ft



Directions and maps are informational only. We make no warranties on the accuracy of their content, road conditions or route usability or expeditiousness. You assume all risk of use. MapQuest and its suppliers shall not be liable to you for any loss or delay resulting from your use of MapQuest.

SR 235 S. TO SR 55 WEST 54  
TURN RIGHT ON VALLEY PIKE, LEFT ON DALLAS  
OR  
235 TO 36 EAST TO 560 SOUTH 1115 AM