

### Reportable Incident Report form (S&S-40)

The Reportable Incident Report form (Major Incident Report - S&S-40) captures detailed information on the most severe safety and [security incidents](#) occurring in the transit environment. Detailed data, available from sources such as accident, incident, or police reports, are used to complete the Reportable Incident Report form (S&S-40). One form is completed for each [reportable incident](#) that occurs at an agency. Forms must be submitted no later than thirty days from the date of the incident. The information reported is intended to be of a level that can be collected at or near the time of the incident occurrence.

This form is required for all transit agencies, with the following exceptions:

- [Commuter rail](#) (CR) operators are only required to report security incidents to NTD. Commuter rail (CR) operators report safety incident data to the Federal Railroad Administration.
- Agencies with a Nine or Fewer Vehicles Waiver are not required to submit Safety and Security data.

### Overview

---

The Reportable Incident Report form (S&S-40) is designed to capture detailed information on the most severe safety and security incidents occurring in the transit environment. Detailed data, available from sources such as accident, incident, or police reports is used to complete the Reportable Incident Report form (S&S-40). The information required on the form is intended to be of a level that can be collected at or near the time the incident occurred.

### Reporting Requirements and Thresholds

Agencies must complete one Reportable Incident Report form (S&S-40) for each [reportable incident](#) (safety or security incident) occurring during the reporting period. Commuter rail (CR) operators are only required to report security incidents to NTD; however, they are required to report safety incidents to the Federal Railroad Administration.

Reportable Incident Report forms (S&S-40) are due within thirty days of the reportable incident.

### What Has Changed from Prior Year

1. Clarification for reporting property damage.
2. Clarification on reporting incident description,
3. Clarification on Arrest or Citation for Other Assault, Trespassing, Non-Violent Civil Disturbance, or Fare Evasion reporting.
4. Clarification on reporting options in the incident Location category.
5. Clarification on the intent of Evacuation Due to Life Safety Reasons reporting.
6. Clarification on the options in the Collision with category.
7. Clarification on the options in the Collision type category.
8. Clarification on the Number of Other Motor Vehicles Involved category.
9. Clarification on Non-Transit Collisions.
10. Clarification on the term Twilight in the Lighting category.
11. Clarification on the options in the Vehicle action category.
12. Clarification on the options in the Roadway Configuration category and how they correspond to the Event information.
13. Clarification on the options in the Other Motor Vehicle Type category.
14. Clarification on the options in the Other Motor Vehicle Action category.
15. Clarification of reporting the Location in reporting a Fire.
16. Clarification of reporting Fuel Type in reporting a Fire.
17. Clarification of reporting an Evacuation.

## 2010 Safety and Security Reporting Manual

### Approach

Both safety and certain types of security occurrences are reported on the Reportable Incident Report form (S&S-40). For an incident to be reportable on this form, it must meet the thresholds listed below.

#### Reportable Incident

A reportable incident is an event that involves a transit vehicle or occurs on transit-controlled property and meets one or more of the following conditions:

- A fatality (including a suicide or deaths resulting from Other Safety Occurrences not Otherwise Classified), and / or
- Injuries requiring immediate medical attention away from the scene for one or more persons, and / or
- Property damage equal to or exceeding \$25,000, and / or
- An evacuation for life safety reasons, and / or
- A mainline derailment.

Only one form is completed per incident regardless of how many thresholds are met. For example, an incident results in a fatality and property damage is equal to or exceeds \$25,000, only one Reportable Incident Report form (S&S-40) is completed. Property damage amounts must be reported even if the amount does not meet the \$25,000 threshold.

A reportable incident must be related to the operation of revenue service and not associated with unrelated tasks. The following types of incidents are not reportable to the NTD:

- Mechanical,
- Industrial, or
- Administrative work orders

A reportable incident may involve a transit owned vehicle that is not providing revenue service, but, if involved in an incident, may directly affect the provision of revenue service. Examples include:

- A supervisory vehicle being used to drive an operator to a bus to start revenue service is involved in a collision.
- Rail maintenance equipment on a revenue track experiences an incident that impacts the transit agency's schedule.

The following paragraphs highlight the important aspects of each reportable incident threshold.

#### Fatality

Safety and security incidents resulting in fatalities are reported on the Reportable Incident Report form (S&S-40).

For NTD purposes, a [fatality](#) is a transit-caused death, confirmed within thirty days of a transit incident, due to a [collision](#), derailment, fire, hazardous material spill, Act of God, evacuation, security incident or other incident. Fatality now includes transit-related suicides.

There is one exception to this rule: Deaths resulting from illnesses or other natural causes, or otherwise not associated with an incident, are not reported on either incident form. For example, a person in a rail facility suffering a fatal heart attack would not be reported to NTD.

#### Example 5 — Fatality Reporting

**Example:** A passenger fires a weapon on a transit vehicle killing one passenger.

#### Solution:

Number of Reportable Injuries

0

Number of Reportable Fatalities

1

Property Damage Amount

\$0

Complete a Reportable Incident Report form (S&S-40).

#### One or More Injuries Requiring Medical Attention

For NTD reporting purposes, an [injury](#) is defined as requiring immediate medical attention away from the scene of the incident. Immediate medical attention includes not only transport to the hospital by ambulance but also transport immediately from the incident scene to a hospital, physician's office, or medical center by any other means of transport.

Immediate medical attention means that medical attention was sought without delay after the incident occurred. An individual seeking medical care several hours after an incident, or in the days following an incident, is not considered to have received immediate medical attention.

## 2010 Safety and Security Reporting Manual

The medical attention received must be at a location other than the location at which the incident occurred. The intent of this distinction is to exclude incidents that only require minor first aid or other assistance received at the scene.

This distinction is not, however, intended to be burdensome for the transit agency. It is not a requirement that an agency follow-up on each person transported by ambulance, for example, to ensure that they actually received medical attention at the hospital. It is acceptable to count each person immediately transported as an injury.

Both safety and security incidents (i.e., an accident or [homicide](#)) resulting in one or more injuries and or fatalities are reported using the Reportable Incident Report form (S&S-40). As with fatalities, injuries resulting from illnesses should not be reported. For example, a passenger on a [demand response](#) (DR) vehicle transported to the hospital following a seizure is not a reportable incident.

Example 6 — One or More Injuries – Is it Reportable?		
<b>Example: Transported by Ambulance</b>		
An ambulance transports two passengers who were injured in a collision from the scene of the accident.		
<b>Solution: Yes</b>		
Number of Reportable Injuries 2	Number of Reportable Fatalities 0	Property Damage Amount \$(total property damage amount)
Complete a Reportable Incident Report form (S&S-40) since one or more passengers required immediate medical attention away from the scene.		
<b>Example: Transported by Alternate Means</b>		
Three passengers are hurt in a collision. Rather than wait for an ambulance to arrive, a security guard drives them to a nearby hospital.		
<b>Solution: Yes</b>		
Number of Reportable Injuries 3	Number of Reportable Fatalities 0	Property Damage Amount \$(total property damage amount)
Complete a Reportable Incident Report form (S&S-40) since one or more passengers required immediate medical attention away from the scene.		
<b>Example: Incidents not Qualifying as an Injury</b>		
Three passengers are hurt in a collision. Each sees a physician the next day and subsequently submits a claim to the transit agency.		
<b>Solution: No</b>		
Number of Reportable Injuries 0	Number of Reportable Fatalities 0	Property Damage Amount \$(total property damage amount)
Unless the property damage reporting threshold is met, do not report the incident because none of the passengers sought immediate medical attention away from the scene.		

### Property Damage

Incidents involving [property damage](#) equal to or exceeding \$25,000 require the completion of a Reportable Incident Report form (S&S-40). Property damage includes but is not limited to the following:

- Transit and non-transit vehicle damage
- Stations as well as non-transit facilities
- Rights-of-way (ROW) and items surrounding ROW, such as utility poles.
- Bus stops
- Maintenance facilities and other private property.

The key points regarding estimated property damage are:

- Estimated damage includes not only transit property damage, but also damage to other vehicles and property (other than personal property) involved in the incident that are not owned by the transit agency.
- The amount paid to repair or replace property (or an estimate made for insurance purposes) is reported for property damage. In the case of a total vehicle loss, the blue book value can be used as an estimate. It is also

## 2010 Safety and Security Reporting Manual

acceptable for your agency to establish standard property damage totals for specific incident types, or estimate the value of each event on a case-by-case basis.

- The cost of medical attention (hospital or doctor fees) is not included in the property damage total.
- The cost of clearing wreckage or damage to non-transit agency property is also included in the property damage value.
- The cost of an accident or a criminal investigation is not included in the estimated property damage.
- Damage to personal property, such as the value of laptops, cell phones or other personal property items, is not included in the estimated property damage.

### Example 7 — Calculating Property Damage

**Example:** A bus collides with a passenger car. The passenger car is totaled; the bus incurred body damage. The car has an estimated value of \$15,000 (transit agency uses the car's blue book value or other reasonable estimate of present value). The cost of the bus body damage is estimated at \$12,000.

**Solution:**

Number of Reportable Injuries	Number of Reportable Fatalities	Property Damage Amount
0	0	\$27,000.00

Property damage = \$27,000 (\$15,000 + \$12,000).

### Detailed Instructions

This section describes in detail how to complete each element of the Reportable Incident Report form (S&S-40).

To generate a new Reportable Incident Report form (S&S-40), click on the **File New S&S-40** link near the top of the Safety and Security screen to access the reporting Wizard. As each screen is completed, click the **Next** button at the bottom of the screen to move to the next applicable screen. Based on the information entered on the first two screens, the reporting Wizard will determine if the incident qualifies as a major reportable incident, a non-major incident or that the incident is not reportable.

If the incident does not meet the reporting thresholds for a reportable incident, your next screen will notify you.

If the incident meets the criteria for a reportable incident, clicking on the **Next** button saves the data entered and the reporting Wizard generates an S&S-40 form in the background that you can view at any time during the reporting process. When you reach the last screen, click the **Save** button and the reporting Wizard will return you to the **Safety & Security** tab.

Once you have completed Setup Screen 1 and 2 and the Basic Information Screen (screen 3), should you need to exit the reporting Wizard and return to complete the report at a later time, the system will save the data you have entered and file the report under **Pending Reports** at the bottom of the **Safety & Security** screen. To complete the report, click on the link for the report and the reporting Wizard will take you to the last screen completed and you can continue on to the end of the report.

If further data is obtained after you save or submit a report or you discover an error, from the **Safety & Security** tab open the applicable Reportable Incident Report form (S&S-40), make changes as necessary and save the form.

To delete a report, from the **Safety and Security** tab open the report, scroll to the bottom and click the **Delete** button (based on access level).

### Reporting an Incident

To generate a new Reportable Incident Report form (S&S-40), click on the **File New S&S-40** link to access the reporting Wizard.

### Report Set Up Screen 1

**Report Set Up Screen 1**

Please select the Mode / Type of Service being reported for this Incident.

Reporting Period Month:

No Reportable Incidents to Certify (for current reporting period)

**Tell us what type of incident is being reported.**

Check the applicable item(s) listed below to describe this incident.

- A collision
- A mainline derailment (not involving a collision)
- A fire
- A hazardous material spill
- An earthquake / flood / hurricane / tornado / other high winds / snow storm / ice storm, etc. (Act of God)
- System Security Event: A bomb threat / bombing / chemical / biological / nuclear / radiological / arson / hijacking / sabotage / cyber security event
- Personal Security Event: Assault / robbery / rape / burglary / suicide / attempted suicide / larceny or theft (including motor vehicle theft from a parking lot) / vandalism / homicide
- An arrest or citation for assault (no reportable injuries) / fare evasion / trespassing / nonviolent civil disturbance
- Other Safety Occurrences not Otherwise Classified (e.g., slip and fall / electric shock / other)

Report Set Up Screen 1 lists the incident types that you might need to report. After selecting the mode and type of service, select the reporting period (month) for which you are reporting. If you place a check mark in the box **No Reportable Incidents to Report (for current reporting period)**, this will generate a new Safety and Security Monthly Summary Report (Non-Major Incident Report S&S-50) for the month and Mode/TOS selected. If an S&S-50 has previously been created for this month and Mode/TOS, the error message, “A form already exists for this mode/service and month please update the form”.

A brief description of each incident type is listed below:

**Collision:** All [collisions](#) involving at least one transit vehicle, or taking place on transit property, are reported using the Reportable Incident Report form (S&S-40). Collisions are subject to the thresholds for a reportable incident. Do not report a suicide or attempted suicide as a collision. Suicides are to be reported under the security event category described below.

**Mainline Derailment:** All [derailments](#) occurring on [mainline](#) track are considered a reportable incident. The mainline track is the primary rail over which rail transit vehicles travel between stations. It does not include yard and siding track. This threshold applies only to rail incidents (other than commuter rail (CR)). Yard derailments that meet a reporting threshold should be reported as Other Safety Occurrences Not Otherwise Classified.

**Fire:** To be reportable on the S&S-40, a fire occurring on or in transit property must meet a reportable incident threshold and the [fire](#) must have required the act of suppression to occur at the time of the incident. Fires not meeting a Reportable Incident threshold are reported on the Safety and Security Monthly Summary Report form (S&S-50).

**Hazardous Material Spill:** [Hazardous material spills](#) that occur on or in transit property include bunker fuel, diesel, electric battery, ethanol, hybrid diesel, grain additive, liquefied natural gas, methanol, bio-diesel, compressed natural gas, dual fuel, electric propulsion, gasoline, hybrid gasoline, kerosene and liquefied petroleum gas. The hazardous material spill must have caused imminent danger to life, health, or the environment, and had special attention given to clean up of the spill.

**Act of God:** An [Act of God](#) is a natural and unavoidable catastrophe that interrupts the expected course of events, such as an earthquake, flood, hurricane, tornado, other high winds, lightning, and snow and ice storms.

**System Security Event: Bomb Threat, Bombing, Chemical, Biological, Nuclear / Radiological Releases, etc.:** Terrorism-related [Security incidents](#) such as bomb threats, bombings, chemical, biological, and nuclear / radiological releases that occur on or in transit property and meet the reporting thresholds for a reportable incident are reported on the

## 2010 Safety and Security Reporting Manual

S&S-40. Security incidents also include other system security events, such as arson, sabotage, hijacking and cyber security events.

**Personal Security Event: Assault, Robbery, Rape, Burglary, Suicide, Attempted Suicide or Larceny / Theft, Vandalism, Homicide:** These events have the potential to be reported on the S&S-40 or on the Safety and Security Monthly Summary Incident Report form (S&S-50). Only incidents meeting the major incident thresholds are reported on the Major Incident form (S&S-40). All other occurrences that do not meet a reporting threshold are reported on the Safety and Security Monthly Summary Incident Report form (S&S-50). For NTD reporting purposes, the victim of a rape is always reported as an injury.

**Arrests for Other Assault (no injuries), Trespassing, Non-Violent Civil Disturbance, or Citations for Fare Evasion:** All arrests for other assaults (no injuries), trespassing, non-violent civil disturbance (riots, strikes, etc.), and vandalism or citations for fare evasion are reported on the Safety and Security Monthly Summary Incident Report form (S&S-50). If you check this box on Set Up Screen 1, the system will automatically generate an S&S-50 form for you to complete.

**Other Safety Occurrences not Otherwise Classified Incidents (Injuries from slips and falls, electric shock, etc.):** [Other Safety Occurrences not Otherwise Classified](#) may include slip and fall accidents and electric shock incidents. Yard derailments that meet a threshold should also be reported here. Other Safety occurrences not Otherwise Classified resulting in one or more injuries (but not meeting any other reportable incident thresholds) are reported using the Safety and Security Monthly Summary Report form (S&S-50). Other Safety Occurrences not Otherwise Classified that meet any threshold other than the injury threshold are reported using the Reportable Incident form (S&S-40).

### Example 8 — Other Incidents

**Example:** A Demand Response (DR) vehicle is crushed by a falling tree which resulted in the death of 1 transit employee, 2 transit passengers requiring immediate medical attention away from the scene, and \$20,000.00 in estimated property damage.

**Solution:**

Number of Reportable Injuries	Number of Reportable Fatalities	Property Damage Amount
2	1	\$20,000

Complete a Reportable Incident Report form (S&S-40), choosing Other Safety Occurrences not Otherwise Classified on Report Set Up Screen 1 because the fatality makes it a reportable incident.

### Report Set Up Screen 2

**Report Set Up Screen 2**

**Were there Fatalities or Injuries involved with the incident being reported?**

Please check the applicable item(s) listed below for this incident.

One or more fatalities  
Enter the number of fatalities:

One or more injuries (immediate medical transport away from scene)  
Enter the number of injuries:

No fatalities or injuries to report

**Were there Property Damages associated with the incident being reported?**

Please check the applicable item listed below for this incident.

Property damages equal to, or greater than, \$25,000.

No property damages to report or total property damage is less than \$25,000.

Enter the dollar amount of estimated property damage: \$

**Did this incident involve an Evacuation for Life Safety reasons?**  Yes  No

**Were Transit Vehicles involved in this incident?**  Yes  No

Report Set Up Screen 2 collects the number of injuries and/or fatalities, the amount of property damage associated with the event(s), and whether the incident involved an evacuation for life safety reasons. If you checked Collision on Report Set Up Screen 1 (except in Ferry Boat mode), Report Set Up Screen 2 will include the question: "Were transit vehicles involved in the incident?"

For all events, excluding Hazardous Material Spills and Derailments, if you indicate "No" to fatalities, injuries and the question, "Did this Incident Involve an Evacuation for Life Safety reasons?", and you check no property damage to report or total property damage is less than \$25,000, the incident is not reported on an S&S-40. However, the incident may qualify to be reported on the S&S-50. Please see the Safety and Security Monthly Summary Report form (S&S-50) portion of the manual for further explanation of what is reportable on the S&S-50.

Hazardous Material Spills, Mainline Derailments and Evacuations for Life Safety reasons are always reportable regardless of the number of injuries and/or fatalities and/or the amount of property damage.

**Fatalities:** Enter the total number of [transit passengers](#), [transit facility occupants](#), [transit employees](#), [other workers](#), [trespassers](#), and [others](#) who died as a result of the incident(s) being reported.

**Injuries:** Enter the total number of transit passengers, transit facility occupants, transit employees, other workers, trespassers, and others who received [injuries](#) requiring immediate medical attention away from the scene as a result of the incident(s) being reported.

## 2010 Safety and Security Reporting Manual

### Example 9 —Injury Reporting

**Example:** A motor vehicle rear-ends a transit bus which results in 2 transit passengers and 1 motor vehicle operator requiring immediate medical attention away from the scene. The estimated property damage is \$2,000.00.

**Solution:**

Number of Reportable Injuries	Number of Reportable Fatalities	Property Damage Amount
3	0	\$2,000.00

This incident is reported on the Reportable Incident Report form (S&S-40) because of the number of injuries that resulted from the incident.

**Estimated Property Damage:** Without property damage values, FTA cannot conduct impact analyses that utilize property damage. Please enter the total estimated dollar amount required to repair or replace all vehicles (including transit revenue, non-revenue and non-transit vehicles) or public or private property / facilities (including track, signals, buildings, and private facilities) damaged as a result of the incident. If no property damage was incurred, enter a zero. [Property damage](#) includes but is not limited to the following:

- Transit and non-transit vehicle damage
- Stations as well as non-transit facilities
- Rights-of-way (ROW) and items surrounding rights-of-way (ROW), such as utility poles
- Bus stops
- Maintenance facilities and other private property.

The key points regarding estimated property damage are:

- Estimated damage includes not only transit property damage but also damage to other vehicles and property (other than personal property) involved in the incident that are not owned by the transit agency.
- The amount paid to repair or replace property (or an estimate made for insurance purposes) is reported for property damage. In the case of a total vehicle loss, the blue book value can be used as an estimate. It is also acceptable for your agency to establish standard property damage totals for specific incident types, or estimate the value of each event on a case-by-case basis.
- The cost of medical attention (hospital or doctor fees) is not included in the property damage total.
- The cost of clearing wreckage or damage to non-transit agency property is also included in the property damage value.
- The cost of an accident or criminal investigation is not included in the estimated property damage.
- Damage to personal property, such as laptops, cell phones, or other personal property items, is not included in the estimated property damage.

### Example 10 — Collision Property Damage

**Example:** A heavy rail (HR) vehicle collides with a passenger car at a grade crossing. The passenger car is totaled; the train will require a new coupler and some bodywork. The car has an estimated value of \$8,000 (transit agency uses the car's blue book value or other reasonable estimate of present value). The cost of the coupler is \$30,000; other bodywork to the train is estimated at \$10,000.

**Solution:**

Number of Reportable Injuries	Number of Reportable Fatalities	Property Damage Amount
0	0	\$48,000.00

This incident is reported on the Reportable Incident Report form (S&S-40) because total property damage meets the \$25,000 reporting threshold. Enter **\$48,000** (\$8,000 + \$30,000 + \$10,000) for the total property damage.

## 2010 Safety and Security Reporting Manual

Example 11 — Non-Reportable Collision		
<b>Example:</b> A transit passenger exits a transit bus, crosses the street in front of the bus, and is struck and killed by a passing motor vehicle.		
<b>Solution:</b>		
Number of Reportable Injuries	Number of Reportable Fatalities	Property Damage Amount
0	0	\$0
This incident is not reportable because the transit passenger had left the transit system/property.		

**An Evacuation Due to Life Safety Reasons:** All [evacuations](#) of transit property for life safety reasons are reportable. A life safety event is one that presents an imminent danger to people in or on transit property. Examples of [life safety events](#) include fires, the presence of smoke, hazardous material spills and electrical hazards. Evacuations due to operational issues are not reportable.

The life safety requirement is intended to capture events that pose serious threats to those in the transit environment. For example, a situation that requires transit passengers to leave a vehicle due to a flammable fuel leak or a passenger firing a weapon on a vehicle are both evacuations for life safety reasons.

Removing passengers or an operator from a vehicle after a collision is not, even if for medical attention, reported as an evacuation.

Passengers transferred from one transit vehicle to another due to a service breakdown do not represent an evacuation due to life safety reasons.

### Example 12 — Evacuation

**Example:** A Bus (MB) is evacuated because of a compressed natural gas (CNG) leak on the vehicle. No one is injured.

**Solution:** Complete a Reportable Incident Report form (S&S-40) because the evacuation was due to a life safety event — the CNG leak.

**Were Transit Vehicles Involved:** If transit vehicles were involved in the incident, select **Yes**, otherwise select **No**. This question is only asked if the reporter selects Collision on Report Set Up Screen 1. However, this question is not asked for Ferryboat collisions.

## Basic Information Screen

**Basic Information**

**Incident Number:** New    **Mode / Type of Service:** MB / DO

**Date of incident:**    January ▾    Day ▾    Year ▾

**Time of incident:**    Hours ▾    Minutes ▾    AM/PM ▾

**Approximate address of incident:**   

**Incident description:**   

**Is there another person to contact for more detailed information regarding this incident?**     Yes     No

First name:     Last name:

Contact number:  (123)123-1234

## 2010 Safety and Security Reporting Manual

**Date and Time of Incident:** Report the date and time the incident occurred, in a 00:00 format, using the drop-down menus.

**Approximate address of Incident:** For Non-Rail modes, excluding ferryboats, enter the street address or nearest intersection. For Rail modes, enter the line and station name, the line and distance from the nearest station, or the rail milepost. For Ferryboats, enter the longitude and latitude.

**Incident Description:** Describe how the incident occurred. Be descriptive but concise—responses are limited to 2000 characters. If you exceed 2000 characters, you will be alerted and will need to edit the description before continuing.

**Other Contact Person Information:** FTA may need to contact the individual completing the form or another agency-designated contact concerning details that may not be clear, or to further clarify data. If someone other than the safety or security contact person should be contacted, please complete this section.

### Collision Screens

The collision screens for **Rail Collision**, **Non-rail Collision**, or **Ferryboat Collision** vary slightly, depending on mode. There are four basic information screens for reporting a collision within a mode: Collision Event information screen, Transit Vehicle Involved screen, Collision information screen, and Other Motor Vehicle Involved screen (not applicable for Ferry Boat reporting).

#### Rail Collision

The rail collision screens collect information about the number of rail transit trains and other motor vehicles involved, the location of the collision, what the transit train collided with, the type of collision, and the weather and right-of-way conditions at the time of the collision.

#### Rail Collision Event Information Screen

#### Rail Collision Event Information

**Incident Number:** New    **Mode / Type of Service:** LR / DD

Using the lists below, please provide the following Collision Event details.

**Number of Rail Transit Trains involved:**

**Location:**

- Revenue facility: transit station
- Non-revenue facility
- Right-of-way: grade crossing
- Right-of-way: not a grade crossing
- Other ▶ Please describe

**Collision with:**

- Motor vehicle
- Person
- Animal
- Fixed object |
- Rail vehicle
- Other

**Number of Other Motor Vehicles involved:**

**Number of Rail Transit Trains Involved:** Enter the number of rail transit trains involved in the collision.

**Location:** Select the location (i.e., revenue facility, grade crossing) where the collision occurred. If the location is not listed, select "Other" and use the **Describe** box to provide a location description. Grade crossings are not limited to intersections with vehicular traffic. A grade crossing can be a pedestrian-only crossing.

## 2010 Safety and Security Reporting Manual

**Collision With:** Select whether a motor vehicle, a person, an animal, an object, or another rail vehicle was involved in the collision with the transit train. If the list does not contain a description that fits your needs, select Other.

- Collision with a bicyclist should be reported as a collision with a **Person**
- Collision with a moped, scooter, motorcycle, transit vehicle (other than rail), charter bus, or school bus should be reported as a collision with a **Motor Vehicle**.

**Number of Other Motor Vehicles Involved:** If you checked **Motor Vehicle** in **Collision With**, enter the number of motor vehicles other than the transit vehicle (i.e., automobiles, motorcycles, buses) that were involved in the collision. For example, a chain reaction incident might involve the transit vehicle and 3 other vehicles. Number of Other Motor Vehicles Involved would then be 3.

### Rail Collision Rail Transit Train Involved Screen

**Rail Collision Rail Transit Train Involved**

Incident Number: **New**    Mode / Type of Service: **LR / DO**

Using the lists below, please provide the following Rail Transit Trains Involved details.

Number of Cars in Rail Transit Train:

Number of Cars Derailed:

**Train action:**

- Going straight
- Making a stop
- Leaving a stop
- Negotiating a curve
- Proceeding through a switch
- Parked
- Other ▶ Please describe

**Collision type:**

- Head-on
- Rear-ended
- Angle
- Other front impact
- Sideswipe
- Other ▶ Please describe

**Train speed:**  /mph

**Vehicle manufacturer:**    
Other ▶ Please describe

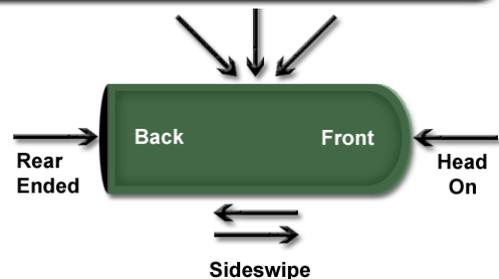
This screen is completed for each rail transit train involved in the collision (as previously indicated on the Rail Collision Event Information screen).

**Number of Cars in Rail Transit Train:** Enter the total number of cars in the rail transit train.

**Number of Cars Derailed:** Of the total number of cars in the rail transit train, enter the number of cars that derailed as a result of the collision.

**Train Action:** Select the physical movement of the train when the collision occurred (i.e., going straight, making a transit stop). If the action is not listed, select Other and use the **Describe** box to provide a description of the action.

**Collision Type:** Select the appropriate collision type. The area of the vehicle that was impacted during the collision defines collision type. Each choice is from the point of view of the transit vehicle. For example, rear-ended means that another



## 2010 Safety and Security Reporting Manual

vehicle hit the back of the rail transit train, while rear-ending means the rail transit train hit the back of another vehicle. Any point of contact on the side of the train is reported as an Angle.

**Train Speed:** Enter the estimated speed (in miles per hour) at which the rail transit train was traveling when the collision occurred. If you do not know the exact speed, you may estimate. The posted or design speed within a corridor may be used as the estimated train speed.

### Example 13 — Collision Type Reporting

**Example: Rear-End Collision** - A train is hit in the rear by another train.

**Solution:** Select **Rear-ended**

**Example: Rear-End Collision** - A train strikes a motor vehicle from behind.

**Solution:** Select **Rear-ending**

**Vehicle Manufacturer:** Use the **Vehicle manufacturer** drop-down to select the manufacturer of the rail transit train. If the manufacturer is not listed, select Other and use the **Describe** box to provide the name of the manufacturer.

The following Rail manufacturers are provided in the **Vehicle Manufacturer** drop-down list:

### Rail Manufacturer Codes

ABB	Asea Brown Boveri Ltd.	GEC	General Electric Corporation	PST	Pullman-Standard
ACF	American Car and Foundry Company	GMC	General Motors Corporation	PTC	Perley Thomas Car Company
AEG	AEG Transportation Systems	GTC	Gomaco Trolley Company	RHR	Rohr Corporation
AMI	Amrail Inc.	HIT	Hitachi	SDU	Siemens Mass Transit Division
ASK	AAI/Skoda	HSC	Hawker Siddeley Canada	SFB	Societe Franco-Belge De Material
BBB	Blue Bird Corporation	KAW	Kawasaki Rail Car Inc. (formerly Kawasaki Heavy Industries)	SLC	St. Louis Car Company
BFC	Breda Transportation Inc.	MAF	Maferesa	SOF	Soferval
BOM	Bombardier Corporation	MBB	M.B.B.	SUM	Sumitomo Corporation
BUD	Budd Company	MKI	American Passenger Rail Car Company (formerly Morrison-Knudsen)	TCC	Tokyo Car Company
BVC	Boeing Vertol Company	MPT	Motive Power Industries (formerly Boise Locomotive)	UTD	UTDC Inc.
CVL	Canadian Vickers Ltd.			WAM	Westinghouse-Amrail
DWC	Duewag Corporation				

### Rail Collision Information Screen

**Rail Collision Information**

**Incident Number:** New      **Mode / Type of Service:** LR / DO

Using the lists below, please provide the following Collision Right-of-way details.

*Rail Collision Event Details*

**Weather:**

<input type="radio"/> Clear	<input type="radio"/> Cloudy
<input type="radio"/> Foggy / misting	<input type="radio"/> Raining
<input type="radio"/> Snowing / sleeting	<input type="radio"/> Other ▶ Please describe <input type="text"/>

**Lighting:**

<input type="radio"/> Daylight	<input type="radio"/> Sun in eyes of transit vehicle operator
<input type="radio"/> Twilight	<input type="radio"/> Sun in eyes of other vehicle operator
<input type="radio"/> Night	<input type="radio"/> Other ▶ Please describe <input type="text"/>

*Rail Collision Right-of-Way Information*

**Rail alignment:**

- Exclusive right-of-way: tunnel
- Exclusive right-of-way: elevated track
- Exclusive right-of-way: at grade
- Exclusive right-of-way: sidings / rail yard / other non-revenue track
- Shared with other rail vehicles (controlled access to other non-rail vehicles)
- Non-exclusive right-of-way: shared with vehicles or pedestrians
- Other ▶ Please describe

**Grade crossing control (if applicable):**

<input type="radio"/> Active devices: crossing gates	<input type="radio"/> Active devices: quad gates
<input type="radio"/> Active devices: flashing lights only	<input type="radio"/> Active devices: train approaching sign
<input type="radio"/> Active devices: traffic signal	<input type="radio"/> Passive devices: stop sign
<input type="radio"/> Passive devices: cross bucks	<input type="radio"/> No control device
<input type="radio"/> Other ▶ Please describe <input type="text"/>	

**Right-of-way conditions:**

<input type="radio"/> Dry	<input type="radio"/> Wet
<input type="radio"/> Snow / slush	<input type="radio"/> Ice
<input type="radio"/> Debris	<input type="radio"/> Other ▶ Please describe <input type="text"/>

**Weather:** Select the weather conditions at the time of the collision. If the weather condition is not listed, or if the incident occurred indoors, select Other and use the **Describe** box to provide a description of the weather condition, or explain that the incident occurred indoors. A sunny day is reported as Clear. Hot or Cold are not acceptable weather conditions.

**Lighting:** Select the lighting condition that best describes the lighting (i.e., daylight, night) under which the collision occurred. If the lighting type is not listed, select Other and use the **Describe** box to provide a description of the lighting. For example, if the incident occurred in a tunnel, you would check Other and type in Artificial Lighting. Twilight encompasses both the time of sunrise (dawn) and sunset (dusk).

#### Example 14 — Weather Condition Reporting

##### Example: Fog / Safety Incident

A monorail vehicle (MO) leaves the station in foggy conditions.

**Solution:** Select **Foggy / Misting**

##### Example: Indoors Safety Incident

A passenger is killed as a result of an incident involving an elevator in a station.

**Solution:** Select **Other** and state that the incident happened indoors.

## 2010 Safety and Security Reporting Manual

**Rail Alignment:** Select the rail alignment of the right-of-way (ROW) on which the collision occurred. If the alignment type is not listed, select Other and use the **Describe** box to provide a description of the alignment. Your selection should coincide with the choice made under **Location** on the **Rail Collision Event Information** Screen.

**Grade Crossing Control:** Select the grade crossing control device that most closely describes the traffic control or other devices present during the grade crossing collision. Make a selection here only if the collision occurred at a grade crossing. If the grade crossing control is not listed, select Other and use the **Describe** box to provide a description. Your selection here must coincide with the choice made under **Location** on the **Rail Collision Event Information** screen. If the collision did not occur at a grade crossing, leave this section blank and do not select No control device.

**Right-of-Way Conditions:** Select the condition of the ROW surface (i.e., dry, wet) on which the collision occurred. If the condition type is not listed, select Other and use the **Describe** box to provide a description of the condition.

### Collision Non-Transit Vehicle Involved Screen

The screenshot shows a web form titled "Rail Collision Event Information". At the top, it displays "Incident Number: New" and "Mode / Type of Service: CR / DO". Below this, a instruction reads: "Using the lists below, please provide the following Collision Event details." The form contains three main sections: "Location:" with radio buttons for "Parking facility" and "Other" (with a "Please describe" text box); "Collision with:" with radio buttons for "Private vehicle(s)", "Private vehicle with a person", "Private vehicle with fixed object", and "Other"; and "Number of Other Motor Vehicles involved:" with a text input field. At the bottom, there are three buttons: "Close", "View Form", and "Next".

This screen will only appear if you are reporting a non-transit collision that occurred on transit owned or occupied property. This screen becomes available only if you checked No to the question "Were Transit Vehicles Involved in this incident?" on Set Up Screen 2.

An incident involving a non-revenue transit vehicle may be reportable here if it meets one of the reportable incident thresholds and affects revenue operations. Examples of such incidents include:

- A supervisory vehicle being used to drive an operator to a bus to start revenue service collides with a private vehicle. This collision affects revenue operations.
- Rail maintenance equipment collides with a fixed object on a revenue track and affects the train schedule. The incident impacts revenue service.

**Location:** Select the location (i.e., parking facility, other) where the collision occurred. If Other is selected, use the **Describe** box to provide a description of the location.

**Collision With:** Select the type of collision that is being reported. For example, an employee leaving work in his personal vehicle collides with a person in a parking lot of a transit facility, check Private vehicle with a person.

**Number of Other Motor Vehicles Involved:** Enter the total number of non-transit or non-revenue transit motor vehicles involved in this collision. For example, if the Collision type is checked as "Private vehicle with a person", the Number of Other Motor Vehicles Involved would be 1. If a vehicle cuts off another vehicle but was not struck, do not include that vehicle.

### Rail Collision Other Motor Vehicle Involved Screen

**Rail Collision Other Motor Vehicle Involved**

**Incident Number:** New    **Mode / Type of Service:** LR / DO

Using the lists below, please provide the following Other Motor Vehicle Involved details.

**Other Motor Vehicle type:**

- Automobile
- Light truck or SUV
- Motorcycle
- Tractor trailer
- Commercial rail or Amtrak
- Other ▶ Please describe

**Other Motor Vehicle action:**

- Going straight
- Making a turn
- Going backwards
- Stopped
- Other ▶ Please describe

**Collision type:**

- Head-on
- Rear-ended
- Rear-ending
- Other front impact
- Angle
- Sideswipe
- Other ▶ Please describe

This screen is completed for each other motor vehicle involved in the collision (as previously indicated on the Rail Collision Event Information screen).

**Other Motor Vehicle Type:** Select the type of [other motor vehicle](#) (i.e., automobile, motorcycle) that was involved in the collision. If the vehicle type is not listed, select Other and use the **Describe** box to enter the vehicle type. A passenger van is reported as an Automobile. A moped or scooter is considered a motorcycle.

**Other Motor Vehicle Action:** Select the physical action that the other motor vehicle was involved in when the collision occurred (i.e., going straight, making a turn). If the action is not listed, select Other and use the **Describe** box to provide the action, for example, changing lanes.

**Collision Type:** Select the appropriate collision type. The area of the vehicle that was impacted during the collision defines collision type. Each choice is from the point of view of the other motor vehicle.

- **Head-on:** A collision where two vehicles are coming from opposite directions and hit each other straight on the front; or in a T-bone or broadside collision, where one vehicle drives head-on into the side of another vehicle (angle).
- **Rear-ending:** A collision where a vehicle hits another vehicle in the rear.
- **Angle:** Any point of contact on the side of the vehicle including the mirror. Used in combination with Head-on for a T-bone or broadside collision.
- **Rear-ended:** A collision where a vehicle is hit in the rear by another vehicle.
- **Other front impact:** Any collision that involves the front of the vehicle that would not be described as head-on. For example, catching the front bumper on an object while making a turn would be reported as Other Front Impact.
- **Sideswipe:** A collision where two vehicles travelling in the same direction or opposite directions contact each other along the side in a scraping-type action.

### Non-Rail Collision

The Non-rail transit collision screens collect information about the number of transit vehicles and other motor vehicles involved, the location of the collision, what the transit vehicle collided with, the type of collision, and the weather and roadway conditions at the time of the collision.

### Non-Rail Collision Event Information Screen

#### Non-Rail Collision Event Information

**Incident Number:** New    **Mode / Type of Service:** MB / DO

Using the lists below, please provide the following Collision Event details.

**Number of Non-rail Transit Vehicles involved:**

**Location:**

- Revenue facility: transit center
- Non-revenue facility
- Roadway: grade crossing
- Roadway: not grade crossing or intersection
- Roadway: intersection
- Other ▶ Please describe

**Collision with:**

- Motor vehicle
- Person
- Animal
- Fixed object
- Other ▶ Please describe

**Number of Other Motor Vehicles involved:**

**Number of Non-Rail Transit Vehicles Involved:** Enter the number of non-rail transit vehicles involved in the collision.

**Location:** Select the location (i.e., revenue facility, grade crossing, intersection) where the collision occurred. If the location is not listed, select Other and use the **Describe** box to provide a description of the location.

- A Bus Stop located on a street is either a **Roadway: intersection** or **Roadway: not grade crossing or intersection**.
- A ramp is a considered a **Roadway**.
- Grade crossings are intersections of tracks and streets but are not limited to intersections with vehicular traffic. For instance, they can also be intersections of tracks and pedestrian only crossings.
- An exit from a parking lot that entails a merge with the flow of traffic is not considered an intersection.

**Collision With:** Select whether a motor vehicle, a person, an animal, or a fixed object was involved in the collision with the transit vehicle. If the list does not contain a description that fits your needs, select Other and use the Describe box to enter a description.

- Collision with a person on a bicycle should be reported as a collision with a **Person**.
- Collision with a moped, motorcycle, charter or school bus or another transit vehicle should be reported as a collision with a **Motor Vehicle**.
- Collision with a loose object such as a ladder that has fallen off the back of a truck should be reported as a collision with **Other** and "ladder" typed in the **Describe** box.

## 2010 Safety and Security Reporting Manual

### Example 15 — Reporting Collision With

**Example: Collision with a Fire Hydrant**

A demand response (DR) vehicle hits a fire hydrant. As a result, the operator and two passengers are injured seriously enough to require immediate transport to a nearby hospital.

**Solution:** Select **Fixed object**

**Example: Collision with a Motorcycle**

A trolleybus (TB) strikes a motorcyclist, who dies three days after transport to hospital due to injuries sustained in this incident.

**Solution:** Select **Motor vehicle**.

**Number of Other Motor Vehicles Involved:** Enter the number of other motor vehicles (other than the transit vehicle) involved in the collision (i.e., automobiles, motorcycles). If a vehicle cuts off another vehicle but was not struck, do not include that vehicle.

### Example 16 — Number of Other Motor Vehicles Involved Reporting

**Example: Car 1 cuts-off a bus which causes the bus to collide with Car 2.**

Report 1 transit vehicle, 1 other motor vehicle (Car 2) (Car 1 did not make contact).

**Example: Car 1 hits a bus and then Car 1 proceeds to hit Car 2.**

Report 1 transit vehicle and 2 other motor vehicles (Cars 1 and 2).

**Example: Car 1 hits a bus and then the bus proceeds to hit Car 2.**

Report 1 transit vehicle and 2 other motor vehicles (Cars 1 and 2).

## Non-Rail Collision Transit Vehicle Involved Screen

**Non-Rail Collision Transit Vehicle Involved Information**

Incident Number: New    Mode / Type of Service: MB / DD

Using the lists below, please provide the following Transit Vehicle Involved details.

**Transit vehicle type:**

<input type="radio"/> Transit: bus - articulated	<input type="radio"/> Transit: bus
<input type="radio"/> Transit: bus - cutaway	<input type="radio"/> Transit: trolleybus
<input type="radio"/> Transit: demand response vehicle	<input type="radio"/> Transit: vanpool vehicle
<input type="radio"/> Transit: jitney or público vehicle	<input type="radio"/> Transit: non-revenue vehicle
<input type="radio"/> Other ▶ Please describe <input type="text"/>	

**Vehicle action:**

<input type="radio"/> Going straight
<input type="radio"/> Making a stop
<input type="radio"/> Leaving a stop
<input type="radio"/> Negotiating a curve
<input type="radio"/> Making a turn
<input type="radio"/> Other ▶ Please describe <input type="text"/>

**Collision type:**

<input type="radio"/> Head-on	<input type="radio"/> Rear-ended
<input type="radio"/> Rear-ending	<input type="radio"/> Other front impact
<input type="radio"/> Angle	<input type="radio"/> Sideswipe
<input type="radio"/> Other ▶ Please describe <input type="text"/>	

**Vehicle speed:**  /mph

**Vehicle manufacturer:**    
Other ▶ Please describe

## 2010 Safety and Security Reporting Manual

This screen is completed for each non-rail transit vehicle type involved in the collision (as previously indicated on the Non-Rail Collision Event Information screen).

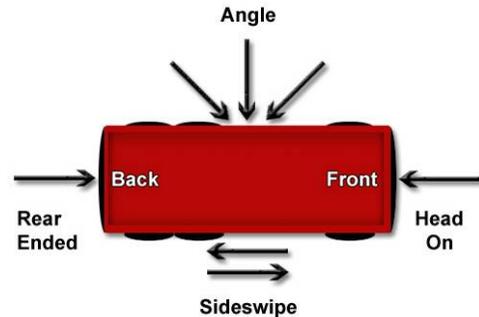
**Transit Vehicle Type:** Select the type of transit vehicle involved in the collision. If the vehicle type is not listed, select Other and use the **Describe** box to provide a description of the transit vehicle type.

**Vehicle Action:** Select the physical movement of the transit vehicle at the time of collision (i.e., going straight, making a stop). If the action is not listed, select Other and use the **Describe** box to provide a description of the action.

- If the transit vehicle was **Stopped**, select **Other** and type in “stopped”.
- Report **Changing lanes** as either **Going straight** or check **Other** and type in “changing lanes”.
- Report **backing up** in **Other** and type in “backing up”.
- Making a stop or leaving a stop is used when the transit vehicle is coming to or leaving from a regularly scheduled service stop.

**Collision Type:** Select the appropriate collision type. The area of the vehicle that was impacted during the collision defines collision type. Each choice is from the point of view of the transit vehicle. For example, rear-ended means that another vehicle hit the back of the transit vehicle, while rear-ending means the transit vehicle hit the back of another vehicle.

- **Head-on:** A collision where two vehicles are coming from opposite directions and hit each other straight on the front; or in a T-bone or broadside collision, where one vehicle drives head-on into the side of another vehicle (angle).
- **Rear-ending:** A collision where a vehicle hits another vehicle in the rear.
- **Angle:** Any point of contact on the side of the vehicle including the mirror. Used in combination with Head-on for a T-bone or broadside collision.
- **Rear-ended:** A collision where a vehicle is hit in the rear by another vehicle.
- **Other front impact:** Any collision that involves the front of the vehicle that would not be described as head-on. For example, catching the front bumper on an object while making a turn would be reported as Other Front Impact.
- **Sideswipe:** A collision where two vehicles travelling in the same direction or opposite directions contact each other along the side in a scraping type action.



**Vehicle Speed:** Enter the speed (in miles per hour) at which the transit vehicle was traveling when the collision occurred. If you do not know the exact speed, you may estimate. Enter zero if the transit vehicle was stopped. The posted speed limit of a roadway can also be used as the reported speed.

**Vehicle Manufacturer:** Use the Vehicle manufacturer drop-down to select the manufacturer of the vehicle. If the manufacturer is not listed, select Other and use the **Describe** box to provide the name of the manufacturer.

### Example 17 — Collision Impact Type Reporting

**Example: Rear-End Collision**

A trolleybus (TB) is rear-ended.

**Solution:** Select **Rear-ended**

**Example: Head On Collision**

A Bus (MB) strikes a utility pole head on (i.e., with the front of the bus).

**Solution:** Select **Head-on** because the incident involved the front of the bus striking a stationary object

The following Non-Rail manufacturers are provided in the **Vehicle Manufacturer** drop-down list:

#### Non-Rail Manufacturer Codes

AAI	Allen Ashley Inc.	EDN	EIDorado National (formerly EI Dorado/EBC/National Coach/NCC	NFA	New Flyer of America
ACF	American Car and Foundry Company	EII	Eagle Bus Manufacturing	NOV	NOVA Bus Corporation
ACI	American Coastal Industries	FDC	Federal Coach	OBI	Orion Bus Industries Ltd. (formerly Ontario Bus Industries)
AEG	AEG Transportation Systems	FIL	Flyer Industries Ltd (aka: New Flyer Industries)	OCC	Overland Custom Coach Inc.
All	American Ikarus Inc.	FLT	Fixette Corporation	OTC	Oshkosh Truck Corporation
AMG	AM General Corporation	FLX	Flexible Corporation	PCI	Prevost Car Inc.

## 2010 Safety and Security Reporting Manual

### Non-Rail Manufacturer Codes

AMT	AmTran Corporation	FRC	Freightliner Corporation	PLY	Plymouth Division-Chrysler Corporation
ASK	AAI/Skoda	FRD	Ford Motor Corporation	PST	Pullman-Standard
ATC	American Transportation Corporation	FSC	Ferrostaal Corporation	RIC	Rico Industries
BBB	Blue Bird Corporation	GCC	Goshen Coach	SBI	SuperBus Inc.
BFC	Breda Transportation Inc.	GIL	Gillig Corporation	SCC	Sabre Bus and Coach Corporation (formerly Sabre Carriage Comp.)
BIA	Bus Industries of America	GIR	Girardin Corporation	SHI	Shepard Brothers Inc.
BOM	Bombardier Corporation	GLV	Glaval Bus	SPC	Startrans (Supreme Corporation)
BOY	Boyertown Auto Body Works	GMC	General Motors Corporation	SPC	Supreme Corporation
BRA	Braun	GML	General Motors of Canada Ltd.	SPR	Spartan Motors Inc.
CBC	Collins Bus Corporation (formerly Collins Industries Inc./COL)	GOM	Gomaco	SSI	Stewart Stevenson Services Inc.
CBW	Carpenter Industries LLC (formerly Carpenter Manufacturing Inc.)	HSC	Hawker Siddeley Canada IKU - Ikarus USA Inc.	STR	Starcraft
CCC	Cable Car Concepts Inc.	INT	International	SVM	Specialty Vehicle Manufacturing Corporation
CCI	Chance Bus Inc. (formerly Chance Manufacturing Company/CHI)	KKI	Krystal Koach Inc.	TBB	Thomas Built Buses
CEQ	Coach and Equipment Manufacturing Company	MAN	American MAN Corporation	TEI	Trolley Enterprises Inc.
CHA	Chance Manufacturing Company	MBZ	Mercedes Benz	TMC	Transportation Manufacturing Company
CMC	Champion Motor Coach Inc.	MCI	Motor Coach Industries International (DINA)	TOU	Tourstar
CMD	Chevrolet Motor Division - GMC	MDI	Mid Bus Inc.	TRN	Transcoach
CVL	Canadian Vickers Ltd.	MTC	Metrotrans Corporation	TTR	Terra Transit
DIA	Diamond Coach Corporation (formerly Coons Manufacturing Inc./CMI)	NAB	North American Bus Industries Inc. (formerly Ikarus USA Inc./IKU)	TTT	Turtle Top
DMC	Dina/Motor Coach Industries (MCI)	NAT	North American Transit Inc.	VAN	Van Hool N.V.
DTD	Dodge Division - Chrysler Corporation	NAV	Navistar International Corporation (aka: International/INT)	VOL	Volvo
DUC	Dutcher Corporation	NBC	National Mobility Corporation	WCI	Wheeled Coach Industries Inc.
EBC	EIDorado Bus (EBC Inc.)	NCC	National Coach Corporation	WOC	Wide One Corporation
		NEO	Neoplan - USA Corporation	WTI	World Trans Inc. (aka: Mobile-Tech Corporation)
				WYC	Wayne Corporation (formerly Wayne Manufacturing Company/WAY)

Non-Rail Collision Information Screen

**Non-Rail Collision Information**

**Incident Number:** New    **Mode / Type of Service:** MB / DO

Using the lists below, please provide the following Collision Roadway details.

*Non-Rail Collision Event Details*

**Weather:**

<input type="radio"/> Clear	<input type="radio"/> Cloudy
<input type="radio"/> Foggy / misting	<input type="radio"/> Raining
<input type="radio"/> Snowing / sleeting	<input type="radio"/> Other ▶ Please describe
	<input type="text"/>

**Lighting:**

<input type="radio"/> Daylight	<input type="radio"/> Sun in eyes of transit vehicle operator
<input type="radio"/> Twilight	<input type="radio"/> Sun in eyes of other vehicle operator
<input type="radio"/> Night	<input type="radio"/> Other ▶ Please describe
	<input type="text"/>

*Non-Rail Roadway Information*

**Roadway configuration:**

<input type="radio"/> Limited access highway	<input type="radio"/> Divided highway
<input type="radio"/> Street	<input type="radio"/> Bridge
<input type="radio"/> Intersection / grade crossing	<input type="radio"/> Tunnel
<input type="radio"/> Private property	<input type="radio"/> Ramp
<input type="radio"/> Other ▶ Please describe	<input type="text"/>

**Intersection (if applicable):**

<input type="radio"/> Traffic signal	<input type="radio"/> Police officer / flagman / other person
<input type="radio"/> Stop sign	<input type="radio"/> Yield sign
<input type="radio"/> Crossing gate	<input type="radio"/> No control device / individual / sign
<input type="radio"/> Other ▶ Please describe	<input type="text"/>
<input type="radio"/> Not Applicable	

**control** **Grade Crossing (if applicable):**

<input type="radio"/> Active devices: crossing gates	<input type="radio"/> Active devices: quad gates
<input type="radio"/> Active devices: flashing lights only	<input type="radio"/> Active devices: train approaching sign
<input type="radio"/> Active devices: traffic signal	<input type="radio"/> Passive devices: stop sign
<input type="radio"/> Passive devices: cross bucks	<input type="radio"/> No control device
<input type="radio"/> Other ▶ Please describe	<input type="text"/>
<input type="radio"/> Not Applicable	

**Road conditions:**

<input type="radio"/> Dry	<input type="radio"/> Wet
<input type="radio"/> Snow / slush	<input type="radio"/> Ice
<input type="radio"/> Debris	<input type="radio"/> Other ▶ Please describe
	<input type="text"/>

**Weather:** Select the weather conditions at the time of the collision. If the weather condition is not listed, or if the incident occurred indoors, select Other and use the **Describe** box to provide a description of the weather condition, or explain that the incident occurred indoors. A sunny day is reported as Clear. Hot or Cold are not acceptable weather conditions.

## 2010 Safety and Security Reporting Manual

---

**Lighting:** Select the lighting condition that best describes the lighting (i.e., daylight, night) under which the collision occurred. If the lighting type is not listed, select Other and use the **Describe** box to provide a description of the lighting. For example, if the incident occurred in a tunnel you would check Other and type in Artificial Lighting.

Twilight encompasses both just before sunrise (dawn) and just after sunset (dusk).

**Roadway Configuration:** Select the configuration of the roadway (i.e., bridge, highway) on which the collision occurred. If the configuration type is not listed, select Other and use the **Describe** box to provide a description of the roadway configuration. Your selection should coincide with the choice made previously under **Location** on the **Non-Rail Collision Event Information** screen.

### Example 18 — Weather Condition Reporting

**Example: Clear Weather / Safety Incident**

A paratransit van leaves the roadway in clear weather conditions.

**Solution:** Select **Clear**

**Example: Fog / Safety Incident**

A paratransit van leaves the roadway in foggy conditions.

**Solution:** Select **Foggy / Misting**

**Example: Indoors Safety Incident**

A passenger is killed as a result of an incident involving an elevator in a station.

**Solution:** Select **Other** and state that the incident happened indoors.

### Example 19 – Non-Rail Collision Information, Roadway Configuration and Non-Rail Collision Event Information Reporting

**Example:** Under **Non-Rail Collision Event Information** you reported **Location** as **Roadway: grade crossing**.

**Solution:** Under **Non-Rail Collision Information; Roadway Configuration** select **Intersection / grade crossing**.

**Example:** Under **Non-Rail Collision Event Information** you reported **Location** as **Roadway: not grade crossing or intersection**.

**Solution:** Under **Non-Rail Collision Information; Roadway Configuration** do not select **Intersection / grade crossing**

**Example:** Under **Non-Rail Collision Event Information** you reported **Location** as **Roadway: intersection**.

**Solution:** Under **Non-Rail Collision Information; Roadway Configuration** select **Intersection / grade crossing**.

**Intersection (if applicable):** Select the intersection control device that most closely describes the traffic control or other devices present during the collision. Complete only if collision occurred at an intersection. If the intersection control type is not listed, select Other and use the **Describe** box to provide a description. If the incident did not occur at an intersection, select **Not applicable**. If you selected a **Location** of **Roadway: grade crossing** on the **Collision Event Information** screen and selected **Roadway Configuration** as **Intersection / grade crossing** on this screen, be sure to choose the correct signaling device for the intersection.

**Grade Crossing Control (if applicable):** Select the grade crossing control device that most closely describes the traffic control or other devices present during the collision. If the incident did not happen at a grade crossing, select **Not Applicable**. If the grade crossing control type is not listed, select Other and use the **Describe** box to provide a description. Do not indicate signaling in this section for a street intersection. Only choose signaling in this section if you have chosen **Grade Crossing** as the **Location** on the **Non-Rail Collision Event Information** screen and also indicated **Grade Crossing** on the **Non-Rail Collision Information; Roadway Configuration** section.

**Road Conditions:** Select the condition of the road surface (i.e., dry, wet) on which the collision occurred. If the condition is not listed, select Other and use the **Describe** box to provide a description of the road conditions.

### Collision Non-Transit Vehicle Involved Screen

**Non-Rail Collision Event Information**

Incident Number: New    Mode / Type of Service: MB / DD

Using the lists below, please provide the following Collision Event details.

**Location:**

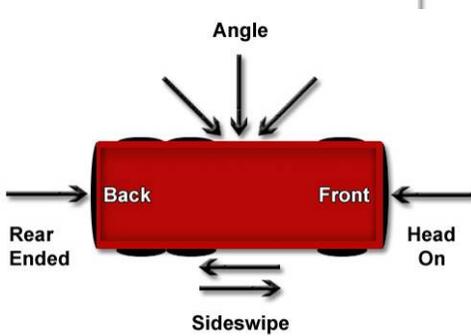
Parking facility  
 Other    ▶ Please describe

**Collision with:**

Private vehicle(s)  
 Private vehicle with a person  
 Private vehicle with fixed object  
 Other    ▶ Please describe

**Number of Other Motor Vehicles involved:**



The diagram shows a red vehicle with four arrows indicating collision types: 'Angle' from the top, 'Rear Ended' from the left, 'Head On' from the right, and 'Sideswipe' from the bottom. The vehicle is labeled 'Back' on the left and 'Front' on the right.

This screen will only appear if you are reporting a non-transit collision that occurred on or involved transit owned or occupied property. This screen becomes available only if you checked No to the question “Were Transit Vehicles Involved in this incident?” on Set Up Screen 2.

An incident involving a non-revenue transit vehicle may be reportable here if it meets one of the reportable incident thresholds and affects revenue operations. Examples of such incidents include:

- A supervisory vehicle being used to drive an operator to a bus to start revenue service collides with a private vehicle. This collision affects revenue operations.
- Rail maintenance equipment collides with a fixed object on a revenue track and affects the train schedule. The incident impacts revenue service.

**Location:** Select the location (i.e., parking facility, other) where the collision occurred. If Other is selected, use the **Describe** box to provide a description of the location.

**Collision Type:** Select the type of collision that is being reported. For example, an employee leaving work in his personal vehicle collides with a person in a parking lot of a transit facility, check Private vehicle with a person.

**Number of Other Motor Vehicles Involved:** Enter the total number of non-transit or non-revenue transit motor vehicles involved in this collision. For example, if the **Collision type** is checked as Private vehicle with a person, the Number of Other Motor Vehicles Involved would be 1. If a vehicle cut off another vehicle but was not struck, do not include that vehicle.

### Non-Rail Collision Other Motor Vehicle Involved Screen

**Non-Rail Collision Other Motor Vehicle Involved Information**

**Incident Number:** New    **Mode / Type of Service:** MB / DO

Using the lists below, please provide the following Other Motor Vehicle Involved details.

**Other Motor Vehicle type:**

<input type="radio"/> Automobile	<input type="radio"/> Light truck or SUV
<input type="radio"/> Motorcycle	<input type="radio"/> Tractor trailer
<input type="radio"/> Rail vehicle	<input type="radio"/> Other ▶ Please describe <input type="text"/>

**Other Motor Vehicle action:**

<input type="radio"/> Going straight	<input type="radio"/> Stopped
<input type="radio"/> Going backwards	<input type="radio"/> Negotiating a curve
<input type="radio"/> Making a turn	<input type="radio"/> Other ▶ Please describe <input type="text"/>

**Collision type:**

<input type="radio"/> Head-on	<input type="radio"/> Rear-ended
<input type="radio"/> Rear-ending	<input type="radio"/> Other front impact
<input type="radio"/> Angle	<input type="radio"/> Sideswipe
<input type="radio"/> Other ▶ Please describe <input type="text"/>	

This screen is completed for each other motor vehicle involved in the collision (as previously indicated on the Non-Rail Collision Event Information screen).

**Other Motor Vehicle Type:** Select the type of other motor vehicle (i.e., automobile, motorcycle) that was involved in the collision. If the vehicle type is not listed, select Other and use the **Describe** box to describe the vehicle type.

- A passenger van is reported as **Automobile**
- A moped or scooter is considered a **Motorcycle**

**Other Motor Vehicle Action:** Select the physical action that the other motor vehicle was involved in when the collision occurred (i.e., going straight, making a turn). If the action is not listed, select Other and use the **Describe** box to provide the action. Report changing lanes as either Going Straight or check Other and type in Changing Lanes in the Describe box.

**Collision Type:** Select the appropriate collision type. The area of the vehicle that was impacted during the collision defines collision type. Each choice is from the point of view of the other motor vehicle.

- **Head-on:** A collision where two vehicles are coming from opposite directions and hit each other straight on the front; or in a T-bone or broadside collision, where one vehicle drives head-on into the side of another vehicle (angle).
- **Rear-ending:** A collision where a vehicle hits another vehicle in the rear.
- **Angle:** Any point of contact on the side of the vehicle including the mirror. Also used in combination with Head-on for a T-bone or broadside collision.
- **Rear-ended:** A collision where a vehicle is hit in the rear by another vehicle.
- **Other front impact:** A collision that involves the front of the vehicle that would not be described as head-on. For example, catching the front bumper on an object while making a turn would be reported as Other Front Impact.
- **Sideswipe:** A collision where two vehicles travelling in the same direction or opposite directions contact each other along the side in a scraping type action.

### Ferryboat Collision

The ferryboat collision screens collect information about the number of water transit vehicles involved, the location of the collision, what the transit vehicle collided with, the type of collision, and the weather and tide conditions at the time of the collision.

## 2010 Safety and Security Reporting Manual

### Ferryboat Collision Event Information Screen

**Ferryboat Collision Event Information**

**Incident Number:** New    **Mode / Type of Service:** FB / PT

Using the lists below, please provide the following Collision Event details.

**Number of Transit Ferries involved:**

**Location:**

- Revenue facility: terminal center
- Parking facility
- Revenue facility: other
- Non-revenue facility
- Other   ▶ Please describe

**Collision with:**

- Vessel
- Animal
- Other   ▶ Please describe
- Person
- Dock / terminal center

**Number of Transit Ferries Involved:** Enter the number of transit ferries involved in the collision.

**Location:** Select the location (i.e., revenue facility, non-revenue facility) where the collision occurred. If the location is not listed, select Other and use the **Describe** box to provide a description.

**Collision With:** Select the vessel (other than the transit ferry), object or person that was involved in the collision. If the list does not contain a description that fits your needs, select Other and use the **Describe** box to provide a description of the item.

#### Example 20 — Reporting Collision With

##### **Example: Collision with a Dock**

A ferryboat (FB) hits a dock. As a result, the operator and two passengers are injured seriously enough as to require immediate transport to a nearby hospital.

Select **Dock / terminal center**.





## 2010 Safety and Security Reporting Manual

---

use the **Describe** box to provide a description of the lighting.

Twilight encompasses both just before sunrise (dawn) and just after sunset (dusk).

**Tide Conditions:** Select condition of the tide (i.e., low, non-tidal waters) at the time of the collision. If the conditions are not listed, select Other and use the **Describe** box to provide a description of the tide conditions.

**Current Conditions:** Select condition of the current (i.e., slow, fast) at the time of the collision. If the conditions are not listed, select Other and use the **Describe** box to provide a description of the current conditions.

### Mainline Derailment

The Mainline Derailment screens are only available for rail modes. Note that Mainline Derailment screens are only used if the derailment did not occur as a result of a collision – if the derailment was a consequence of a collision; report the incident as a collision. Detailed information is provided below.

#### Mainline Derailment Event Information Screen

**Mainline Derailment Event Information**

**Incident Number:** New    **Mode / Type of Service:** LR / DO

Using the lists below, please provide the following Mainline Derailment Event details.

**Number of Rail Trains involved:**

**Location:**

- Revenue facility: transit station
- Non-revenue facility
- Right-of-way: grade crossing
- Right-of-way: trackway
- Other: ▶ Please describe

**Configuration:**

- Switch
- Curve
- Tangent (straight) track

**Number of Rail Transit Trains Involved:** Enter the number of rail transit trains involved in the mainline derailment.

**Location:** Select the location (i.e., revenue facility, grade crossing) where the derailment occurred. If the location is not listed, select Other and use the **Describe** box to provide a description of the location.

**Configuration:** Select the type of track on which the derailment took place (i.e., [switch](#), curve, [tangent track](#)).

## 2010 Safety and Security Reporting Manual

### Derailment Rail Transit Train Involved Screen

**Derailment Rail Transit Train Involved**

**Incident Number:** New    **Mode / Type of Service:** LR / DO

Using the lists below, please provide the following Rail Transit Trains Involved details.

**Number of Cars in Train:**

**Number of Cars Derailed:**

**Train action:**

- Going straight
- Making a stop
- Leaving a stop
- Negotiating a curve
- Proceeding through a switch
- Parked
- Other   ▶ Please describe

**Train speed:**  /mph

**Vehicle manufacturer:**    
Other   ▶ Please describe

This screen is completed for each rail transit train involved in the derailment (previously indicated on the Mainline Derailment Event Information screen).

**Number of Cars in Rail Transit Train:** Enter the total number of cars in the rail transit train.

**Number of Cars Derailed:** Of the total number of cars in the rail transit train, enter the number of cars that derailed.

**Train Action:** Select the physical movement of the train when the derailment occurred (i.e., going straight, making a transit stop). If the action is not listed, select Other and use the **Describe** box to provide a description of the action.

**Train Speed:** Enter the estimated speed (in miles per hour) at which the rail transit train was traveling when the derailment occurred. If you do not know the exact speed, you may estimate. The posted or design speed within a corridor may be used as the estimated train speed.

**Vehicle Manufacturer:** Use the **Vehicle manufacturer** drop-down to select the manufacturer of the rail transit train. If the manufacturer is not listed, select Other and use the **Describe** box to provide the name of the manufacturer.

### Derailment Information Screen

#### Derailment Information

**Incident Number:** New    **Mode / Type of Service:** LR / DO

Using the lists below, please provide the following Derailment Right-of-way details

*Derailment Event Details*

**Weather:**

<input type="radio"/> Clear	<input type="radio"/> Cloudy
<input type="radio"/> Foggy / misting	<input type="radio"/> Raining
<input type="radio"/> Snowing / sleeting	<input type="radio"/> Other ▶ Please describe <input type="text"/>

**Lighting:**

<input type="radio"/> Daylight	<input type="radio"/> Sun in eyes of transit vehicle operator
<input type="radio"/> Twilight	<input type="radio"/> Sun in eyes of other vehicle operator
<input type="radio"/> Night	<input type="radio"/> Other ▶ Please describe <input type="text"/>

*Derailment Right-of-Way Information*

**Rail alignment:**

- Exclusive right-of-way: tunnel
- Exclusive right-of-way: elevated track
- Exclusive right-of-way: at grade
- Exclusive right-of-way: sidings / rail yard / other non-revenue track
- Shared with other rail vehicles (controlled access to other non-rail vehicles)
- Non-exclusive right-of-way: shared with vehicles / pedestrians
- Other ▶ Please describe

**ROW conditions:**

<input type="radio"/> Dry	<input type="radio"/> Wet
<input type="radio"/> Snow / slush	<input type="radio"/> Ice
<input type="radio"/> Debris	<input type="radio"/> Other ▶ Please describe <input type="text"/>

**Weather:** Select the weather conditions at the time of the derailment. If the weather condition is not listed, or if the incident occurred indoors, select **Other** and use the **Describe** box to provide a description of the weather condition, or explain that the incident occurred indoors. A sunny day is reported as Clear. Hot or Cold are not acceptable weather conditions.

**Lighting:** Select the lighting condition that best describes the lighting (i.e., daylight, night) under which the derailment occurred. If the lighting type is not listed, select **Other** and use the **Describe** box to provide a description of the lighting. For example, if the incident occurred in a tunnel you would check **Other** and type in Artificial Lighting.

Twilight encompasses both just before sunrise (dawn) and just after sunset (dusk).

**Rail Alignment:** Select the rail alignment of the right-of-way (ROW) on which the derailment occurred. If the alignment type is not listed, select **Other** and use the **Describe** box to provide a description of the alignment. Your selection should coincide with the choice made under **Location** on the Mainline Derailment Event Information screen.

**Right-of-Way Conditions:** Select the condition of the ROW surface (i.e., dry, wet) on which the derailment occurred. If the condition type is not listed, select **Other** and use the **Describe** box to provide a description of the condition.

### Fire

Fire screens vary slightly depending on the mode being reported.

For a fire event to be reportable on the S&S-40, fire suppression personnel (e.g., in house personnel or fire fighters) or equipment (e.g., fire extinguishers or hoses) must have been involved and a reportable incident threshold must have been met (fatality or injury (transported) or evacuation or property damage equal to or greater than \$25,000).

Arsons are not reported as fires, but as security incidents.

## 2010 Safety and Security Reporting Manual

### Rail Fire Event Details Screen

**Rail Fire Event Details**

**Incident Number:** New      **Mode / Type of Service:** LR / DD

Using the lists below, please provide the following Fire Event details.]

**Location:**

- In vehicle
- Revenue facility: transit center
- Revenue facility: parking facility
- Revenue facility: other
- Non-revenue facility
- Right-of-way: outside vehicle
- Other      ▶ Please describe

**Type of Fire:**

- Fuel
- Battery
- Other electrical
- Cable
- Smoking (e.g. tobacco) materials
- Other      ▶ Please describe

**Fuel type(If applicable):**

- Not applicable
- Bunker fuel
- Diesel
- Electric battery
- Ethanol
- Hybrid diesel
- Grain additive
- Liquefied natural gas
- Methanol
- Bio-diesel
- Compressed natural gas
- Dual fuel
- Electric propulsion
- Gasoline
- Hybrid gasoline
- Kerosene
- Liquefied petroleum gas
- Other      ▶ Please describe

**Location:** Select the location (i.e., in vehicle, revenue facility) where the fire took place. If the location is not listed, select Other and use the **Describe** box to provide a description of the location. For clarity, the **In Vehicle** option would be chosen for fires that also happen on external locations on the vehicle.

#### Example 23 — Fire Incident Type Reporting

**Example:** A fire at a transit-owned bus shelter occurs and results in \$15,000.00 of estimated property damage. There are no injuries.

**Solution:**

Number of Reportable Injuries	Number of Reportable Fatalities	Property Damage Amount
0	0	\$15,000

This incident is reported on the Safety and Security Monthly Summary Report (S&S-50) form, as there were no injuries and property damages did not meet or exceed \$25,000.

**Type of Fire:** Select the type of fire (i.e., fuel, other electrical). If the type of fire is not listed, select Other and use the **Describe** box to provide a description of the fire.

#### Example 24 — Fire Details

**Example:** A passenger drops a lit cigarette in a station. The fire causes extensive damage, requires fire suppression equipment, and the passenger requires immediate medical attention away from the scene.

**Solution:** Select: **Smoking (e.g., tobacco) materials**

**Fuel Type (If applicable):** Only indicate the **Fuel Type** if the fire was related to fuel. If fuel was not a factor in the fire, choose **Not applicable**. If the type of fuel is not listed, select Other and use the **Describe** box to provide a description of the fuel.

### Non-Rail Fire Event Details Screen

#### Non-Rail Fire Event Details

Incident Number: **New**    Mode / Type of Service: **MB / DO**

Using the lists below, please provide the following Fire Event details.

**Location:**

- In vehicle
- Revenue facility: transit center
- Revenue facility: parking facility
- Revenue facility: other
- Non-revenue facility
- Right-of-way: outside vehicle
- Other [▶ Please describe](#)

**Type of Fire:**

- Fuel
- Battery
- Other electrical
- Cable
- Smoking (e.g. tobacco) materials
- Other [▶ Please describe](#)

**Fuel type(If applicable):**

- Not applicable
- Bunker fuel
- Diesel
- Electric battery
- Ethanol
- Hybrid diesel
- Grain additive
- Liquefied natural gas
- Methanol
- Bio-diesel
- Compressed natural gas
- Dual fuel
- Electric propulsion
- Gasoline
- Hybrid gasoline
- Kerosene
- Liquefied petroleum gas
- Other [▶ Please describe](#)

**Location:** Select the location (i.e., in vehicle, revenue facility) where the fire took place. If the location is not listed, select Other and use the **Describe** box to provide a description of the location. For clarity, the **In Vehicle** option would also be chosen for fires that happen in the tire area or other external locations on the vehicle.

**Type of Fire:** Select the type of fire (i.e., fuel, other electrical). If the type of fire is not listed, select Other and use the **Describe** box to provide a description of the fire.

**Fuel Type (If applicable):** Only indicate the **Fuel Type** if the fire was related to fuel. If fuel was not a factor in the fire, choose **Not applicable**. If the type of fuel is not listed, select Other and use the **Describe** box to provide a description of the fuel.

## 2010 Safety and Security Reporting Manual

### Ferryboat Fire Event Details Screen

**Ferryboat Fire Event Details**

Incident Number: **New**    Mode / Type of Service: **FB / DO**

Using the lists below, please provide the following Fire Event details.

**Location:**

- In vehicle
- Revenue facility: terminal center
- Revenue facility: parking facility
- Revenue facility: other
- Non-revenue facility
- Other    ▶ Please describe

**Type of Fire:**

- Fuel
- Battery
- Other electrical
- Cable
- Smoking (e.g. tobacco) materials
- Other    ▶ Please describe

**Fuel type(If applicable):**

- Not applicable
- Bunker fuel
- Diesel
- Other    ▶ Please describe
- Bio-diesel
- Electric propulsion
- Gasoline

Close    View Form    Save

**Location:** Select the location (i.e., in vehicle, revenue facility) where the fire took place. If the location is not listed, select Other and use the **Describe** box to provide a description of the location. For clarity, the **In Vehicle** option would also be chosen for fires that happen on external locations on the vehicle.

**Type of Fire:** Select the type of fire (i.e., fuel, other electrical). If the type of fire is not listed, select Other and use the **Describe** box to provide a description of the fire.

**Fuel Type (If applicable):** Only indicate the **Fuel Type** if the fire was related to fuel. If fuel was not a factor in the fire, choose **Not applicable**. If the type of fuel is not listed, select Other and use the **Describe** box to provide a description of the fuel.

### Hazardous Material Spill

Hazardous Material Spill screens vary slightly depending on the mode being reported.

The definition of hazardous material spill requires that the incident must have caused an imminent danger to life, health, or the environment, and that special attention was given to clean up of the spill for the incident to be considered reportable.

### Rail Hazardous Material Spill Event Details Screen

**Rail Hazardous Material Spill Event Details**

Incident Number: **New**      Mode / Type of Service: **LR / DO**

Using the lists below, please provide the following Hazardous Material Spill Event details.

**Location:**

- In vehicle
- Revenue facility: transit center
- Revenue facility: parking facility
- Revenue facility: other
- Non-revenue facility
- Other ▶ Please describe

**Material type (if applicable):**

- Not applicable
- Bunker fuel
- Diesel
- Electric battery
- Ethanol
- Hybrid diesel
- Grain additive
- Liquefied natural gas
- Methanol
- Bio-diesel
- Compressed natural gas
- Dual fuel
- Electric propulsion
- Gasoline
- Hybrid gasoline
- Kerosene
- Liquefied petroleum gas
- Other ▶ Please describe

**Location:** Select the location (i.e., in vehicle, revenue facility) where the hazardous material spill took place. If the location is not listed, select Other and use the **Describe** box to provide a description of the location.

**Material Type:** If the hazardous material spill was related to fuel, select the appropriate type. If the type of material is not listed, select Other and use the **Describe** box to provide a description of the hazardous material.

### Non-Rail Hazardous Material Spill Event Details Screen

**Non Rail Hazardous Material Spill Event Details**

|

**Incident Number:** New    **Mode / Type of Service:** MB / DO

Using the lists below, please provide the following Hazardous Material Spill Event details.

**Location:**

- In vehicle
- Revenue facility: transit Station
- Revenue facility: parking facility
- Revenue facility: other
- Non-revenue facility
- Other ▶ Please describe

**Material type (if applicable):**

<input type="radio"/> Not applicable	<input type="radio"/> Bio-diesel
<input type="radio"/> Bunker fuel	<input type="radio"/> Compressed natural gas
<input type="radio"/> Diesel	<input type="radio"/> Dual fuel
<input type="radio"/> Electric battery	<input type="radio"/> Electric propulsion
<input type="radio"/> Ethanol	<input type="radio"/> Gasoline
<input type="radio"/> Hybrid diesel	<input type="radio"/> Hybrid gasoline
<input type="radio"/> Grain additive	<input type="radio"/> Kerosene
<input type="radio"/> Liquefied natural gas	<input type="radio"/> Liquefied petroleum gas
<input type="radio"/> Methanol	<input type="radio"/> Other ▶ Please describe <input type="text"/>

**Location:** Select the location (i.e., in vehicle, revenue facility) where the hazardous material spill took place. If the location is not listed, select Other and use the **Describe** box to provide a description of the location.

**Material Type:** If the hazardous material spill was related to fuel, select the appropriate type. If the type of material is not listed, select Other and use the **Describe** box to provide a description of the hazardous material.

### Ferryboat Hazardous Material Spill Event Details Screen

**Ferryboat Hazardous Material Spill Event Details**

**Incident Number: New**    **Mode / Type of Service: FB / DO**

Using the lists below, please provide the following Hazardous Material Spill Event details.

**Location:**

- In vessel
- Revenue facility: terminal center
- Revenue facility: parking facility
- Revenue facility: other
- Non-revenue facility
- Other ▶ Please describe

**Material type (if applicable):**

- Not applicable
- Bunker fuel
- Diesel
- Other ▶ Please describe
- Bio-diesel
- Electric propulsion
- Gasoline

**Location:** Select the location (i.e., in vehicle, revenue facility) where the hazardous material spill took place. If the location is not listed, select Other and use the **Describe** box to provide a description of the location.

**Material Type:** If the hazardous material spill was related to fuel, select the appropriate type. If the type of material is not listed, select Other and use the **Describe** box to provide a description of the hazardous material

### Act of God

An Act of God is a natural and unavoidable catastrophe that interrupts the expected course of events. The Act of God screen is designed to capture the following incidents: floods, earthquakes, hurricanes, tornados, ice storms, snow storms or other natural catastrophes.

The Act of God screens (2) are the same for all modes operated. Be advised, it is unusual for an Act of God to be reported independently from another incident (i.e., a fire, hazardous material spill).

## 2010 Safety and Security Reporting Manual

### Act of God Event Details Screen

#### Act of God Event Details

**Incident Number: New**    **Mode / Type of Service: MB / DO**

Using the lists below, please provide the following Act of God Event details.

**Type:**

- Earthquake
- Flood
- Hurricane
- Tornado
- Other high winds
- Lightning
- Snow storm
- Ice storm
- Other ▶ Please describe

**Type:** Select the Act of God type from the choices listed. If the choice that best describes your occurrence is not listed, choose Other and use the **Describe** box to provide a description of the event.

#### Act of God Event Details

**Incident Number: New**    **Mode / Type of Service: MB / DO**

Using the lists below, please provide the following Act of God Event details.

**Location of Property Damage, Injuries or Fatalities:**

- In vehicle / vessel
- Revenue facility: transit station / center or terminal g
- Revenue facility: parking facility
- Revenue facility: other ▶ Please describe
- Non-revenue facility ▶ Please describe
- Right-of-way: grade crossing
- Right-of-way: not grade crossing
- Roadway: grade crossing
- Roadway: intersection
- Roadway: not grade crossing or intersection
- Roadway: transit stop
- Other ▶ Please describe

**Location of Property Damage, Injuries or Fatalities:** Select all applicable locations of the property damage, injuries or fatalities that occurred as a result of the Act of God. These locations should relate specifically to your transit agency. Do not simply put Louisiana as the location of the hurricane; instead, indicate the transit facility that was damaged during the hurricane.

## 2010 Safety and Security Reporting Manual

### Evacuation

An evacuation for life safety reasons means an evacuation occurred because of the presence of imminent danger to people in or on transit property. Examples of life safety events include [fires](#), the presence of smoke, hazardous material spills and electrical hazards. Evacuations due to operational issues are not reportable.

A person removed from a vehicle for medical treatment is not reported as an evacuation. The evacuation of an operator and/or passengers from a vehicle after a collision is not reported as an evacuation as this does not meet the intent of life safety.

The Evacuation screen is the same for all modes operated.

#### Evacuation Event Details Screen

**Evacuation Event Details**

Incident Number: **New**    Mode / Type of Service: **MB / DO**

Using the lists below, please provide the following Evacuation Event details.

Was this Evacuation for life safety reasons?     Yes     No

What was Evacuated?

Evacuation location:

- In vehicle / vessel
- Revenue facility: transit station / center or terminal
- Revenue facility: other
- Non-revenue facility
- Other ▶ Please describe

**Was this Evacuation for Life Safety Reasons?:** This choice should always be Yes. If you answer No to this question, the evacuation should not be reported.

**What Was Evacuated?** Use this box to provide a brief description of the evacuation incident. For example, you might enter "8 transit passengers were evacuated to side of road."

**Evacuation Location:** Select the location (i.e., in vehicle/vessel, revenue facility) from which people were evacuated. If the location is not listed, select Other and use the **Describe** box to provide a description of the location.

#### Example 25 — Evacuation Reporting

**Example:** A bus operator notices flames coming out of the rear of the bus.

**Solution:**

Evacuation for life safety reasons?  
Yes

What was evacuated?  
Bus passengers to side of road

Evacuation location  
In vehicle / vessel

This is a reportable incident and is reported on the S&S-40 form.

### Security Event

Security events include terrorism-related events such as bombs threats, bombings, chemical / biological / nuclear / radiological releases and other system security events such as arson, hijacking, sabotage and cyber security events, as well as other major personal events such as aggravated assault, rape, suicide, attempted suicide and homicide.

## 2010 Safety and Security Reporting Manual

---

The Security Incident screen is the same for all modes and types of service.

### Security Event Details Screen

There are two Security Event Details screens. If you choose the “A bomb threat / bombing / chemical / biological / nuclear / radiological / arson / hijacking / sabotage / cyber security event” option on Set Up Screen 1, the following security event details screen will be presented:

**Security Event Details**

**Incident Number: New**    **Mode / Type of Service: MB / DO**

Using the lists below, please provide the following Security Event details.

**Was the incident intentional?**                       Yes     No

**Security incident type:** *Terrorism related events*

- Bomb threat
- Bombing
- Chemical / biological / nuclear / radiological

*Other: system security events*

- Arson
- Sabotage
- Hijacking
- Cyber

**Location:**

- In vehicle / vessel
- Revenue facility: transit station / center or terminal
- Revenue facility: parking facility
- Revenue facility: other
- Non-revenue facility
- Other ▶ Please describe

If you choose the “Assault / robbery / rape / burglary / suicide / attempted suicide / larceny or theft (including motor vehicle theft from a parking lot) / vandalism / homicide” option on Set Up Screen 1, the following security event details screen will be presented:

## 2010 Safety and Security Reporting Manual

### Security Event Details

**Incident Number:** New    **Mode / Type of Service:** LR / DO

Using the lists below, please provide the following Security Event details.

**Was the incident intentional?**     Yes     No

**Security incident type:** *Other: personal events*

<input type="radio"/> Assault	<input type="radio"/> Robbery
<input type="radio"/> Rape	<input type="radio"/> Burglary
<input type="radio"/> Suicide	<input type="radio"/> Motor vehicle theft
<input type="radio"/> Attempted suicide	<input type="radio"/> Larceny / theft
<input type="radio"/> Vandalism	<input type="radio"/> Homicide

**Location:**

<input type="radio"/> In vehicle / vessel
<input type="radio"/> Revenue facility: transit station / center or terminal
<input type="radio"/> Revenue facility: parking facility
<input type="radio"/> Revenue facility: other
<input type="radio"/> Non-revenue facility
<input type="radio"/> Other ▶ Please describe <input type="text"/>

**Was the Incident Intentional?:** Select the appropriate choice.

**Security Incident Type:** Security Incident Type describes what incident has occurred and is being reported. For NTD reporting purposes, the victim of a rape is always reported as an injury.

**Location:** Select the location (i.e., in vehicle/vessel, revenue facility) where the security incident(s) occurred. If the location is not listed, select Other and use the **Describe** box to provide a description of the location.

### Other Incident

The Other Incident screen is designed to capture all Other Safety Occurrences not Otherwise Classified that meet S&S-40 reporting thresholds. As defined earlier in this manual, the injury threshold does not apply to Other Safety Occurrences not Otherwise Classified. In other words, Other Safety Occurrences not Otherwise Classified that result in injuries, but trigger none of the other reporting thresholds, are reported on the Safety and Security Monthly Summary Report form (S&S-50). To be reportable on the S&S-40 form, an Other Safety Occurrences not Otherwise Classified must result in a fatality, an evacuation for life safety reasons, or at least \$25,000 in estimated property damages.

The Other Incident screen is the same for all modes operated.

### Other Incident Event Details Screen

**Other Incident Event Details**

Incident Number: **New**    Mode / Type of Service: **MB / DO**

Using the lists below, please provide the following Other Incident Event details.

**Type:**         Other    ▶ Please describe

**Location:**     Boarding / alighting: With Stairs  
 Boarding / alighting: with lift or ramp  
 Boarding / alighting: Other  
 Boarding or alighting with stairs - not associated with lift  
 In vehicle / vessel: securement issue  
 In vehicle / vessel: not a securement issue  
 Revenue facility: elevator related  
 Revenue facility: escalator related  
 Revenue facility: ramp  
 Revenue facility: stairway  
 Revenue facility: platform / stop / waiting area  
 Revenue facility: parking facility  
 Revenue facility: other  
 Non-revenue facility  
 Other    ▶ Please describe

**Type:** Select **Other** as the type of incident and provide a description of the incident. For example, “yard derailment”, “electric shock”, “bridge collapse”, “slip and fall”, etc.

#### Example 26 — Other Incident Type Reporting

**Example: Electrocution**

A passenger in a light rail (LR) station enters the right-of-way (ROW), makes contact with the live third rail, and is killed.

**Solution:** Select **Other** and describe as **Electric Shock**

**Example: Other**

A bus (MB) crosses a bridge. The bridge collapses and ten transit passengers and one transit employee are killed.

**Solution:** Select **Other** and describe as **Bridge Collapse**.

**Example: Slip and Fall**

A transit operator slams on the brakes of a bus (MB) to avoid a collision. One transit passenger falls, hits their head, and dies ten days after the incident due to the injuries sustained.

**Solution:** Select **Other** and describe as **Slip and Fall**

**Location:** Select the location where the incident took place. If none of the locations listed apply, select Other and use the **Describe** box to provide a description of the incident location.

### Fatality and Injury Detail

These screens capture more detail on the person or persons who were injured or died as a result of the incident being reported. The system will generate a screen for each fatality and/or injury indicated on the Report Set Up Screen 2.

#### Example 27 — Other Incident Location

**Example: In Revenue Facility**

A passenger is killed on an escalator.

**Solution:** Select **Revenue facility: escalator related**





# 2010 Safety and Security Reporting Manual

Home e-File Annual Safety & Security Reports Communications Sys Admin Help

Form Name: Major Incident Report (S&S-40) Mode: MB Service: DO [Close Form](#)

Submit Date: Mode / Type of Service: MB / DO

Incident Types: Non-Rail Collision

Number Of Fatalities:

Number Of Injuries:

Estimated property damage: \$

**Basic Information**

Incident Number: 1 Mode / Type of Service: MB / DO

Date of incident:

Time of incident:

Approximate address of incident:

Incident description:

Is there another person to contact for more detailed information regarding this incident?  Yes  No

First name:  Last name:

Contact number:

**Non-Rail Collision Event Information**

Incident Number: 1 Mode / Type of Service: MB / DO

Using the lists below, please provide the following Collision Event details.

Number of Non-rail Transit Vehicles involved:

Location:

- Revenue facility: transit center
- Non-revenue facility
- Roadway: grade crossing
- Roadway: not grade crossing or intersection
- Roadway: intersection
- Other

# 2010 Safety and Security Reporting Manual

**Collision with:**

- Motor vehicle
- Person
- Animal
- Fixed object
- Other ▶ Please describe

**Number of Other Motor Vehicles involved:**

[▶ Add Transit Vehicle](#)

Delete Train Involved

## Non-Rail Collision Transit Vehicle Involved Information

Incident Number: 1    Mode / Type of Service: MB / DD

Using the lists below, please provide the following Transit Vehicle Involved details.

**Transit vehicle type:**

- Transit: bus - articulated
- Transit: bus - cutaway
- Transit: demand response vehicle
- Transit: jitney or público vehicle
- Other ▶ Please describe
- Transit: bus
- Transit: trolleybus
- Transit: vanpool vehicle
- Transit: non-revenue vehicle

**Vehicle action:**

- Going straight
- Making a stop
- Leaving a stop
- Negotiating a curve
- Making a turn
- Other ▶ Please describe

**Collision type:**

- Head-on
- Rear-ending
- Angle
- Other ▶ Please describe
- Rear-ended
- Other front impact
- Sideswipe

**Vehicle speed:**  /mph

**Vehicle manufacturer:**    
Other ▶ Please describe

## 2010 Safety and Security Reporting Manual

**Add Other Motor Vehicle**

Delete Other Motor Vehicle Involved

**Non-Rail Collision Other Motor Vehicle Involved Information**

Incident Number: 1    Mode / Type of Service: MB / DO

Using the lists below, please provide the following Other Motor Vehicle Involved details.

**Other Motor Vehicle type:**

Automobile                       Light truck or SUV  
 Motorcycle                         Tractor trailer  
 Rail vehicle                          Other ▶ Please describe

**Other Motor Vehicle action:**

Going straight                       Stopped  
 Going backwards                   Negotiating a curve  
 Making a turn                        Other ▶ Please describe

**Collision type:**

Head-on                                 Rear-ended  
 Rear-ending                          Other front impact  
 Angle                                     Sideswipe  
 Other ▶ Please describe

---

**Non-Rail Collision Information**

Incident Number: 1    Mode / Type of Service: MB / DO

Using the lists below, please provide the following Collision Roadway details.

*Non-Rail Collision Event Details*

**Weather:**

Clear                                       Cloudy  
 Foggy / misting                         Raining  
 Snowing / sleeting                       Other ▶ Please describe

**Lighting:**

Daylight                                   Sun in eyes of transit vehicle operator  
 Twilight                                    Sun in eyes of other vehicle operator  
 Night                                         Other ▶ Please describe

*Non-Rail Roadway Information*

**Roadway configuration:**

Limited access highway               Divided highway  
 Street                                       Bridge  
 Intersection / grade crossing         Tunnel  
 Private property                         Ramp  
 Other ▶ Please describe

---

**control**

**Intersection (if applicable):**

Traffic signal                               Police officer / flagman / other person  
 Stop sign                                    Yield sign  
 Crossing gate                               No control device / individual / sign  
 Other ▶ Please describe   
 Not Applicable

**Grade Crossing (if applicable):**

Active devices: crossing gates         Active devices: quad gates  
 Active devices: flashing lights only    Active devices: train approaching sign  
 Active devices: traffic signal            Passive devices: stop sign  
 Passive devices: cross bucks            No control device  
 Other ▶ Please describe   
 Not Applicable

**Road conditions:**

Dry     Wet  
 Snow / slush                                Ice  
 Debris                                        Other ▶ Please describe

## 2010 Safety and Security Reporting Manual

**Add Fatality**  
**Add Injury**

**Delete Injury**

**Person Information - Injuries**

**Incident Number: 1**    **Mode / Type of Service: MB / DO**

You've indicated that there were Injuries associated with this incident.  
Injuries Reported are those that involve transport away from the scene for treatment.  
Please provide the following information for each Injury involved.

**Person type:**

Person outside vehicles

- Person waiting for / leaving from transit
- Transit employee or contractor
- Other worker (e.g., commercial worker / utilities worker / etc.)
- Pedestrian: bicyclist
- Pedestrian: in crosswalk
- Pedestrian: not in crosswalk
- Pedestrian: person crossing tracks
- Pedestrian: person walking along tracks
- Other    ▶ Please describe

Person inside vehicles

- Transit vehicle rider
- Transit vehicle operators and staff
- Occupant of another vehicle

**Age range:**

- Child (12 and Under)
- Teen (13 - 18)
- Adult (19 - 60)
- Senior Citizen (60 and Up)
- Unknown

**Gender:**

- Male
- Female

**Close**    **Save**    **Submit**    **Delete**

### Editing the Reportable Incident Report (S&S-40) form

When reviewing the S&S-40 form, if any information has been reported incorrectly or if you forgot to enter a data item, buttons are provided on the left side of reports for you to add a new section (number of transit vehicles involved, number of other motor vehicles involved, injuries and fatalities) to report additional information. Check boxes are provided below the buttons to allow you to delete a Transit or Other Motor Vehicle Involved section or an Injury or Fatality section.

**Incident type and the date of an incident cannot be edited.** Also, the system does not allow you to delete an evacuation section of a report. To make these types of changes, the entire report must be deleted and a new report generated. See Deleting an S&S-40 form below.

To edit existing data, simply make your changes, scroll to the bottom of the form and click the **Save** button.

To add or delete certain sections of the form (number of transit vehicles involved, number of other motor vehicles involved, person information – injuries or fatalities), locate the blue **Add** buttons or the **Delete** check boxes at the top left of these sections.

### Example 28 — Adding, Deleting or Editing an Injury or Fatality on the S&S-40

#### **Example: Changing an injury to a fatality**

Major Incident # 24 was submitted indicating 1 injury that was transported from the scene for immediate medical attention; however, during the 30-day timeframe, the injury became a fatality.

**Solution:** Open Major Incident # 24, locate the Person Information – Injuries section of the form and check the **Delete Injury** box. Next, click the **Add Fatality** button to generate the Person Information – Fatalities screen. After entering the fatality information, click the **Submit** button at the bottom of the form to save and submit the revised form.

#### **Example: Adding an injury or fatality**

Major Incident # 2 was submitted without recording injuries that were transported away from the scene for immediate medical attention or reportable fatalities.

**Solution:** Open Major Incident # 2 click either the **Add Fatality** or **Add Injury** button and generate the appropriate screen. Should you need to report multiple or both (one screen for each injury or fatality) repeat the process. When you have entered data for all injuries and or fatalities click the **Save** button to Save the form or the **Submit** button to submit the revised form.

### **Submitting an S&S-40 form**

Once you have reviewed or edited the report and you are satisfied with the data, scroll to the bottom of the form and click the **Submit** button.

### **Deleting an S&S-40 form**

To delete an S&S-40 form, you must be signed in as the Safety Contact person, NTD Contact person, or the CEO.

From the **Safety and Security** tab, locate the S&S-40 form by incident number and click on the corresponding Reportable Incident Report (S&S-40) link. Once the S&S-40 is open, scroll to the bottom of the form and click the **Delete** button. A prompt confirming that you want to delete the report will appear. Click **OK**. Internet reporting will delete the report and return you to the **Safety and Security** tab.

Once a report has been deleted, it is completely removed from the system. Should you later realize that the report was needed, you will have to create a new Reportable Incident Report form (S&S-40).