TCRC - Reporting Air Brake Problems

Day: _____ **Month:** _____ **Year:** _____

Railway:	**Train Worked:**	**Subdivision:**	**Order Time:**
Weather Conditions: *(i.e….overcast, sunny, raining, snow, etc….)*			**Temperature:**
Train Length:	**Tonnage:**	**Empties:**	**Loads:**
Locomotives :			

Air Flow for Locomotive Consist (CFM): *(with brakes released and charged – stable flow)*

Origin - CFM:	**En-Route:**

Tail-End Brake Pipe Pressure: *(with brakes released and charged)*

Origin:	**En-Route:**

General Comments/Operational Concerns:

Your Name: _____ **Phone:** _____ **E-Mail:** _____

Please Fax completed forms to the TCRC National Legislative Director: (613) 235 1069