

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 06/06/2018

Department of Transportation
Federal Railroad Administration

FOR CERTIFYING OFFICIAL: Kristen Baldwin

FOR CLEARANCE OFFICER: Patricia Lawton

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received 04/17/2018

ACTION REQUESTED: Revision of a currently approved collection

TYPE OF REVIEW REQUESTED: Regular

ICR REFERENCE NUMBER: 201804-2130-001

AGENCY ICR TRACKING NUMBER:

TITLE: Accident/Incident Reporting and Recordkeeping

LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved without change

OMB CONTROL NUMBER: 2130-0500

The agency is required to display the OMB Control Number and inform respondents of its legal significance in accordance with 5 CFR 1320.5(b).

EXPIRATION DATE: 06/30/2021

DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	109,440	46,577	0
New	109,440	46,577	0
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	-148,188	-47,968	0
Change due to Agency Adjustment	148,188	47,968	0
Change due to PRA Violation	0	0	0

TERMS OF CLEARANCE:

OMB Authorizing Official: Dominic J. Mancini
Deputy and Acting Administrator,
Office Of Information And Regulatory Affairs

List of ICs			
IC Title	Form No.	Form Name	CFR Citation
Accident/Incident Reporting and Recordkeeping	FRA F 6180.98, FRA F 6180.56, FRA F 6180.81, FRA F 6180.57, FRA F 6180.97, FRA F 6180.78, FRA F 6180.54, FRA F 6180.55, FRA F 6180.150, FRA F 6180.55a, FRA F 6180.107	Railroad Employee Injury and/or Illness Record, Annual Railroad Report of Employee Hours and Casualties, by State, Employee Human Factor Attachment, Highway Rail Grade Crossing Accident/Incident Report, Initial Rail Equipment Accident/Incident Record, Notice to Railroad Employee Involved in Rail Equipment Accident/Incident Attributed to Human Factor, Rail Equipment Accident/Incident Report, Railroad Injury and Illness Summary, Highway User Injury Inquiry Form , Railroad Injury and Illness Summary (Continuation Sheet), Alternative Record for Illness Claimed to Be Work Related	49 CFR 225
Rail Equipment Accident/Incident Report			49 CFR 225.12
Railroad Injury and Illness Summary			49 CFR 225.21
Railroad Injury and Illness Summary (Continuation Sheet)			49 CFR 225.19(d)
Annual Railroad Report of Employee Hours and Casualties, by State			49 CFR 225.21
Highway Rail Grade Crossing Accident/Incident Report			49 CFR 225.19(a)
Notice to Railroad Employees Involved in Rail Equipment Accident/Incident Attributed to Human Factor			49 CFR 225.12
Employee Human Factor Attachment			49 CFR 225.12
Initial Rail Equipment Accident/Incident Record			49 CFR 225.21
Railroad Employee Injury and/or Illness Record			49 CFR 225.21
Alternative Record for Illness Claimed to Be Work Related			49 CFR 225.21
Highway User Statement	FRA F 6180.150	Highway-User Injury Inquiry Form	