

Note: This is a sample of a report that is not helpful to BTS when preparing for an interview. Not much information to work with to prepare for interview.

# C<sup>3</sup>RS Report Form

(NJT Employees) Expiration Date: 08-31-2013

Line Segmen

OMB NO: 2139-0010

### C<sup>3</sup>RS Confirmation Number:

**DATE OF OCCURRENCE** 

01/18/07

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2139-0010. Public reporting of a close call is estimated to take approximately 30 minutes, including the time for reviewing instructions, completing and reviewing the report. Reporting any information to the Confidential Close Calls Reporting System ( $C^3RS$ ) is voluntary. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to:  $C^3RS$  Data Collection Officer, Demetra Collia, US DOT/ BTS, 1200 New Jersey Avenue SE, Room E36-E14, Washington, D.C. 20590 or e-mail: Demetra.collia@dot.gov.

#### **Event Description**

Please provide your name and at least one telephone number where a C<sup>3</sup>RS rail safety analyst can contact you to discuss your report, if needed. Indicate the best time to call and if you authorize BTS to leave a voice mail message on your answering service. Please provide an address to receive notice which will serve as confirmation of your report.

DIVISION

X HOROKEN

TIME OF OCCURENCE (24 HR.)

1634

| <u> </u>                               | THE THE PARTY OF T |
|--|--|
|  | ☐ NEWARK MP or YARD  |
| NAME K. C. Jones                       |  |
| ADDRESS/PO BOX PO Box 142              | If this was a yard incident, identify here.  |
| CITY Paradise STATE NJ ZIP 19022       | 2 JOB TITLE Engineer   |
| PRIMARY ( 717 ) 223 - 1234 1700 - 2100 | This sample report is type written. It is important to print clearly, if you are not able type information into a report form.   |
| ALTERNATE ()                           | YES NO   |
| Immediat                               | te Co-Workers  |
|  | lved in the event eligible for protection from discipline. Please encourage your ipt confirming their participation in this event. You may send in your reports  |
| NAME Joe Doe                           | JOB TITLE Conductor  |
| NAME                                   | JOB TITLE  |
| NAME                                   | JOB TITLE  |
| NAME_                                  | JOB TITLE  |
| NAME                                   | JOB TITLE  |
|  |  |

To receive protection from discipline, you must: a) call  $C^3RS$  at 1.888.568.2377 (1.888.LOV.C3RS) within 48 hours of the event to file a report, b) mail the completed  $C^3RS$  Report Form, postmarked within 3 calendar days of the call, not counting weekends and Federal holidays, and c) make yourself available for an interview on the event as needed.

# 3-Day Work/Sleep History Information

| 3-Day Work Shift History         | Shift Start Time           | Incident Time               | Shift End Time |
|----------------------------------|----------------------------|-----------------------------|----------------|
| Incident Shift Day               | 0830                       | 1147                        | 1750           |
| Day before Incident              | 0435                       |                             | 1330           |
| 2 Days before Incident           | Off                        |                             |                |
| Please use m                     | ilitary time (24-Hour cloc | k) for work and sleep perio | ods.           |
| 3-Day Sleep History              | Sleep Start Time           | Sleep End Time              | Nap – Yes/No   |
| Last Sleep before Incident Shift | 2300                       | 0630                        | No             |
| Sleep Period the Day Before      | 2200                       | 0230                        | No             |
| Sleep Period 2 Days Before       | 2200                       | 0700                        | No             |

Engine #'s: 4420 Total # of cars: 8 # of cars in use (open):

# of MU's: # of Multi-levels: 8

### **Event Description**

Please use the space below to complete your description of the event or condition you wish to report. Remember: the more detailed your report is, the better prepared the Rail Safety Analyst Team (RSAT) member will be to conduct a thorough interview related to the event/condition. In addition, please help us prevent similar incidents from occurring by providing your suggestions to prevent this event from happening again.

You may find the following questions useful as you think through what information to provide.

What were you and your crew doing immediately prior to the close call incident?

What did you notice that made you think a problem was developing?

What factors (weather, light, terrain, equipment, human error, etc.) may have contributed to the incident?

What, if anything, was unusual or unfamiliar to you or your crew with respect to this job assignment?

If anything or anybody interfered with your ability to perform the assigned task safely, describe how.

What prevented this incident from becoming a more serious accident?

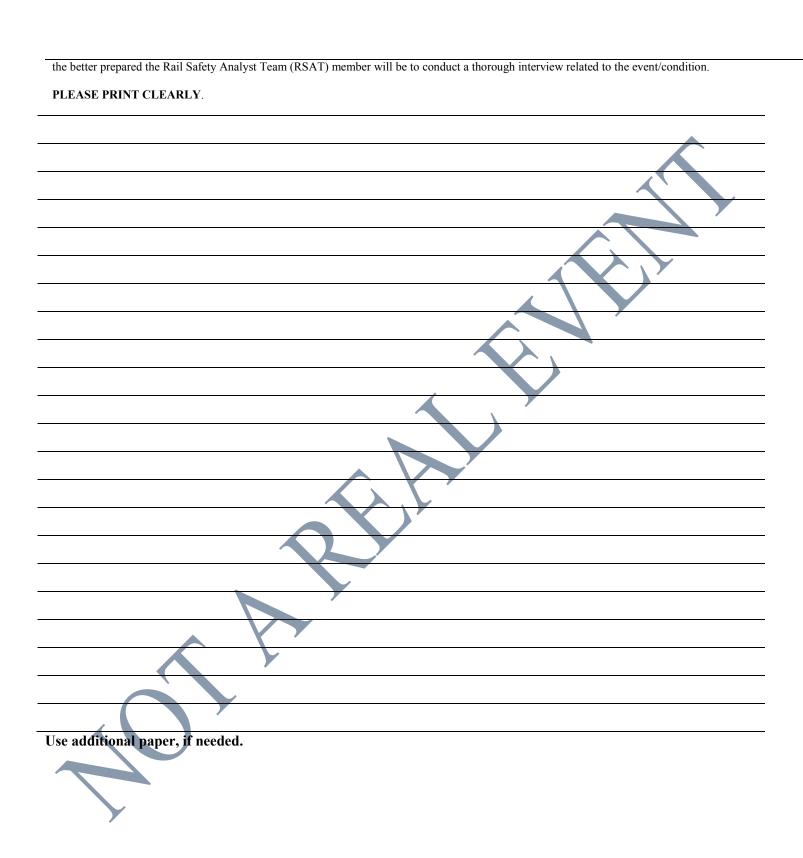
#### PLEASE PRINT CLEARLY.

| Resting                        | The reporter did not provide any description  |
|--------------------------------|---|
| Cab signals                    | whatsoever about the event. It seems he attempted to follow the questions suggested           |
| Weather, family problems       | above, but without an event description, BTS  |
| In emergency between signals   | had no way of knowing what happened. Was this a Close Call, or was it a 6.4 or 6.1 incident.  |
| See C                          | Without a description BTS has no way of knowing or of preparing for an interview with         |
| The student                    | the reporter. Please, describe events in detail and provide a diagram or copies of assignment |
| Have the dispatcher warn crews | paperwork, if appropriate.  |

## Please provide a drawing on page 4 depicting the incident. Use additional paper, if needed.

#### **Event Description (continued)**

Please use the space below to complete your description of the event or condition you wish to report. Remember: the more detailed your report is,



The information you provide will be used for statistical purposes only. In accordance with the BTS confidentiality statute (49 U.S.C. 111 (k)) and the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347, your responses will be kept confidential and will not be disclosed in identifiable form to anyone other than BTS employees or BTS agents such as telephone interviewers. In accordance with these confidentiality statutes, only statistical and non-identifying data will be made publicly available through reports. By law, every BTS employee and BTS agent has taken an oath of confidentiality and is subject to a jail term of up to 5 years, a fine of up to \$250,000, or both if he or she discloses ANY identifiable information about the respondent. BTS will not release to FRA or any other public or private entity any information that might reveal the identity of individuals or organizations mentioned in close call reports.

Use this page for diagrams or additional information.

