

OPERATIONAL TESTING FORM – Transportation

Tester Name _____	Railroad _____	Date _____
Employee (E1) Name _____	Signature _____	
Employee (E2) Name _____	Signature _____	
Employee (E3) Name _____	Signature _____	
Employee (E4) Name _____	Signature _____	
Location (Sub/MP) _____	Time _____	
Engine Numbers _____	Train ID _____	

TEST	TEST DESCRIPTION	Complied / Failed				COMMENTS
		E1	E2	E3	E4	
1	Speed Limit Compliance					
2	Main Track Authority					
3	Track Bulletins					
10	Tampering					
11	Proper Radio Procedures					
12	Air Brake Test – Locomotive					
13	Air Brake Test – Class I					
13.1	Air Brake Test – Class III					
14	Air Brake Test – Transfer					
15	Locomotive Daily Inspection					
16	<i>Controlling/Protecting Shoving Moves</i>					
17	<i>Fouling/Close Clearances</i>					
18	<i>Handling of Switches/Derails</i>					
18.1	<i>Main Track Switches</i>					
18.2	<i>Crossover Switches</i>					
18.3	<i>Fixed Derails</i>					
19	<i>Road/Grade Crossings</i>					
20	Hazardous Materials Compliance					
20.1	Hazardous Materials Proper Placement in Train					
21	Securing Unattended Cars/Locomotives					
22	Ready for Duty					
22.1	Drug & Alcohol Compliance					
23	Blue Signal Compliance					
24	Job Briefing					
25	Red Zone Compliance					
26	Sufficient Distance					
27	<i>Electronic Devices</i>					
28	PPE					
29	Getting On/Off and Riding Equipment					
30	Applying/Releasing Handbrakes					
31	Mandatory Directives					
32	Main Track Switch Awareness Job Briefing					
41	HOS Recordkeeping					
42	Precautions Around Tracks/Equipment					
44	Vehicle Operations					
45	Good Housekeeping					
46	Electrical Safety					
47	Lifting and Moving Materials					
99	Other (list in comments)					
99	Other (list in comments)					
99	Other (list in comments)					
99	Other (list in comments)					