# National Rail System Standard / 5

# OCCURRENCE MANAGEMENT

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# PREFACE

## National Rail System (NRS) Standard

The objective of this NRS Standard is to provide a generic framework for the management of occurrences on the National Rail System. It is applicable for all activities associated with operation of the National Rail System and is designed to meet the requirements set out in the relevant legislation and the NZ Transport Agency guidelines.

It should be read in conjunction with other applicable NRS Standards and relevant Safety System documentation.

It is generic and specific to users of the National Rail System. The terminology chosen to apply to the National Rail System has been used in this NRS Standard.

## Review of National Rail System (NRS) Standards

NRS Standards are subject to periodic review and are kept up to date by the issue of amendments or new editions as necessary. The user is responsible for ensuring that they are in possession of the latest edition, and any applicable amendments.

Full details of all NRS Standards are available from KiwiRail. The Document Controller for all NRS Standards is KiwiRail.

Suggestions for improvements to NRS Standards should be addressed to KiwiRail head office. Any inaccuracy found in an NRS Standard should be notified immediately to enable appropriate action to be taken.

# CONTENTS

# 1 OCCURRENCE MANAGEMENT CONCEPTS

## 1.1 Scope

This National Rail System Standard covers the primary procedures and responsibilities for dealing with rail related occurrences.

## 1.2 Application

The objective of this system is to manage the continuous improvement of operating processes.

This can be achieved by measuring the "capability and stability" of critical elements. This means assessing their performance against agreed targets.

Change can then be introduced to poor performing processes before a failure results in a critical event.

This system is not intended for the capture of maintenance faults that do not impact on safety, nor is it designed as a notification system for customer service or service performance issues. Each organisation must ensure that it has supplementary processes for capturing this information.

Examples of supplementary systems are:

Fault and maintenance capture mechanisms:

- The "155" telephone system for faults (KiwiRail)
- The Mis 346 Maintenance Notification process for maintenance (KiwiRail)
- The AMICUS equipment "Bad Order" system (KiwiRail)

Performance Information Systems

- The AMICUS "TCTM" reporting screen (KiwiRail - Train Control)
- An Organisation's Daily Operations Report.

## 1.3 Definitions

| Abbreviation | Meaning |
|---|---|
| Accident | (Railways Act 2005) - means an occurrence associated with the operation of a rail vehicle or the use of railway infrastructure or railway premises that causes—<br>○ (a) the death of, or serious injury to, individuals; or<br>○ (b) significant damage to property<br>(HSE Act) - an event that causes any person to be harmed; or in different circumstances, might have caused any person to be harmed. |
| MBIE | Ministry of Business, Innovation, and Employment |
| Emergency Services | Means Fire, Police, Ambulance or Civil Defence Organisations. |
| Health | Ministry of Health |
| HSE Act | Health and Safety in Employment Act 1992 |
| Incident | (Railways Act 2005) means an occurrence, other than an accident, that is associated with the operation of a rail vehicle or the use of railway infrastructure or railway premises that placed, or could have placed,—<br>(a) a person at risk of death or serious injury; or<br>(b) property at risk of significant damage |
| Incident Controller (Emergency Services) | Means a Fire, Police, Ambulance or Civil Defence person appointed, or performing, the duties of Incident Controller (Emergency Services) at the site of an occurrence. |
| Investigator | Means a person appointed by an Access Provider, Operator or Agency to conduct, participate or represent that Organisation in an occurrence investigation. |
| Line Manager | Person appointed to be in overall charge of Rail Personnel in a defined area of rail activity. |
| NZTA | NZ Transport Agency |
| MED | Ministry of Economic Development |
| NCM | Network Control Manager (Access Provider) |
| Occurrence | Means anything that leads, or could lead, to damage to people, property, business processes, the environment, Rail Personnel or the public. It includes Accidents, Incidents, Near Hits and Emergencies. |
| OHLE | Overhead Line Equipment (traction) |
| RA Inspector | Regional Authority Inspector (either Dangerous Goods or Environmental) |
| Rail Incident Controller (RIC) | Means a person appointed, or performing, as designated by the Access Provider / Operator the duties of the Rail Incident Controller (RIC) at the site of an occurrence. The RIC is in charge of all Rail Personnel on site. |
| RV | Rail Vehicle (as defined by Railways Act 2005)<br>(a) means any vehicle that runs on, or uses, a railway line; and<br>(b) includes—<br>(i) a locomotive, rail carriage, rail wagon, railcar, light rail vehicle, rail maintenance vehicle (whether or not self-propelled), and any other vehicle prescribed as a rail vehicle by regulations; and<br>(ii) a vehicle designed to operate both on rails and off rails, but only when that vehicle is running on rails |

| | |
|---|---|
| Serious Harm | Conditions as defined by the HSE Act that amounts to, or results in, permanent loss of bodily function, or temporary severe loss of bodily function. |
| Serious Injury | For the purposes of this Standard serious injury as specified in the Railways Act 2005 shall mean the same as serious harm as defined by the HSE Act. |
| Service Delay | Train service delayed on departure or en-route as a result of the occurrence (does not include delays resulting from planned speed restrictions). |
| TAIC | Transport Accident Investigation Commission |
| | |

## 1.4 Roles of External Agencies

**Emergency Service & Civil Defence Personnel** - Are empowered by relevant Acts to undertake tasks to preserve life and protect property. These agencies have priority to perform their functions ahead of any investigation or recovery action by an Access Provider or Operator. The Rail Incident Controller needs to closely liaise with the Incident Controller (Emergency Services) at the scene of an occurrence to ensure that evidence is preserved where possible.

**NZ Transport Agency (NZTA)** - is a body established by the Land Transport Management Act 2003 as amended in 2008 The NZTA is responsible for promoting the safety of rail related activities through the administration of the Railways Act 2005.

**Transport Accident Investigation Commission** - The TAIC is a body established by the Transport Accident Investigation Commission Act 1990 to investigate accidents and incidents that occur in the rail, air and sea transport environment.

**Ministry of Business, Innovation, and Employment** - MBIE is responsible for the administration of the Health and Safety in Employment Act 1992.

**NZ Police** - The NZ Police may take full jurisdiction over major accidents sites within New Zealand. They may become involved at the scene, and may take an investigative role, in cases of serious injury and death, or where activities of a criminal nature are suspected. Refer to s4.

**Regional and Local Authorities** - Territorial Authorities under the Resource Management Act, and the Dangerous Goods Act, are given distinct authorities (along with the Department of Labour) for managing, and controlling, incidents and/or events involving either dangerous goods or environmental aspects.

Regional Councils are responsible for discharges to air, land, water and coastal matters. Territorial local authorities (district/city councils) are responsible for land use and subdivision matters.

## 1.5 Occurrence Classification

To ensure each occurrence is investigated appropriately a four level classification system has been established. This is illustrated in Table 1 below. Note that some occurrences such as wrong side failures, potential and actual security threats including terrorism, may require specialist technical reports. The detail of such specialist reports is not covered in this NRSS.

TABLE 1

| Class | Type | Guidance | Some Examples | Investigator | Written Report Type |
|---|---|---|---|---|---|
| 1 | Major | Results in serious harm/injury or fatality (to Rail Personnel or passengers)<br><br>Causes significant disruption to rail operations (normally exceeding 12 hours) (or two consecutive metro periods<br><br>Major damage to property (likely to be > $200,000) | Major running train derailments<br><br>Major landslides/washouts | Must be independent of the "Day to Day" processes involved.<br>Technical experts and process owners may assist. | Full detailed report<br>(Manuscript) |
| 2 | Moderate | Level Crossing Collisions resulting in serious harm/injury or fatality<br><br>Mainline collisions resulting in serious harm/injury<br><br>Weather related and other events not resulting in serious injury or harm<br><br>Causes major delays or cancellations (>4hrs but <12 hrs)<br><br>Significant Damage to property (> $75,000 but < $200,000)<br><br>Breach of standards, rules or | Collisions with Trespassers<br><br>SPAD A's<br><br>Near Collision with Maintenance/Operators Personnel<br><br>Minor running train derailments >4hrs<12hrs<br><br>DG spill/incident | Line Manager or Delegated Competent Person (e.g. Technical Expert). | Short<br>(NRSS report templates may be used) |

| | | | | | |
|---|---|---|---|---|---|
| | | Code that had significant risk of resulting in a Level 1 incident if circumstances had allowed. (e.g. Overrun of TWC/TOP authority limits) | | | |
| 3 | Minor | All Safe Working Irregularities<br>Level Crossing Collisions (all other)<br>Mainline collisions (all other)<br>Breach of standards, rules or Code or terrorism threat that had significant risk of resulting in a Level 2 incident if circumstances had allowed.<br>Damage to property (e.g. up to $75,000) | Track Occupancy Occurrence<br>Terminal Derailments<br>Terminal Collisions<br>Loads lost overboard | Line Manager, or Delegated Competent Person (e.g. Technical Expert) | Short (NRSS report templates may be used) |
| 4 | Negligible | Breach of standards, rules or Code not resulting in an incident<br>Minor Property and equipment damage by third parties (e.g. stone throwing, shopping trolleys obstructions, vandalism) | Safe Loading Irregularities/Overweight wagons/Overgauge loads<br>All near collisions<br>Train Partings<br>Trespassers<br>Trespassing stock | Line Manager, may delegate to Competent Person (e.g. Technical Expert) or Supervisor | Manager responsible must establish root cause and manage corrective actions and conduct investigation if required |

## 1.6 Occurrence Categories

Occurrence categories are designed to group incidents and accidents into defined areas of railway operations. These areas link each event with the “operating process” that is designed to isolate, mitigate or eliminate the hazard.

Each occurrence has two main elements, these are:

- the “operating process” (area and type of operations), and
- a primary effect (the major outcome).

It is important to understand that "effect" is not "cause". Cause is only established once an investigation has been completed.

The coding system needs to be used in a manner that ensures that an occurrence is recorded once only under the appropriate "operating process". This will ensure accuracy with statistical analysis by avoiding duplicate recording.

However, when an occurrence has resulted in "supplementary" or "secondary" effects additional "primary effect" coding can be used to identify such effects thereby permitting the use of relational databases.

**Examples are:**

**Trespassing Stock**

- A **collision** between a train operating on the Controlled Network and trespassing stock is categorised as CN (controlled network security), CSK (collision trespassing stock).
- Trespassing Stock **not resulting in a collision** is categorised as CN (controlled network security), TSK (trespassing stock).

**Collisions with light (under 10 tonne) road vehicles**

- On the Controlled Network **at a level crossing**, it is categorised as LX (level crossing), CLV (collision light vehicle).
- On the Controlled Network **at other than a level crossing**, it is categorised as CN (controlled network security), CLV (collision light vehicle).
- **In Operator Controlled territory** (terminals and sidings), it is categorised as TO (terminal operations), CLV (collision light vehicle).

**Derailments Categorisation:**

- Derailment of a running train on the **Controlled Network -** MO (mainline operations), DRM (derailment).
- Derailment during shunting, regardless of location - TO (terminal operations), DRM (derailment).
- Derailment following a **Level Crossing Collision -** LX (level crossing), DRM (derailment).
- Derailment **during loading or unloading activities -** FO (Freight operations), DRM (derailment).
- Derailment during infrastructure maintenance activities - IM (Infrastructure Maintenance), DRM (Derailment).

**Signal Passed At Danger (SPAD)**

- Any SPAD that involves passing a signal, noticeboard or fouling point board protecting entry onto the Controlled Network is to be classified MO.

**Load Shift / Insecure**

- The IM (Infrastructure Maintenance) operating process code is only to be used at infrastructure worksites and on work trains. Infrastructure loads moving on freight trains are to be classified as FO (Freight Operations).

Table 2 illustrates the “operating processes” and potential “primary effects”. Table 3 provides further guidance.

TABLE 2

| | | OPERATING PROCESS | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | Level Crossing **LX** | Mainline Operations **MO**** | Terminal Operations **TO** | Infrastructure Maintenance **IM** | Freight Operations **FO** | Passenger Operations **PO** | Controlled Network Security **CN** |
| **PRIMARY EFFECT** | Anti Social Behaviour (NOS) | | | | | | ASB | |
| | Assault - by passenger (physical) | | | | | | APP | |
| | Assault - by passenger (verbal) | | | | | | APV | |
| | Assault - on passenger | | | | | | AOP | |
| | Collision Heavy Road Vehicle | CHV | | CHV | | CHV | | CHV |
| | Collision Illegal Obstruction | CIO | | CIO | | CIO | | CIO |
| | Collision Light Road Vehicle | CLV | | CLV | | CLV | | CLV |
| | Collision Maintenance Providers Personnel / Equipment / RV / Road Vehicle | | CMP | CMP | CMP | | | |
| | Collision with Rail Personnel | | CRP | CRP | | CRP | | |
| | Collision with Rail Vehicle | | CRV | CRV | | CRV | | |
| | Collision with equipment | | CWE | CWE | | CWE | | |
| | Collision Person | CPN | | CPN | | | | CPN |
| | Collision Slip | | | | | | | CSL |
| | Collision Structure | | | CST | CST | CST | | |
| | Collision Trespasser | | | CTP | | | | CTP |
| | Collision Trespassing Stock | | | CSK | | | | CSK |
| | Container Doors Open | | | | | CDO | | |
| | Damage by Heavy Road vehicle | DHV | | DHV | | DHV | | DHV |
| | Damage by Light Road vehicle | DRV | | DRV | | DRV | | DRV |
| | Derailment | DRM | DRM | DRM | DRM | DRM | | |
| | DG Placards and Papers | | | | | DGP | | |
| | DG Segregation | | | | | DGS | | |
| | Electrical Hazards (excluding OHLE) | | ELH ## | ELH ## | ELH ## | ELH #3 | ELH ## | |
| | Fire/smoke/fumes - Equipment Related | | FEQ | FEQ | FEQ | | FEQ | |
| | Fire/smoke/fumes - Trackside | | FTS | FTS | FTS | | | FTS |
| | Fire/smoke/fumes - Building | | | FBD | FBD | | | FBD |
| | Flooding | | | FLD | | | | FLD |
| | Handbrakes dragging | | HBD | HBD | HBD | | | |
| | Illegal Obstruction Other | | | | | | | IOO |
| | Illegal RV's on rail track | | | IRV | | | | IRV |
| | Infrastructure Safety Critical Component Failure NOS | | | | ISC | | | |
| | Injury / Death Passenger Alighting | | | | | | IAG | |
| | Injury / Death Passenger Boarding | | | | | | IBG | |
| | Injury / Death Passenger/Public on Platform | | | | | | IPM | |
| | Injury / death passenger when on board | | | | | | IOB | |
| | Leak / Spill (DG) | | | | LKDG | LKDG | | |
| | Leak / Spill (not DG) | | LKEN | LKEN | LKEN | LKEN | | |
| | Line Speed Exceeded | | LSE | LSE | LSE | | | |
| | Load Lost Overboard | | | | | LLO | | |
| | Loading Irregularity | | | | LIR % | LIR % | | |
| | Near Collision Heavy Road Vehicle | NCHV | | NCHV | | | | NCHV |
| | Near Collision Light Road Vehicle | NCLV | | NCLV | | | | NCLV |
| | Near Collision Illegal Obstruction | NCIO | | NCIO | | | | NCIO |
| | Near Collision Maintenance Providers Personnel / Equipment / RV / Road Vehicle | | | | NCMP | | | |
| | Near Collision Operators Personnel / Equipment / RV | | NCOP | NCOP | | | | |
| | Near Collision Person | NCPN | | NCPN | | | | NCPN |
| | Near Collision Trespasser | | | NCTP | | | | NCTP |
| | Overgauge Load | | | | | OGL | | |
| | Overhead Traction Fault | | | | OHT | | | |
| | Out of Balance Wagon / Container | | | | | OOB | | |
| | Overweight Wagon / Container | | | | | OWT | | |
| | Passenger Door faults | | | | | | PDF | |
| | Rail Personnel Injury / Death (includes electrical accidents) | RPI | RPI | RPI | RPI | RPI | RPI | RPI |
| | RV Runaway | | RVR | RVR | RVR | | | |
| | RV Safety Critical Component Failure | | RVS | RVS | RVS | RVS | | |

| | | OPERATING PROCESS | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | Level Crossing **LX** | Mainline Operations **MO**** | Terminal Operations **TO** | Infrastructure Maintenance **IM** | Freight Operations **FO** | Passenger Operations **PO** | Controlled Network Security **CN** |
| | Safe Working Irregularity | | SWI | SWI | SWI | SWI | SWI # | |
| | Signal Reverted - no SPAD | | | | NSPAD | | | |
| | Slip / Subsidence | | | SLS | | | | SLS |
| | SPAD A | | SPADA | SPADA | SPADA | | | |
| | SPAD B | | | | SPADB | | | |
| | SPAD C | | SPADC | SPADC | SPADC | | | |
| | SPAD D | | SPADD | SPADD | SPADD | | | |
| | Stone / Missile Throwing | | | | | | | STW |
| | Strops & Chains | | | | | SCS | | |
| | Track Defect | | | | TDF | | | |
| | Train Parting | | TPG | TPG | TPG | | TPG | |
| | Track Occupancy Occurrence | | | | TOO | | | |
| | Trespassing – Person on corridor | | | TPN | | | TPN | TPN |
| | Trespassing – Person on vehicle | | | | | | TPV | |
| | Trespassing – Stock | | | TSK | | | | TSK |
| | Twistlocks | | | | | TLS | | |
| | Vandalism (Theft) | VTT | | VTT | VTT | VTT | VTT | VTT |
| | Vandalism (Damage) | VDE | | VDE | VDE | VDE | VDE | VDE |
| | Vandalism (Tagging) | VTG | | VTG | VTG | VTG | VTG | VTG |
| | Wagon Doors Open | | | | | WDO | | |
| | Wrong Side Failure – Signalling (no other effect) | WSFS | | | WSFS | | | |

NOTE:

** SPAD clarification - any SPAD that involves passing a signal, noticeboard or fouling point board protecting entry onto the Controlled Network is to be classified MO

# Covers specifically passenger trains, i.e. stopping with doors off platform

NOS – Not Otherwise Specified

## Electrical hazards (excluding traction overhead) – including rail vehicles, generators, other rail equipment, signals power and reefer container shore power supply...

% Includes shifted and insecure loads. Note that IM only applies at an infrastructure worksite or on a work train. If an infrastructure load is in transit on a freight train then CO applies.

TABLE 2B

Non safety critical Occurrence Codes (Networks use only -when no immediate risk, hazard, or property damage occurs)

| | | |
|---|---|---|
| OR | IDS | Infrastructure Defect Signalling (covers faults not otherwise specified and not causing a safety risk, e.g. outage, level crossing alarms ringing and no cause found. |
| OR | IDC | Infrastructure Defect Civil (coves network outages not causing a safety risk, e.g. line closures, tunnel alarms etc when no trains are expected) |
| OR | CTC | Infrastructure Defect CTC Signalling |
| OR | DLA | Infrastructure Defect DLA Signalling |
| OR | TWC | Infrastructure Defect TW Control Signalling |
| OR | SLA | Infrastructure Defect SLA Signalling |
| OR | RAD | Infrastructure Defect Train Radio System |
| OR | DDN | Dragging Equipment Detector set off – no fault found |
| OR | DDFF | Dragging Equipment Detector set off – fault found |
| OR | OPI | Operating irregularity which is not a risk to safety (eg wrong routing) |
| OR | IOT | Illegal object trackside. (Only applies if the item is static and is not within the structure gauge, is not moving and would not have a high probability of hitting a moving train. If the item is within the structure gauge or has a high probability of hitting a train, it is to be coded as a "Near Collision" item |
| OR | DUP | Duplicate records |
| OR | MISC | Miscellaneous records which do no apply any other category |
| OR | SVC | Service related issues |
| OR | VDA | Vigilance Device Activated |

TABLE 3

| OPERATING PROCESS | DESCRIPTION |
|---|---|
| **Level Crossing (LX)** | Covers all activity at a public level crossing, legal private level crossing, recognised private level crossing (i.e. one listed in Access Provider's records) and formed maintenance crossings established by the Access Provider, including;<br>• Collisions and near-collisions between a Rail Vehicle and non rail road traffic and/or people<br>• Damage to alarm equipment or signs by road vehicle.<br>• Vandalism of signs and level crossing alarm equipment, causing a reduction in safety.<br>• Wrongside failures of alarm systems<br>• Derailments resulting from a collision with a road vehicle<br>Note, includes all occurrences resulting from the presence of a level crossing. |
| **Mainline Operations (MO)** | Covers all activity by Operators on the Controlled Network, which is not specifically classified elsewhere. Includes;<br>• Derailments<br>• Fires, smoke and fumes<br>• Safeworking irregularities<br>• SPAD A's and SPAD D's (Signals Passed at Danger where the RV could have stopped in time but didn't)<br>• Collisions with other Rail Vehicles<br>• Train partings<br>• Excessive speed<br>• Rolling stock irregularity |
| **Terminal Operations (TO)** | Covers all activity in Operator Controlled Territory (terminals and sidings) which is not specifically classified elsewhere. Includes;<br>• Derailments (including shunting sidings enroute)<br>• Fires, smoke and fumes<br>• Collisions involving Rail Terminal and Siding activities, including collisions involving:<br>  • Rail Vehicles<br>  • Rail Infrastructure and Equipment<br>  • Rail Personnel and Trespassers<br>  • Structures including Gates & Loading Ramps<br>  Also includes collisions between:<br>  • Motor Vehicles and Rail Infrastructure or Equipment<br>• Safeworking irregularities |
| **Infrastructure Maintenance (IM)** | Covers all activity relating to Infrastructure personnel, asset or equipment which is not classified elsewhere. Includes;<br>• Collision or near collision with maintenance personnel and/or equipment on or adjacent to the railway line<br>• Fires, smoke and fumes<br>• Infrastructure vehicles operating in rail mode<br>• Infrastructure defects (e.g. broken rail, heat buckle, points failures, overhead traction faults)<br>• SPAD B's and signal reversions (Signals Passed at Danger where the signal reverted and the RSV could not stop in time)<br>• Signalling Wrongside failure (excluding those for level crossing alarms) |

| | |
|---|---|
| | • Other infrastructure irregularities that could have been avoided by appropriate maintenance |

| OPERATING PROCESS | DESCRIPTION |
|---|---|
| **Freight Operations (FO)** | Covers all activity related to Freight movements on the National Rail System. Includes;<br>• Collisions involving Freight Handling activities outside of the rail operational area, including collisions between forkhoists and:<br>  • Grounded containers<br>  • Road vehicles<br>  • Non rail infrastructure (buildings, other equipment)<br>• Dangerous Goods loading non-compliances<br>• Damage to lineside equipment by loads (e.g. open container doors)<br>• Incorrect loading<br>• Injury due to loading operations<br>• Leaking Freight<br>• Load lost overboard<br>• Overgauge, overload and overweight loads (moving without authority)<br>• Vandalism of Freight containers and pillaging of Freight |
| **Passenger Operations (PO)** | Covers all activity related to passengers and associated processes. Includes;<br>• Onboard passenger train operations, including boarding and alighting<br>• Passengers and the public on platforms.<br>Note - does not include activity listed under LX, MO, TO, with the exception of train parting which could directly affect passenger safety. |
| **Controlled Network Security (CN)** | Covers activity and issues specifically related to the Controlled Network outside the reasonable direct control of infrastructure maintenance resources. Includes;<br>• Collisions with trespassers, illegal obstructions, illegal vehicles on line (excludes those at a level crossing)<br>• Infrastructure events causing a line blockage or restriction such as flooding, fire, slip, earthquake.<br>• Vandalism of infrastructure assets<br>• SPAD C's (Signals Passed at Danger where the signal was intentionally put to Danger and the RV could not stop in time)<br>  • Stock trespass |

# 2 OCCURRENCE MANAGEMENT PRINCIPLES

## 2.1 Illustration of Macro Process

These principles of occurrence management are illustrated in Figure 1.

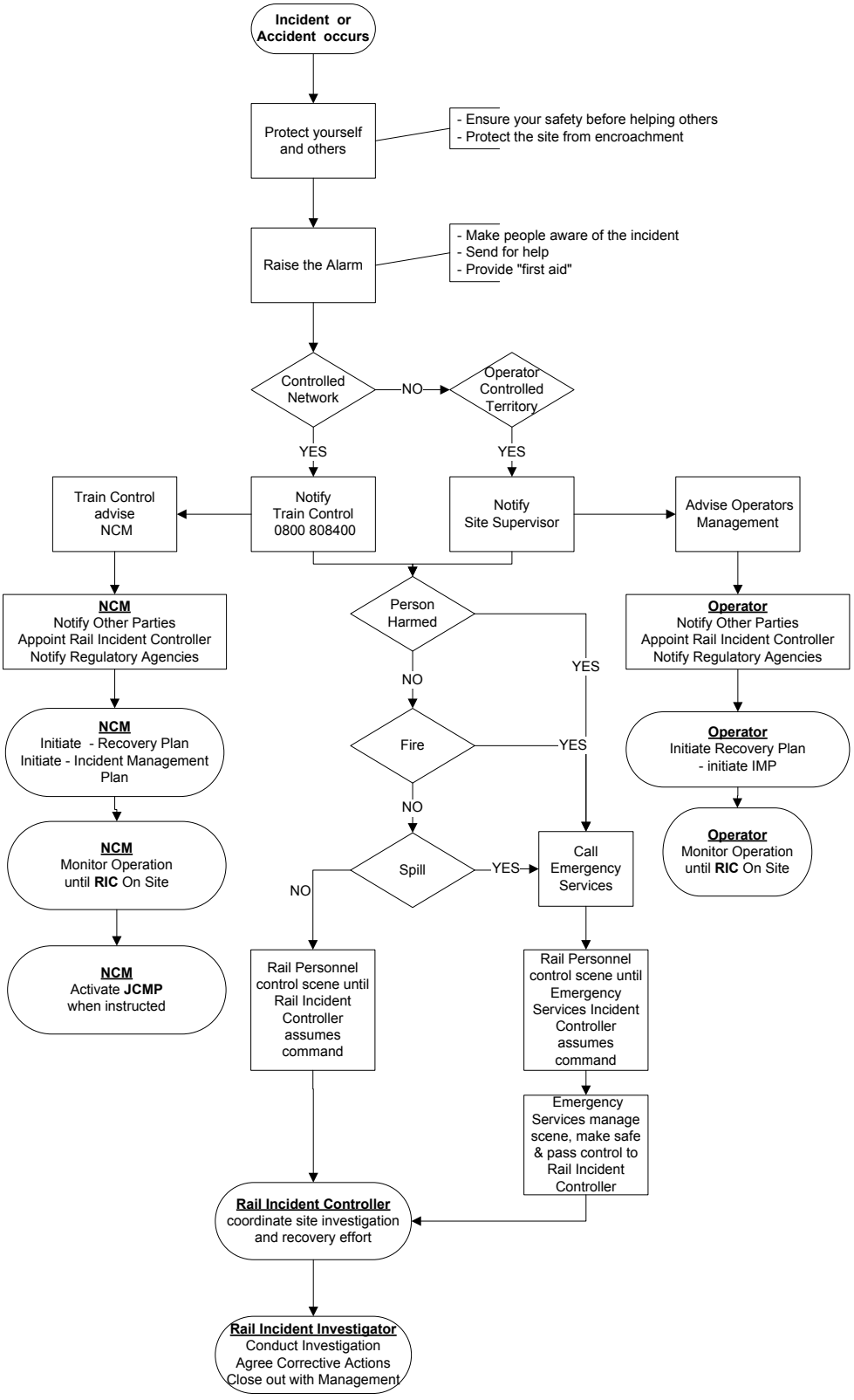



FIGURE 1

## 3. OCCURRENCE REPORTING AND NOTIFICATION

### 3.1 Reporting Occurrences

#### 3.1.1 Rail Personnel must report Occurrences

Rail Personnel involved in or observing an occurrence must immediately report the occurrence as follows:

- On the Controlled Network - to the KiwiRail Train Control Centre
- On Operator Controlled Territory - to the site controller (or Operators designated after hours centre or person).

If in doubt advise the KiwiRail Train Control Centre.

### 3.2 Notifying Occurrences

#### 3.2.1 Notification to Other Parties

KiwiRail and Operators, when an occurrence has been reported to them, must notify other parties as follows:

- On the Controlled Network – KiwiRail must report all occurrences to the Operator in the first instance then other agencies as required by this National Rail System Standard and relevant legislation.

- On Operator Controlled Territory - Operators must report all occurrences to KiwiRail then other agencies as required by this National Rail System Standard and relevant legislation.

#### 3.2.2 Initial Notification to other Parties (verbal or text)

When notifying an occurrence to an external party or authority, provide the details known at the time. Be careful not to make any judgements or comments not supported by fact.

When this Standard requires NZ Transport Agency to be notified:

- The order of precedence for notification shall be:
- Emergency services (to ensure that initial emergency response actions make people safe and secure the site
- Operators involved (initiate emergency actions)
- NZTA (to enable statutory requirements to be met)
- Notification to NZTA must occur before time is taken to mobilise recovery and repair resources or to brief the media
- Notification may occur simultaneously if text messaging to a combined distribution list is in use.

When the occurrence is of a nature that requires the NZTA to notify the TAIC it is the TAIC that will confirm whether it wants the site frozen for its investigation purposes.

- Written notification to the NZTA is to occur by the next business day, Monday to Friday, excluding Public Holidays.

#### 3.2.3 Release of Information to other Parties (written)

Each rail participant must establish controls for the release of written information to external agencies. It is recommend that release be controlled from a single source within each

organisation which is responsible for ensuring other parties involved are notified of the release when appropriate.

### 3.2.4 Media Information

Each rail participant must identify a media liaison representative for release of information to the media. Rail Personnel must consult and comply with their own Organisation's media policy.

### 3.2.5 Revised information

Each rail participant must establish processes that ensure all notified parties are advised when significant changes are made to previously notified occurrence data.

In the above case for NZTA this must be via email to: railregulation@nzta.govt.nz.

### 3.3 Notification Guidance

Detailed guidance on (who must be notified by whom) is provided at table 4.

**This guidance supersedes previous Memoranda of Understanding between the NZTA and individual Access Providers and Operators operating on the NRS.**

Notification requirements to statutory authorities are covered in the relevant statutes and regulations.

### 3.4 Serious Harm

Serious harm is defined in the Health and Safety in Employment Act 1992 and amendments.

All accidents which result in serious harm to customers, visitors, employees, and contractors must be notified verbally by the Rail Participant to the Ministry of Business, Innovation, and Employment (MBIE) as soon as practicable as required by the Rail Participants internal procedures .

Written or electronic advice must be provided in the MBIE prescribed format as required by the Rail Participants internal procedures.

### 3.5 Electrical Occurrences

For any electrical accident which results in a person being admitted to hospital, or receiving medical treatment for burns from a specialist registered medical practitioner the Department of Labour must be notified

The asset owner's Technical Manager with responsibility for electrical overview must also be notified. The Technical Manager must then advise the Department of Labour of any such occurrence.

### 3.6 Railways Act Compliance

The Railways Act 2005 requires that Rail Participants report accidents and incidents to the NZ Transport Agency as follows:

Any accident, where accident is defined as an occurrence associated with the operation of a rail vehicle or the use of railway infrastructure or railway premises that causes:

(i) The death of, or serious injury to, individuals; or
(ii) Significant property damage.

Any other incident where incident is defined as an occurrence, other than an accident; that is associated with the operation of a rail vehicle or the use of railway infrastructure or railway premises that placed, or could have placed:

(iii) A person at risk of death or serious injury; or
(iv) Property at risk of significant damage.

### 3.7 Occurrence Notification Table

Guidance to enable parties to meet statutory notification requirements is provided in Table 4 below. Note that the NZTA holds accountability for reporting accidents and incidents to TAIC.

Where an occurrence has multiple outcomes notification must cover all outcomes, i.e. a collision resulting in serious harm requires notification to the parties defined under each occurrence category.

TABLE 4

**CN** = CONTROLLED NETWORK
**OCT** = OPERATOR CONTROLLED TERRITORY

| | | | | | | **Formal notification to NZTA Next business day** | |
|---|---|---|---|---|---|---|---|
| **OCCURRENCE** | Police | NZTA | MBIE | Local / Regional Authority | MED | | |
| | | | | | | **CN** | **OCT** |
| Collision Level Crossing | ☎ | ☎ | ☎ | | | ☐ | 🗣 |
| Collision (maintenance personnel / equipment) | | ☎ ⚖ | | | | ☐ | 🗣 |
| Collision (operators personnel / equipment) | | ☎ ⚖ | | | | ☐ | 🗣 |
| Collision (person) | ☎ ⚖ | ☎ ⚖ | | | | ☐ | 🗣 |
| Collision (other) | | ☎ ⚖ | | | | ☐ | 🗣 |
| Derailment (mainline) | | ☎ | | | | ☐ | |
| Derailment (shunting) | | ☎ ⚖ | | | | | 🗣 |
| Fire/smoke/fumes (equipment related) | | ☎ ⚖ | | | | ☐ | 🗣 |
| Passenger Injury / Death | ☎ ⚖ | ☎ ⚖ | 🗣 | | | 🗣 | 🗣 |
| Leak / Spill (DG) | | ☎ ⚖ | | ☎ | | ☐ | 🗣 |
| Leak / Spill (environment) | | ☎ ⚖ | | ☎ | | ☐ | 🗣 |
| Load lost off wagon | | ☎ ⚖ | | | | ☐ | 🗣 |
| Near Collision | ☎ | | | | | ☐ | 🗣 |
| Passenger Door faults | | ☎ | | | | ☐ | 🗣 |
| Rail Personnel Injury | ☎ ⚖ | ☎ ⚖ | 🚑 | | 💥 🧍 | 🧍 | 🧍 |
| Rail Vehicle Runaway | | ☎ ⚖ | | | | ☐ | 🗣 |
| Safe Working Irregularity | | ☎ ⚖ | | | | ☐ | 🗣 |
| Safety Critical Component Failure | | ☎ ⚖ | | | | 🧍 | 🧍 |
| SPAD A & D | | ☎ | | | | ☐ | |
| SPAD B & C | | | | | | ☐ | 🗣 |
| Stone Throwing | ☎ | | | | | ☐ | 🗣 |
| Track Defect | | ☎ ⚖ | | | | ☐ | 🗣 |
| Train Parting (passenger) | | ☎ | | | | ☐ | 🗣 |
| Vandalism / Theft | ☎ | ☎ | | | | ☐ | 🗣 |
| Wrongside failure (signalling) | | ☎ | | | | ☐ | 🗣 |
| Bomb Threat | ☎ 🧍 | ☎ | ☎ 🧍 | | | ☐ | 🗣 |

**Key to Table 4:**

Electrical accident notification process.

KiwiRail

Operator

Individual Rail Participants for own equipment, systems, rail personnel and contractors.

KiwiRail if on the Controlled Network, Operator if in Operator Controlled Territory.

Employee's Manager immediately when death or serious harm has occurred.

Situational, evaluate risk exposure and severity of incident (see bullet points below for guidance). When required by the criteria below, NZTA is to be notified immediately after only those persons and resources required to make the site safe have been mobilised.

- Mandatory for trespasser fatalities and injuries.
- Mandatory for passenger and rail personnel serious harm injuries.
- Mandatory for passenger and rail personnel fatalities.
- Mandatory when:
  - found or occurring outside of the normal inspection process, or
  - when risk controls have been breached, or
  - when risk controls have failed to operate as designed in normal service.
- Excludes minor dynamic brake grid fires.

### 3.7.1 Operators and Access Providers Response Plans

Operators and Access Providers are responsible to ensure that relevant rail personnel as well as any agents and contractors are provided with appropriate response plans and instructions.

# 4 OCCURRENCE RESPONSE AND SITE MANAGEMENT

### 4.1.1 Incident Controller – Appointment of

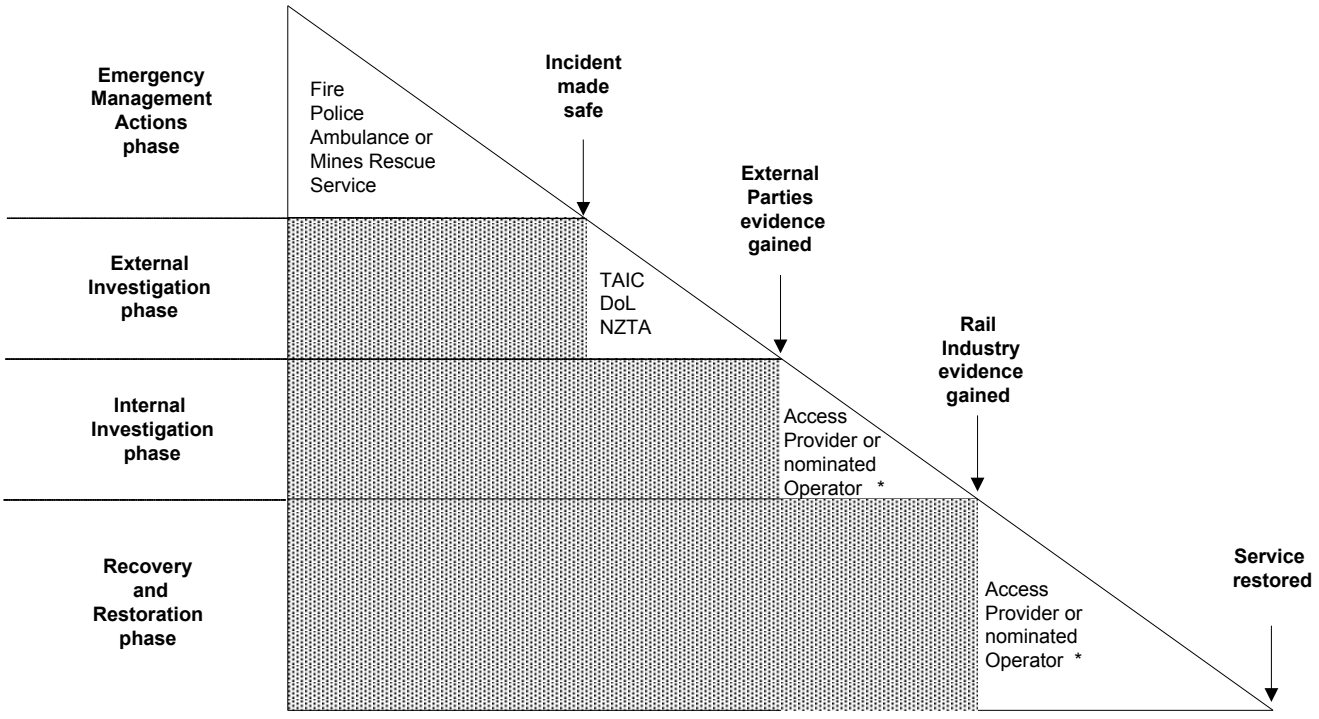
This term is used by the Co-ordinated Incident Management System (CIMS) model in use with Emergency Services. This methodology provides a single point of leadership at an incident site. As the incident recovery is progressed the Incident Controller's responsibility will pass from one agency to another dependant on site requirements. The Rail Incident Controller must be identified by high visibility marked clothing marked with the words "Rail Incident Controller".

Initially, the appointment of an Incident Controller (Emergency Services) will be advised by the Access Provider's NCM. Until the designated emergency services Incident Controller has arrived the senior person on-site appointed by the Access Provider must assume the Rail Incident Controllers role to ensure that site safety, investigation and recovery requirements are meet.

When Emergency Services attend an Incident they will always assume the lead role as the initial Incident Controller on scene. The Rail Incident Controller is subordinate and must work under the direction of the Emergency Services Incident Controller as a specialist rail advisor. The Rail Incident Controller must liaise with the Emergency Services Incident Controller to ensure that rail safety is preserved and where possible evidence vital to subsequent investigation is not destroyed. At the point where the situation has been contained and the Emergency Services are ready to withdraw, site control is handed over to Rail Incident Controller as designated by the Access Provider. In some cases this may be the Operator or a Contractor. The Rail Incident Controller must now ascertain External and Rail Industry investigation requirements before the site is further disturbed by recovery actions.

These principles are illustrated in Figure 2.

FIGURE 2




* - The Rail Incident Controller will be nominated by the Access Provider.

## 4.2 Incident Controller Responsibilities

## 4.3 General Responsibilities

General responsibilities include the following:

- set up a “safe area” before going onto site
- ensuring the health, welfare and safety of all people on site are adequately managed
- assessment of hazards on site and ensure they are controlled
- control of the public and other bystanders ensuring that separation controls are established to prevent encroachment onto the occurrence site
- ensuring all persons on site are briefed about safety, hazards and tasks required
- managing all media/information matters on-siteliaise/co-ordinate on site activities with Incident Controller Emergency Services

### 4.3.1 Railway Specific Responsibilities

In addition to the general responsibilities above, the Rail Incident Controller is responsible for:

- liaison with the Access Provider’s Train Control Centre and any Incident Headquarters established by involved parties (including the agreement of “call-in times” and the provision of situation reports)
- liaison with the Operator of any passenger train (the Operator is responsible for attending to passengers requirements)
- determining the status and handling requirements of affected freight (the Operator is responsible to have a person on site to assist where necessary)
- liaison with the appropriate technical and operating personnel from Access Providers, Operators and maintenance contractors to ensure site control and recovery actions planned are appropriate and protect assets (to also include the physical protection from other rail activities)
- ensuring that the appropriate Operators personnel inspect and certify fit to run any damaged (or likely to be damaged) RV’s before they are moved from the site
- ensuring that qualified persons are available for any safeworking requirements (e.g. issue and/or cancellation of Track Warrants), and rail operating requirements (e.g. train makeup, RV shunting)
- liaison with any other affected party as required
- ensuring that all relevant site activities are effectively co-ordinated
- assignment of responsibility where appropriate for identified work groups to control their own activity without affecting other work groups on site.
- directing railway resources required to assist emergency rescue services
- site documentation
- managing site data security in accordance with instructions from external or internal authorities
- assisting external and internal investigating authorities
- developing a site clear up plan (including realistic timelines) in conjunction with the Access Provider and Operator/s concerned taking into account the importance of the line and train schedules versus recovery site safety, the environment, restoration costs and resources available. (Note – plan to include disposal of RV’s, damaged product and damaged equipment, rectification of any environmental damage, sufficient time for investigations including track measure-up).
- initial management of the site clear up plan (to point where site incident control is no longer required)
- hours worked by personnel on site are controlled
- ensuring that processes for recording costs are put in place

### 4.4 Management Responsibilities (Other)

#### 4.4.1 Overview by Access Provider's/Operator's Senior Line Managers

Depending on the severity and complexity of the occurrence and the competency of the designated Rail Incident Controller, Access Provider's and Operator's senior Line Managers need to review the circumstances and determine if the recovery plan and assigned personnel are suitably experienced and resources are appropriate to achieve the desired outcomes, including adequate safety.

#### 4.4.2 Crisis Management Plan

For major occurrences with widespread implications to rail services, Senior Line Managers may need to activate the relevant crisis management plans.

#### 4.4.3 Appointment of a Loss Adjuster

Line Managers are also responsible to determine whether their organisation requires the services of a loss adjuster.

#### 4.4.4 Record of costs

All work done and costs for incident response, control, repairs and recovery must be accurately and fully recorded by each party involved.

### 4.5 Rail Incident Controllers Check List (Guidance)

The following check list provides guidance for Rail Incident Controllers attending the scene of an occurrence e.g. a derailment or collision. Normally, notification of the occurrence will come from the Access Provider's NCM or Operator's Site Controller.

Ascertain the following information:

- description of what has happened
- personal injuries to rail personnel, public, passengers
- train number and type
- direction of travel
- time of occurrence
- approximate metrage - nearest station(s)
- if at a level crossing, name of road, crossing name (if it has one)
- number of passengers/vehicles involved/type/loaded/hazardous?
- damage to track
- who has been in contact from the site - Ganger? - LE? - Train Manager?
- has event recorder (black box) been disconnected? (If this is required, it must be done before locomotive is moved, applies only to locolog type)
- environmental spillages?
- has the position of locomotives and rolling stock been marked before moving?
- has the train control voice log been secured?

The RIC is to check (with NCM or Train Controller for incidents on the Controlled Network) to verify that the followingl agencies/resources have been called, or are on standby?

- Emergency services
- The NZTA and/or MBIE
- Traction Control
- Access Provider's Line Managers Track and Structures, Signals / Electrical/Traction
- Operator's Line Managers, rail operations and Mechanical Engineering
- Length Ganger and/or field maintenance Line Manager Track & Structures
- Operator's Service or Freight Centre Manager
- Operator's Passenger Manager (if passengers involved or disrupted)
- Security
- Operator's, and Access Provider's Media Relations personnel.

- Operator's Dangerous Goods Advisor and/or Regional Council (for spill kits etc...)
- TAIC investigator when advised by NZTA (and site frozen or not)

Contact:

- If possible, whoever is on site to get up-to-date information. If necessary work through the Access Provider's NCM or Train Controller.
- Field maintenance Line Manager (Track & Structures) or Ganger and/or the Operators designated mechanical maintenance Service Manager, to ensure resources are mobilised including hydraulic re-railing gear and/or cranes (if there are derailed vehicles). (It's easier to mobilise early and cancel if not needed).
- Identify and commence liaison with the Incident Controller, Emergency Services.
- If any hazardous materials have been spilt or are at risk, if possible, liaise with site to ensure that people are not at risk and liaise with Regional Council as necessary.
- If passengers involved, liaise with Passenger Manager as appropriate.

When on site:

- conduct an assessment of site hazards and ensure controls are in place
- communicate with all rail personnel on site : discuss hazards & obtain situation details
- contact Network Control Manager (or Train Control) as soon as you arrive
- make contact with external parties on site e.g. emergency services, external investigators
- determine the need for specialist rail operating, freight handling, passenger control, engineering support and/or requirements from Operators, Access Providers and/or their maintenance contractors.
- set up lines of command to co-ordinate activities. Appropriate consideration must also be given to minimising property damage, and environmental effects/impacts.
- get investigation underway and ensure necessary evidence preserved
- discuss recovery plan with Operators, Access Providers and their maintenance contractors covering - Track & Structures, Mechanical Engineering, Signals & Telecommunications, Traction, Rail Services and, Customer Services (Freight or Passenger as applicable).
- Determine estimated time for track clearance to get trains running (eg. 2 hours / 1 Day)
- Check need for RV event recorders to be disconnected.

Investigation:

- interview witnesses and seek statements from rail personnel
- ensure event recorder disconnected
- establish point of derailment/impact and arrange measure up and record markings
- photograph anything of relevance (or sketch)
- locate and record any debris/parts trackside
- identify and record any trackside damage such as to signal locations, traction, structures etc.
- endeavour to establish cause as soon as possible and endeavour to obtain written agreement from site representatives of all parties

Recovery:

- Confirm recovery plan with the NCM and/or the Operator(s). Obtain Operator and Access Provider (and TAIC when involved) approval if recovery will provide significant further damage to assets or incur significant expense for plant resources or destroy evidence.
- co-ordinate activities
- if freight involved, establish priorities (and plan) with Operator(s) for recovery/on-forwarding
- check on progress against recovery plan - track, mechanical etc.
- maintain regular contact with NCM (through TCO if necessary) and/or Operator(s). Keep all key parties updated so they can play their part in getting or keeping others informed/moving as required.
- agree on next update time with NCM and/or Operator(s)

# 5 OCCURRENCE INVESTIGATION

## 5.1 Assignment of Investigator

Where the need for involvement is identified, each Access Provider and Operator must appoint a suitably experienced person from their own organisation to be responsible for conducting their Organisation's investigation and completing the associated written report where required by this NRSS.

Joint investigations may be initiated when agreed between the parties involved in an occurrence.

## 5.2 Evidence Capture

While every incident will be unique, the investigation process will be basically the same in all categories. Guidelines can be divided into four parts.

**Scene Examination :**

The following guidelines outline the basic requirements for scene examination :

- consult with technical and operating personnel to develop an appropriate investigation plan
- define site boundaries
- preserve site - do not disturb evidence until recorded
- record, note and describe scene details and sketch a plan
- photograph scene details, including damaged or destroyed equipment
- examine equipment
- reserve exhibits and mark and identify location

**Interviewing Rail Personnel/Witnesses - taking statements :**

a) Purpose of Statement :
The purpose is to record a person's account of what happened to assist cause identification and possible preventative action determination. The statement has potential evidential value should it be decided to take the investigation any further.

b) Cover the following topics :
- Seek advice from technical and operational experts regarding personnel who should be interviewed
- Get each person to tell you in their own words what happened, what they saw, what they heard, what they did, who else was there.
- They should include information on date, time, what task was being carried out and location of occurrence and what equipment was involved e.g. train number, class and number of locomotives and wagon/container details, or vehicle/plant number.
- Position of controls and radio settings etc.
- Movements involved at site of all equipment (trains, vehicles, plant) should be described. For example for a rail incident, get direction of travel, which way the loco/wagons were facing, whether short or long hood, (N$^{o}$ 1 or N$^{o}$ 2) end leading, and speed (of train)/other parties.
- Preferably get the person to include a sketch of the layout of the occurrence site.
- Describe the site, e.g. whether on straight or curved track or at a turnout (state what type of turnout involved).
- If signals are involved, it is important what they were displaying is covered.
- Weather conditions.
- Damage to property - locomotives, rolling stock, freight, infrastructure, plant and equipment, and third party property.
- If any injuries are involved, what protective equipment was being used and were there any known hazards.

- How well briefed the rail personnel involved were.
- Likely cause of occurrence.
- Statement to be signed by the person making the statement and witnessed by the person taking the statement with date and time.

**Data Collection and Custody :**

a) On-site :
The Rail Incident Controller in attendance will ensure that all evidence is properly identified, protected and, when possible, safely removed to a central collection location, together with all reports and statements.

b) Off-site :
All evidence relevant to the event, such as event logs, voice records, shift rosters, time sheets, technical data, statements or reports, is to be identified and securely stored for investigation purposes.

c) External Agencies :
If exhibits/evidence are removed by external agencies, then the following details must be recorded :

- agency, name of person, and time/date taken
- details of what was taken including serial numbers if appropriate.

A receipt should be obtained, or when documents are involved, a copy made and retained. This information must be provided to the Access Provider, Operator or maintenance contractor whose material has been removed from the site

# 6 OCCURRENCE REPORTS

## 6.1 Written Reports

Written reports are required in accordance with Rail Operating Procedures Section 10.3, Instruction 7.0 – Making Reports.

Refer to Table 1 (Occurrence Classification) to determine if a written report is required and the minimum format applicable. Once determined, apply the guidance set out in Table 5.

TABLE 5

| Operating Process | Op Process Code | Primary Effect Code | Lead Role for investigation & report | NRSS Form (refer Appendix) | Form Signoff require-ments | Original of report held by | Copy of report sent to |
|---|---|---|---|---|---|---|---|
| Level Crossing | LX | | | | | | |
| - Collision | | Various | OP | LC2 | P | OP | P,E,AP |
| - Derailment | | DRM | AP/OP | MLD3 | P | AP/OP | P,E |
| - Personal Injury | | RPI | OP | IF | AP,OP,C | # | P,E |
| - Wrongside Failure | | WSFS | | OM1 | AP,OP,C | AP | P |
| - Other | | Various | | OM1 | P | # | P,E |
| Mainline Operations | MO | | | | | | |
| - Derailment | | DRM | AP/OP | MLD3 | P | AP/OP | P,E |
| - Safeworking Irregularity | | SWI | P | OM7 | AP,OP,C | # | P,E,AP |
| - SPAD A | | SPADA | OP | OM6 | AP,OP | OP | P,AP |
| - Personal Injury | | RPI | P | IF | OP,C | # | P,E |
| - Other | | Various | P | OM1 | AP,OP,C | # | P,E |
| Terminal Operations | TO | | | | | | |
| - Collision | | Various | OP | OM8 | OP, C | OP | P,E |
| - Derailment | | DRM | OP | OM4 | AP,OP | OP | P,E,AP |
| - Personal Injury | | RPI | P | IF | OP,C | # | P,E |
| - Other | | Various | OP | OM1 | P,OP | OP | P,E |
| Infrastructure Maintenance | IM | | | | | | |
| - Personal Injury | | RPI | P | IF | AP,OP,C | # | P,E |
| - Other | | Various | P | OM1 | AP,OP,C | # | P,E |
| Freight Operations | FO | | | | | | |
| - Personal Injury | | RPI | P | IF | OP,C | # | P,E |
| - Other | | Various | OP | LR1 | P | OP | P,AP |
| Passenger Operations | PO | | | | | | |
| - Personal (staff) Injury | | RPI | P | IF | OP,C | # | P,E |
| - Train Parting | | TPG | OP | TPF | OP | OP | P |
| - Door faults | | PDF | P | OM1 | OP,C | # | P,E |
| - Other | | Various | OP | OM9 | OP | OP | P,E |
| Controlled Network Security | CN | | | | | | |
| - Personal Injury | | RPI | P | IF | AP,OP,C | # | P,E,AP |
| - Other | | Various | AP | OM1 | AP | AP | P,E |

**Key to Table:**

AP Access Provider
C Maintenance Provider (when involved)
E Employing Body (Access Provider, Operator) must be provided with a copy by any Contractor or Maintenance Provider who is an involved party.
LM Line Manager
OP Operator
P Multiple Parties Involved, investigation may be joint by agreement
# Primary party involved

TPF Operators train parting proforma (eg Loco 354A form)
IF Injury form (eg H91 proforma)

## 6.2 Written Report Information

Some types of reports will need to be supported with specific documentation (note that some of the requirements listed below are applicable to other occurrences).

### 6.2.1 Running Train Derailments

All reports shall be accompanied by (where necessary):

- site plan, including the final relative position of all vehicles, the point of
- derailment, and relevant features such as curves, level crossings etc.
- Loco 523 Reports for each derailed vehicle
- MLD1 track reports and analysis
- event recorder printout
- weighbridge printout (when applicable)
- locomotive engineer's report

As appropriate, the following should also be included :

- TC tape transcript
- other employee statements
- EM80 trace
- For the "human factor" causes, (e.g. Cause codes or cause descriptions for excessive speed, faulty train handling and rail personnel errors including human factors causation.
- name, designation, location, staff no, any financial responsibility centre code
- date of birth
- service (and how long in current job)
- roster history
- radio and signals system logs

### 6.2.2 Rules Occurrences

The following information must be included :

- identify the rule, code or operating instruction breached
- any statements or other evidence to document the investigation and follow-up process
- notes from interviews with employees involved

### 6.2.3 Personal Accidents

Use the organisations accident form. Fax or promptly provide a copy to the organisation's designated Health Safety & Environment office/responsible person. Original to be retained in site accident register. ALL WORK ACCIDENT FORMS MUST be verified (signed-off) by the employee's workplace manager.

A work accident is defined as "an injury that arises out of, or in the course of, employment".

**"**arising out of employment" means the injuries occurred at the place of employment

"in the course of employment" means the injuries occurred in any of the following circumstances :

- employment tasks were being performed.
- during a temporary interruption of work at the injured person's place of employment e.g. meal break.
- travelling between places of employment.
- being paid by the employer to attend a training/education course.
- travelling between their place of employment and another place, for the purposes of obtaining healthcare treatment due to a prior work injury.
- travelling between their place of employment in transport provided by the employer, for the purposes of transporting employees to or from work.

### 6.2.4 Electrical Accidents

Use the organisation's accident form (or H 91 form) unless a technical decision from the responsible employer indicates form ER 95 to be used. All ER 95 forms are to be held by the responsible employer's relevant technical manager with a copy forwarded to the asset owner's engineering Line Manager with responsibility for electrical overview.

### 6.2.5 Loading Irregularities

Reports to be signed by the Operator's Line Managers responsible for the following activity :

- Service or Freight Centre/facility responsible for the loading.
- Rail operations for all critical loading related events.

### 6.2.6 Other

Some other occurrences may require reports at the request of the Line Manager responsible.

# 7 STANDARD FORMS

Standard templates on the attached pages as provided for guidance. Rail Participants may adopt these templates for use in reporting and investigation management systems (electronic and manual).

OM1 Occurrence General Report Summary

OM4 Shunting Derailment Report

OM6 Category “A” Signal Passed At Danger (SPAD) Report

OM7 Track Occupancy Occurrence Report

OM8 Terminal Collisions Report

OM9 Metro Passenger Occurrence Report

LR1 Loading Irregularity / Environmental Report

LC2 Level Crossing Collision Report

MLD3 Train Derailment Report

**OM 1 – General Occurrence Report**

KiwiRail National Rail System
GENERAL OCCURRENCE REPORT

**OM1 -**

## INVESTIGATION DETAILS

**Investigation No:** **Investigation Status:**
**Date Opened:** **Date Closed:**
**Investigation Level:** **Responsibility:**
**Scope Of Investigation:**

## INCIDENT DETAILS

**Incident Date:** **Incident Time:**
**Weather:** **Wind:** **Visibility:**
**Operating Process 1:** **Primary Effect 1:**
**Operating Process 2:** **Primary Effect 2:**
**Short Title:**
**Incident Description:**
**Line ID:** **Location Type:**
**Location:**
**Station From:** **Station To:**
**Meterage:**

## RAIL PERSON INVOLVED

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Date Of Birth:**
**Occupation:** **Employee No:**
**Team:** **Contractor Name:**
**Type of Injury:**
**Further Injury Description and Notes:**
**Shift:** **Hours Worked Since Shift began:** **hr** **Number of Shifts since day off:**
**Length of service in current position:** **Years** **Months**
**Total Rail Service:** **Years** **Months**
**Was this person certified for the task?** **Was the certification current?** **Date:**
**Is Theory Assessment Current?** **Date:**
**Is Safety Observations Current?** **Date:**
**Is the Road Knowledge Current?** **Date:**
**Is this person required to wear corrective visual aids?**
**Were they wearing them at time of incident?**
**Was Eye Protection being worn at time of incident?**
**Was Ear Protection being worn at time of incident?**
**Was a Drug and Alcohol test completed?**
**Are there any Medical Restrictions?**
**Details of Medical Restrictions and other Information:**

## PERSON INVOLVED

**Person Type:** Male Female

**First Name:** **Last Name:**

**Title:** **Occupation:**

**Type of Injury:**

**Further Injury Description and Notes:**

## WITNESS

**Witness No:** **Person Type:**

**First Name:** **Last Name:**

**Witness's Description of Incident:**

## RAIL VEHICLE INVOLVED

**Train/Shunt ID:** **Train Type:**

**Train From:** **Train To:**

**Train Length:** m **Train Weight:** t **Train Speed:** km/h

**Lead Locomotive:** **Running Long/Short Hood:**

**Unit Being:** **Loco and Class:**

**Locomotive Being:**

| | | Home Terminal |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**

**Additional Rail Vehicle Information:**

## MOTOR VEHICLE INVOLVED

**Registration No:** **Make:** **Model:**

**Year:** **COF/WOF Expiry Date:** **Colour:**

### OWNER'S DETAILS

**Owner's Name:**

**Driver's Name:** **Driver License No:**

**Insurance Company:**

**Direction of Travel: From:** **To:**

**Description of Damage / Injury:**

## IMMEDIATE ACTION TAKEN

**Action Description:**

**First Name:** **Surname:**

**Position:** **Date:**

**Was the Site Frozen?** **By Whom:**

## INVESTIGATION FINDINGS / CAUSATION

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

## SUMMARY OF COST

| | |
|---|---|
| **Property Damage:** | No Costs Entered |
| **Rail Vehicle Damage:** | $ |
| **Cargo / Freight Damage:** | $ |
| **Motor Vehicle Damage:** | $ |
| **Rail Other Costs:** | $ |
| **Operational Interruption:** | $ |
| **HSE Costs:** | |
| **Total Cost of Incident:** | **$** |

## INVESTIGATION RECORDS

### Logs Obtained

**Loco Logs:**
**CTC Logs:**
**TC Voice Logs:** **Was print out uploaded?**
**CCTV:**

### Agencies Advised

**TAIC:**
**NZTA:**
**Department of Labour:**

### Checklist

**Electronic Weightbridge Print Out:**
**Staff Involved Report:**
**Witness Reports:**
**Other Train Crew Reports:**
**MLD1 (if track related):**
**Pesonnel Involved HR Details Uploaded:**
**Site Plans:**

## CORRESPONDENCE IN

**Short Title:**
**Date Received:** **Receipt Method:** **Priviledged and Confidential:**
**Received From:**
**File Name:**
**Description:**

**Short Title:**
**Date Received:** **Receipt Method:** **Priviledged and Confidential:**
**Received From:**
**File Name:**
**Description:**

Page 3

**CORRECTIVE ACTIONS**

**Action No.** 1 **Action/Rec.No:** **Action Type:**

**Action Description:**

**Target Comp Date:** **Actual Comp Date:**

| **Internal Assignee:** | **External Assignee:** |
|---|---|
| **First Name(s):** | **Organisation:** |
| **Surname:** | **Name/Role:** |

| **Assigned for Follow Up:** | **Other Action Required** |
|---|---|
| **Technical Committee:** | **Risk Register Action Required:** |
| **NRSS Exec:** | **Effectiveness Review Required:** |
| **Safety Action Team:** | **Feedback Sent to Person Involved:** |
| **HSE Exec:** | |
| **Business Unit:** | |
| **Com / Action Taken:** | |

**INVESTIGATORS**

| **Type** | **First Name (s)** | **Surname** | **Target Due Date** | **Actual Comp. Date** |
|---|---|---|---|---|
| Investigator | | | | |
| Approver | | | | |
| Reviewer | | | | |

**SIGN OFF**

| **Business Unit** | **Name** | **Signature** | **Date** |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

Page 4

## OM 4 – Terminal Derailment Report

KiwiRail National Rail System
TERMINAL DERAILMENT REPORT **OM4 -**

**INVESTIGATION DETAILS**

**Investigation No:** **Investigation Status:**
**Date Opened:** **Date Closed:**
**Investigation Level:** **Responsibility:**
**Scope Of Investigation:**
investigate

**INCIDENT DETAILS**

**Incident Date:** **Incident Time:**
**Weather:** **Wind:** **Visibility:**
**Operating Process 1:** **Primary Effect 1:**
**Operating Process 2:** **Primary Effect 2:**
**Short Title:**
**Incident Description:**
**Line ID:** **Location Type:**
**Location:**
**Station From:** **Station To:**
**Meterage:**

**RAIL PERSON INVOLVED**

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Date Of Birth:**
**Occupation:** **Employee No:**
**Team:** **Contractor Name:**
**Type of Injury:**
**Further Injury Description and Notes:**
**Shift:** **Hours Worked Since Shift began:** **hr** **Number of Shifts since day off:**
**Length of service in current position:** **Years** **Months**
**Total Rail Service:** **Years** **Months**
**Was this person certified for the task?** **Was the certification current?** **Date:**
**Is Theory Assessment Current?** **Date:**
**Is Safety Observations Current?** **Date:**
**Is the Road Knowledge Current?** **Date:**
**Is this person required to wear corrective visual aids?**
**Were they wearing them at time of incident?**
**Was Eye Protection being worn at time of incident?**
**Was Ear Protection being worn at time of incident?**
**Was a Drug and Alcohol test completed?**
**Are there any Medical Restrictions?**
**Details of Medical Restrictions and other Information:**

Page 1

## PERSON INVOLVED

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Occupation:**
**Type of Injury:**
**Further Injury Description and Notes:**

## WITNESS

**Witness No:** **Person Type:**
**First Name:** **Last Name:**
**Witness's Description of Incident:**

none

## RAIL VEHICLE INVOLVED

**Train/Shunt ID:** **Train Type:**
**Train From:** **Train To:**
**Train Length:** m **Train Weight:** t **Train Speed:** km/h
**Lead Locomotive:** **Running Long/Short Hood:**
**Unit Being:** **Loco and Class:**
**Locomotive Being:**

| | | Home Terminal |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:** **Evenly Distributed Load:** **Points Damage:**
**Yard / Siding / Line:** **Type of Load:**
**Where Derailed:** **Wheels Derailed:**
**Additional Rail Vehicle Information:**

## MOTOR VEHICLE INVOLVED

**Registration No:** **Make:** **Model:**
**Year:** **COF/WOF Expiry Date:** **Colour:**

### OWNER'S DETAILS

**Owner's Name:**
**Driver's Name:** **Driver License No:**
**Insurance Company:**
**Direction of Travel: From:** **To:**
**Description of Damage / Injury:**

## IMMEDIATE ACTION TAKEN

**Action Description:**
**First Name:** **Surname:**
**Position:** **Date:**
**Was the Site Frozen?** **By Whom:**

## TERMINAL DERAILMENT

**Wagon Inspected By:** **Wagon Status:**
**Placed for Inspection:**
**Track Inspected By:** **Track Status:**

## INVESTIGATION FINDINGS / CAUSATION

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

## SUMMARY OF COST

| | |
|---|---|
| **Property Damage:** | $ |
| **Rail Vehicle Damage:** | $ |
| **Cargo / Freight Damage:** | $ |
| **Motor Vehicle Damage:** | $ |
| **Rail Other Costs:** | $ |
| **Operational Interruption:** | $ |
| **HSE Costs:** | No Costs Entered |
| **Total Cost of Incident:** | **$** |

## SUMMARY OF COST - DAMAGE DETAILS

| Rail VehicleID | Customer | Load | Damage | Est. Cost of Vehicle | Est. Cost of Load |
|---|---|---|---|---|---|
| | | | | $ | $ |

## SUMMARY OF COST - OTHER RAIL COST

| Cost Type | Cost Name Details | No Hours Kms | Cost Per Hour Km | Estimated Cost |
|---|---|---|---|---|
| | | | $ | $ |

## INVESTIGATION RECORDS

### Logs Obtained

**Loco Logs:**
**CTC Logs:**
**TC Voice Logs:** **Was print out uploaded?**
**CCTV:**

### Agencies Advised

**TAIC:**
**NZTA:**
**Department of Labour:**

### Checklist

**Electronic Weightbridge Print Out:**
**Staff Involved Report:**
**Witness Reports:**
**Other Train Crew Reports:**
**MLD1 (if track related):**
**Pesonnel Involved HR Details Uploaded:**
**Site Plans:**

## CORRESPONDENCE IN

**Short Title:**
**Date Received:** **Receipt Method:** **Priviledged and Confidential:**
**Received From:**
**File Name:**
**Description:**

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**CORRECTIVE ACTIONS**

*No Records Found*

**INVESTIGATORS**

| Type | First Name (s) | Surname | Target Due Date | Actual Comp. Date |
|---|---|---|---|---|
| Investigator | | | | |
| Reviewer | | | | |
| Approver | | | | |

**SIGN OFF**

| Business Unit | Name | Signature | Date |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

Page 4

## OM6 – SPAD A Occurrence Report

KiwiRail National Rail System
SPAD OCCURRENCE REPORT **OM6 -**

### INVESTIGATION DETAILS

**Investigation No:** **Investigation Status:**
**Date Opened:** **Date Closed:**
**Investigation Level:** **Responsibility:**
**Scope Of Investigation:**

### INCIDENT DETAILS

**Incident Date:** **Incident Time:**
**Weather:** **Wind:** **Visibility:**
**Operating Process 1:** **Primary Effect 1:**
**Operating Process 2:** **Primary Effect 2:**
**Short Title:**
**Incident Description:**
**Line ID:** **Location Type:**
**Location:**
**Station From:** **Station To:**
**Meterage:**

### RAIL PERSON INVOLVED

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Date Of Birth:**
**Occupation:** **Employee No:**
**Team:** **Contractor Name:**
**Type of Injury:**
**Further Injury Description and Notes:**
**Shift:** **Hours Worked Since Shift began:** **hr** **Number of Shifts since day off:**
**Length of service in current position:** **Years** **Months**
**Total Rail Service:** **Years** **Months**
**Was this person certified for the task?** **Was the certification current?** **Date:**
**Is Theory Assessment Current?** **Date:**
**Is Safety Observations Current?** **Date:**
**Is the Road Knowledge Current?** **Date:**
**Is this person required to wear corrective visual aids?**
**Were they wearing them at time of incident?**
**Was Eye Protection being worn at time of incident?**
**Was Ear Protection being worn at time of incident?**
**Was a Drug and Alcohol test completed?**
**Are there any Medical Restrictions?**
**Details of Medical Restrictions and other Information:**

**PERSON INVOLVED**

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Occupation:**
**Type of Injury:**
**Further Injury Description and Notes:**

**WITNESS**

**Witness No:** **Person Type:**
**First Name:** **Last Name:**
**Witness's Description of Incident:**

none

**RAIL VEHICLE INVOLVED**

**Train/Shunt ID:** **Train Type:**
**Train From:** **Train To:**
**Train Length:** m **Train Weight:** t **Train Speed:** km/h
**Lead Locomotive:** **Running Long/Short Hood:**
**Unit Being:** **Loco and Class:**
**Locomotive Being:**

| | | **Home Terminal** |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**
**Additional Rail Vehicle Information:**

**Train/Shunt ID:** **Train Type:**
**Train From:** **Train To:**
**Train Length:** m **Train Weight:** t **Train Speed:** km/h
**Lead Locomotive:** **Running Long/Short Hood:**
**Unit Being:** **Loco and Class:**
**Locomotive Being:**

| | | **Home Terminal** |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**
**Additional Rail Vehicle Information:**

**MOTOR VEHICLE INVOLVED**

**Registration No:** **Make:** **Model:**
**Year:** **COF/WOF Expiry Date:** **Colour:**

**OWNER'S DETAILS**

**Owner's Name:**
**Driver's Name:** **Driver License No:**
**Insurance Company:**
**Direction of Travel: From:** **To:**
**Description of Damage / Injury:**

**IMMEDIATE ACTION TAKEN**

**Action Description:**
**First Name:** **Surname:**
**Position:** **Date:**
**Was the Site Frozen?** **By Whom:**

**SPAD INVESTIGATION DETAILS**

**Signalling System:** **Signalling Number:** **Signal Sighting Distance:**
**Track Gradient:** **Overrun Distance:**
**Distance to Fouling Point from Signal:**
**View Lines:**

**Train Was:** **Driver has route knowledge of line traversed?**
**Points Damage:** **Conflicting Move:** **Conflicting Train:**
**Sequence of Events of Operator approaching signal prior to SPAD'd signal:**

**Sequence of Events of Operator once train came to a standstill after passing signal at STOP:**

**No. of Others in Cab:**
**Signalling System:** **Signalling Number:** **Signal Sighting Distance:**
**Track Gradient:** **Overrun Distance:**
**Distance to Fouling Point from Signal:**
**View Lines:**

**Train Was:** **Driver has route knowledge of line traversed?**
**Points Damage:** **Conflicting Move:** **Conflicting Train:**
**Sequence of Events of Operator approaching signal prior to SPAD'd signal:**

**Sequence of Events of Operator once train came to a standstill after passing signal at STOP:**

## INVESTIGATION FINDINGS / CAUSATION

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

## SUMMARY OF COST

| | |
|---|---|
| **Property Damage:** | $ |
| **Rail Vehicle Damage:** | $ |
| **Cargo / Freight Damage:** | $ |
| **Motor Vehicle Damage:** | $ |
| **Rail Other Costs:** | $ |
| **Operational Interruption:** | $ |
| **HSE Costs:** | $ |
| **Total Cost of Incident:** | **$** |

## SUMMARY OF COST - DAMAGE DETAILS

| Rail VehicleID | Customer | Load | Damage | Est. Cost of Vehicle | Est. Cost of Load |
|---|---|---|---|---|---|
| Blank | | | | $ | $ |

## SUMMARY OF COST - OTHER RAIL COST

| Cost Type | Cost Name Details | No Hours Kms | Cost Per Hour Km | Estimated Cost |
|---|---|---|---|---|
| | | | $ | $ |

## INVESTIGATION RECORDS

### Logs Obtained

**Loco Logs:**
**CTC Logs:**
**TC Voice Logs:** **Was print out uploaded?**
**CCTV:**

### Agencies Advised

**TAIC:**
**NZTA:**
**Department of Labour:**

### Checklist

**Electronic Weightbridge Print Out:**
**Staff Involved Report:**
**Witness Reports:**
**Other Train Crew Reports:**
**MLD1 (if track related):**
**Pesonnel Involved HR Details Uploaded:**
**Site Plans:**

## CORRESPONDENCE IN

**Short Title:**
**Date Received:** **Receipt Method:** **Priviledged and Confidential:**
**Received From:**
**File Name:**
**Description:**

**CORRECTIVE ACTIONS**

*No Records Found*

**INVESTIGATORS**

| Type | First Name (s) | Surname | Target Due Date | Actual Comp. Date |
|---|---|---|---|---|
| Investigator | | | | |
| Reviewer | | | | |
| Approver | | | | |

**SIGN OFF**

| Business Unit | Name | Signature | Date |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

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## OM7 Track Occupancy Occurrence Report

KiwiRail National Rail System
TRACK OCCUPANCY OCCURRENCE REPORT **OM7 -**

### INVESTIGATION DETAILS

**Investigation No:** **Investigation Status:**
**Date Opened:** **Date Closed:**
**Investigation Level:** **Responsibility:**
**Scope Of Investigation:**

fdas

### INCIDENT DETAILS

**Incident Date:** **Incident Time:**
**Weather:** **Wind:** **Visibility:**
**Operating Process 1:** **Primary Effect 1:**
**Operating Process 2:** **Primary Effect 2:**
**Short Title:**
**Incident Description:**
**Line ID:** **Location Type:**
**Location:**
**Station From:** **Station To:**
**Meterage:**

### TRACK OCCUPANCY SITE INFORMATION

**Person In Charge:** **Distance from location of Incident:** km

**Rail Service Vehicles Involved [Direction of Travel]**

**1st Vehicle From:** **To:**
**2nd Vehicle From:** **To:**

**Working under Protection Rule No.**

**Rule 904 Emergency Protection:** **Rule 910 Major Work Sites:**
**Rule 905 Conditional Stop Protection:** **Rule 914 Mobile Track Maintenance vehicles:**
**Rule 906 Manned Protection:** **Rule 915 Trolleys & Hi Rail Vehicles:**
**Rule 908:** **Rule 917 Individual Train Detection:**
**Rule 909 Work Within Station Limits and Sidings:** **Rule 918 Foul Time:**
**Other:**

**Bulletin Held by Staff at Time of Incident**

**Bulletin** **Uploaded**

**NCM/LSM**

**Signals:**

| | Called | On Site | Clear |
|---|---|---|---|
| **Infrastructure:** | | | |

Page 1

**RAIL PERSON INVOLVED**

**Person Type:** Male Female
**First Name:** **Last Name:**
**Title:** **Date Of Birth:**
**Occupation:** **Employee No:**
**Team:** **Contractor Name:**
**Type of Injury:**
**Further Injury Description and Notes:**

**Shift:** **Hours Worked Since Shift began:** hr **Number of Shifts since day off:**
**Length of service in current position:** Years Months
**Total Rail Service:** Years Months
**Was this person certified for the task?** **Was the certification current?** **Date:**
**Is Theory Assessment Current?** **Date:**
**Is Safety Observations Current?** **Date:**
**Is the Road Knowledge Current?** **Date:**
**Is this person required to wear corrective visual aids?**
**Were they wearing them at time of incident?**
**Was Eye Protection being worn at time of incident?**
**Was Ear Protection being worn at time of incident?**
**Was a Drug and Alcohol test completed?**
**Are there any Medical Restrictions?**
**Details of Medical Restrictions and other Information:**

**PERSON INVOLVED**

**Person Type:** Male Female
**First Name:** **Last Name:**
**Title:** **Occupation:**
**Type of Injury:**
**Further Injury Description and Notes:**

**WITNESS**

**Witness No:** **Person Type:**
**First Name:** **Last Name:**
**Witness's Description of Incident:**

## RAIL VEHICLE INVOLVED

| | | | | | |
|---|---|---|---|---|---|
| **Train/Shunt ID:** | | **Train Type:** | | | |
| **Train From:** | | **Train To:** | | | |
| **Train Length:** | **m** | **Train Weight:** | **t** | **Train Speed:** | **km/h** |
| **Lead Locomotive:** | | **Running Long/Short Hood:** | | | |
| **Unit Being:** | | **Loco and Class:** | | | |
| **Locomotive Being:** | | | | | |

| | | **Home Terminal** |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**

**Additional Rail Vehicle Information:**

| | | | | | |
|---|---|---|---|---|---|
| **Train/Shunt ID:** | | **Train Type:** | | | |
| **Train From:** | | **Train To:** | | | |
| **Train Length:** | **m** | **Train Weight:** | **t** | **Train Speed:** | **km/h** |
| **Lead Locomotive:** | | **Running Long/Short Hood:** | | | |
| **Unit Being:** | | **Loco and Class:** | | | |
| **Locomotive Being:** | | | | | |

| | | **Home Terminal** |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**

**Additional Rail Vehicle Information:**

## MOTOR VEHICLE INVOLVED

| | | |
|---|---|---|
| **Registration No:** | **Make:** | **Model:** |
| **Year:** | **COF/WOF Expiry Date:** | **Colour:** |

### OWNER'S DETAILS

**Owner's Name:**

**Driver's Name:** **Driver License No:**

**Insurance Company:**

**Direction of Travel: From:** **To:**

**Description of Damage / Injury:**

## IMMEDIATE ACTION TAKEN

**Action Description:**

**First Name:** **Surname:**

**Position:** **Date:**

**Was the Site Frozen?** **By Whom:**

## INVESTIGATION FINDINGS / CAUSATION

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

## SUMMARY OF COST

| | |
|---|---|
| **Property Damage:** | $ |
| **Rail Vehicle Damage:** | $ |
| **Cargo / Freight Damage:** | $ |
| **Motor Vehicle Damage:** | $ |
| **Rail Other Costs:** | $ |
| **Operational Interruption:** | $ |
| **HSE Costs:** | $ |
| **Total Cost of Incident:** | **$** |

## INVESTIGATION RECORDS

### Logs Obtained

**Loco Logs:**
**CTC Logs:**
**TC Voice Logs:** **Was print out uploaded?**
**CCTV:**

### Agencies Advised

| | |
|---|---|
| **TAIC:** | No |
| **NZTA:** | No |
| **Department of Labour:** | No |

### Checklist

**Electronic Weightbridge Print Out:**
**Staff Involved Report:**
**Witness Reports:**
**Other Train Crew Reports:**
**MLD1 (if track related):**
**Pesonnel Involved HR Details Uploaded:**
**Site Plans:**

## CORRESPONDENCE IN

**Short Title:**
**Date Received:** **Receipt Method:** **Priviledged and Confidential:**
**Received From:**
**File Name:**
**Description:**

**CORRECTIVE ACTIONS**

**Action No.** 1 **Action/Rec.No:** **Action Type:**

**Action Description:**

**Target Comp Date:** **Actual Comp Date:**

| **Internal Assignee:** | **External Assignee:** |
|---|---|
| **First Name(s):** | **Organisation:** |
| **Surname:** | **Name/Role:** |

| **Assigned for Follow Up:** | **Other Action Required** |
|---|---|
| **Technical Committee:** | **Risk Register Action Required:** |
| **NRSS Exec:** | **Effectiveness Review Required:** |
| **Safety Action Team:** | **Feedback Sent to Person Involved:** |
| **HSE Exec:** | |
| **Business Unit:** | |
| **Com / Action Taken:** | |

**INVESTIGATORS**

| **Type** | **First Name (s)** | **Surname** | **Target Due Date** | **Actual Comp. Date** |
|---|---|---|---|---|
| Investigator | | | | |
| Approver | | | | |
| Reviewer | | | | |

**SIGN OFF**

| **Business Unit** | **Name** | **Signature** | **Date** |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

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## OM8 Terminal Collission Report

KiwiRail National Rail System
TERMINAL COLLISION REPORT

**OM8 -**

### INVESTIGATION DETAILS

**Investigation No:** **Investigation Status:**
**Date Opened:** **Date Closed:**
**Investigation Level:** **Responsibility:**
**Scope Of Investigation:**

### INCIDENT DETAILS

**Incident Date:** **Incident Time:**
**Weather:** **Wind:** **Visibility:**
**Operating Process 1:** **Primary Effect 1:**
**Operating Process 2:** **Primary Effect 2:**
**Short Title:**
**Incident Description:**
**Line ID:** **Location Type:**
**Location:**
**Station From:** **Station To:**
**Meterage:**

### RAIL PERSON INVOLVED

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Date Of Birth:**
**Occupation:** **Employee No:**
**Team:** **Contractor Name:**
**Type of Injury:**
**Further Injury Description and Notes:**
**Shift:** **Hours Worked Since Shift began:** **hr** **Number of Shifts since day off:**
**Length of service in current position:** **Years** **Months**
**Total Rail Service:** **Years** **Months**
**Was this person certified for the task?** **Was the certification current?** **Date:**
**Is Theory Assessment Current?** **Date:**
**Is Safety Observations Current?** **Date:**
**Is the Road Knowledge Current?** **Date:**
**Is this person required to wear corrective visual aids?**
**Were they wearing them at time of incident?**
**Was Eye Protection being worn at time of incident?**
**Was Ear Protection being worn at time of incident?**
**Was a Drug and Alcohol test completed?**
**Are there any Medical Restrictions?**
**Details of Medical Restrictions and other Information:**

**PERSON INVOLVED**

**Person Type:** **Male** **Female**

**First Name:** **Last Name:**

**Title:** **Occupation:**

**Type of Injury:**

**Further Injury Description and Notes:**

**WITNESS**

**Witness No:** **Person Type:**

**First Name:** **Last Name:**

**Witness's Description of Incident:**

none

**RAIL VEHICLE INVOLVED**

**Train/Shunt ID:** **Train Type:**

**Train From:** **Train To:**

**Train Length:** m **Train Weight:** t **Train Speed:** km/h

**Lead Locomotive:** **Running Long/Short Hood:**

**Unit Being:** **Loco and Class:**

**Locomotive Being:**

| | | **Home Terminal** |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**

**Additional Rail Vehicle Information:**

**MOTOR VEHICLE INVOLVED**

**Registration No:** **Make:** **Model:**

**Year:** **COF/WOF Expiry Date:** **Colour:**

**OWNER'S DETAILS**

**Owner's Name:**

**Driver's Name:** **Driver License No:**

**Insurance Company:**

**Direction of Travel:** **From:** **To:**

**Description of Damage / Injury:**

**IMMEDIATE ACTION TAKEN**

**Action Description:**

**First Name:** **Surname:**

**Position:** **Date:**

**Was the Site Frozen?** **By Whom:**

## INVESTIGATION FINDINGS / CAUSATION

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

## SUMMARY OF COST

| | |
|---|---|
| **Property Damage:** | $ |
| **Rail Vehicle Damage:** | $ |
| **Cargo / Freight Damage:** | $ |
| **Motor Vehicle Damage:** | $ |
| **Rail Other Costs:** | $ |
| **Operational Interruption:** | $ |
| **HSE Costs:** | No Costs Entered |
| **Total Cost of Incident:** | **$** |

## SUMMARY OF COST - DAMAGE DETAILS

| Rail VehicleID | Customer | Load | Damage | Est. Cost of Vehicle | Est. Cost of Load |
|---|---|---|---|---|---|
| | | | | $ | $ |

## SUMMARY OF COST - OTHER RAIL COST

| Cost Type | Cost Name Details | No Hours Kms | Cost Per Hour Km | Estimated Cost |
|---|---|---|---|---|
| | | | $ | $ |

## INVESTIGATION RECORDS

### Logs Obtained

**Loco Logs:**
**CTC Logs:**
**TC Voice Logs:** **Was print out uploaded?** No
**CCTV:**

### Agencies Advised

**TAIC:**
**NZTA:**
**Department of Labour:**

### Checklist

**Electronic Weightbridge Print Out:**
**Staff Involved Report:**
**Witness Reports:**
**Other Train Crew Reports:**
**MLD1 (if track related):**
**Pesonnel Involved HR Details Uploaded:**
**Site Plans:**

## CORRESPONDENCE IN

**Short Title:**
**Date Received:** **Receipt Method:** **Priviledged and Confidential:**
**Received From:**
**File Name:**
**Description:**

**CORRECTIVE ACTIONS**

**Action No.** 1 **Action/Rec.No:** **Action Type:**

**Action Description:**

**Target Comp Date:** **Actual Comp Date:**

**Internal Assignee:**
**First Name(s):**
**Surname:**

**External Assignee:**
**Organisation:**
**Name/Role:**

**Assigned for Follow Up:**
**Technical Committee:**
**NRSS Exec:**
**Safety Action Team:**
**HSE Exec:**
**Business Unit:**
**Com / Action Taken:**

**Other Action Required**
**Risk Register Action Required:**
**Effectiveness Review Required:**
**Feedback Sent to Person Involved:**

**INVESTIGATORS**

| Type | First Name (s) | Surname | Target Due Date | Actual Comp. Date |
|---|---|---|---|---|
| Investigator | | | | |
| Approver | | | | |
| Reviewer | | | | |

**SIGN OFF**

| Business Unit | Name | Signature | Date |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

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## OM9 Passenger Occurence Report

KiwiRail National Rail System
PASSENGER OCCURRENCE REPORT **OM9 -**

**INVESTIGATION DETAILS**

**Investigation No:** **Investigation Status:**
**Date Opened:** **Date Closed:**
**Investigation Level:** **Responsibility:**
**Scope Of Investigation:**

**INCIDENT DETAILS**

**Incident Date:** **Incident Time:**
**Weather:** **Wind:** **Visibility:**
**Operating Process 1:** **Primary Effect 1:**
**Operating Process 2:** **Primary Effect 2:**
**Short Title:**
**Incident Description:**
**Line ID:** **Location Type:**
**Location:**
**Station From:** **Station To:**
**Meterage:**

**RAIL PERSON INVOLVED**

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Date Of Birth:**
**Occupation:** **Employee No:**
**Team:** **Contractor Name:**
**Type of Injury:**
**Further Injury Description and Notes:**
**Shift:** **Hours Worked Since Shift began:** **hr** **Number of Shifts since day off:**
**Length of service in current position:** **Years** **Months**
**Total Rail Service:** **Years** **Months**
**Was this person certified for the task?** **Was the certification current?** **Date:**
**Is Theory Assessment Current?** **Date:**
**Is Safety Observations Current?** **Date:**
**Is the Road Knowledge Current?** **Date:**
**Is this person required to wear corrective visual aids?**
**Were they wearing them at time of incident?**
**Was Eye Protection being worn at time of incident?**
**Was Ear Protection being worn at time of incident?**
**Was a Drug and Alcohol test completed?**
**Are there any Medical Restrictions?**
**Details of Medical Restrictions and other Information:**

Page 1

**PERSON INVOLVED**

**Person Type:** Male Female

**First Name:** **Last Name:**

**Title:** **Occupation:**

**Type of Injury:**

**Further Injury Description and Notes:**

**WITNESS**

**Witness No:** **Person Type:**

**First Name:** **Last Name:**

**Witness's Description of Incident:**

none

**RAIL VEHICLE INVOLVED**

**Train/Shunt ID:** **Train Type:**

**Train From:** **Train To:**

**Train Length:** m **Train Weight:** t **Train Speed:** km/h

**Lead Locomotive:** **Running Long/Short Hood:**

**Unit Being:** **Loco and Class:**

**Locomotive Being:**

| | | Home Terminal |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**

**Additional Rail Vehicle Information:**

**MOTOR VEHICLE INVOLVED**

**Registration No:** **Make:** **Model:**

**Year:** **COF/WOF Expiry Date:** **Colour:**

**OWNER'S DETAILS**

**Owner's Name:**

**Driver's Name:** **Driver License No:**

**Insurance Company:**

**Direction of Travel: From:** **To:**

**Description of Damage / Injury:**

**IMMEDIATE ACTION TAKEN**

**Action Description:**

**First Name:** **Surname:**

**Position:** **Date:**

**Was the Site Frozen?** **By Whom:**

## INVESTIGATION FINDINGS / CAUSATION

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

## SUMMARY OF COST

| | |
|---|---|
| **Property Damage:** | $ |
| **Rail Vehicle Damage:** | $ |
| **Cargo / Freight Damage:** | $ |
| **Motor Vehicle Damage:** | $ |
| **Rail Other Costs:** | $ |
| **Operational Interruption:** | $ |
| **HSE Costs:** | No Costs Entered |
| **Total Cost of Incident:** | **$** |

## SUMMARY OF COST - DAMAGE DETAILS

| Rail VehicleID | Customer | Load | Damage | Est. Cost of Vehicle | Est. Cost of Load |
|---|---|---|---|---|---|
| | | | | $ | $ |

## SUMMARY OF COST - OTHER RAIL COST

| Cost Type | Cost Name Details | No Hours Kms | Cost Per Hour Km | Estimated Cost |
|---|---|---|---|---|
| | | | $ | $ |

## INVESTIGATION RECORDS

### Logs Obtained

**Loco Logs:**
**CTC Logs:**
**TC Voice Logs:** **Was print out uploaded?** No
**CCTV:**

### Agencies Advised

**TAIC:**
**NZTA:**
**Department of Labour:**

### Checklist

**Electronic Weightbridge Print Out:**
**Staff Involved Report:**
**Witness Reports:**
**Other Train Crew Reports:**
**MLD1 (if track related):**
**Pesonnel Involved HR Details Uploaded:**
**Site Plans:**

## CORRESPONDENCE IN

**Short Title:**
**Date Received:** **Receipt Method:** **Priviledged and Confidential:**
**Received From:**
**File Name:**
**Description:**

**CORRECTIVE ACTIONS**

**Action No.** 1 **Action/Rec.No:** **Action Type:**

**Action Description:**

**Target Comp Date:** **Actual Comp Date:**

**Internal Assignee:**
**First Name(s):**
**Surname:**

**External Assignee:**
**Organisation:**
**Name/Role:**

**Assigned for Follow Up:**
**Technical Committee:**
**NRSS Exec:**
**Safety Action Team:**
**HSE Exec:**
**Business Unit:**
**Com / Action Taken:**

**Other Action Required**
**Risk Register Action Required:**
**Effectiveness Review Required:**
**Feedback Sent to Person Involved:**

**INVESTIGATORS**

| Type | First Name (s) | Surname | Target Due Date | Actual Comp. Date |
|---|---|---|---|---|
| Investigator | | | | |
| Approver | | | | |
| Reviewer | | | | |

**SIGN OFF**

| Business Unit | Name | Signature | Date |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

Page 4

## LR1 Freight Operations Report

KiwiRail National Rail System
FREIGHT OPERATIONS REPORT **LR1 -**

**INVESTIGATION DETAILS**

**Investigation No:** **Investigation Status:**
**Date Opened:** **Date Closed:**
**Investigation Level:** **Responsibility:**
**Scope Of Investigation:**

**INCIDENT DETAILS**

**Incident Date:** **Incident Time:**
**Weather:** **Wind:** **Visibility:**
**Operating Process 1:** **Primary Effect 1:**
**Operating Process 2:** **Primary Effect 2:**
**Short Title:**
**Incident Description:**
**Line ID:** **Location Type:**
**Location:**
**Station From:** **Station To:**
**Meterage:**

**RAIL PERSON INVOLVED**

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Date Of Birth:**
**Occupation:** **Employee No:**
**Team:** **Contractor Name:**
**Type of Injury:**
**Further Injury Description and Notes:**
**Shift:** **Hours Worked Since Shift began:** **hr** **Number of Shifts since day off:**
**Length of service in current position:** **Years** **Months**
**Total Rail Service:** **Years** **Months**
**Was this person certified for the task?** **Was the certification current?** **Date:**
**Is Theory Assessment Current?** **Date:**
**Is Safety Observations Current?** **Date:**
**Is the Road Knowledge Current?** **Date:**
**Is this person required to wear corrective visual aids?**
**Were they wearing them at time of incident?**
**Was Eye Protection being worn at time of incident?**
**Was Ear Protection being worn at time of incident?**
**Was a Drug and Alcohol test completed?**
**Are there any Medical Restrictions?**
**Details of Medical Restrictions and other Information:**

**PERSON INVOLVED**

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Occupation:**
**Type of Injury:**
**Further Injury Description and Notes:**

**WITNESS**

**Witness No:** **Person Type:**
**First Name:** **Last Name:**
**Witness's Description of Incident:**

none

**RAIL VEHICLE INVOLVED**

**Train/Shunt ID:** **Train Type:**
**Train From:** **Train To:**
**Train Length:** m **Train Weight:** t **Train Speed:** km/h
**Lead Locomotive:** **Running Long/Short Hood:**
**Unit Being:** **Loco and Class:**
**Locomotive Being:**

| | | Home Terminal |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**
**Additional Rail Vehicle Information:**

**MOTOR VEHICLE INVOLVED**

**Registration No:** **Make:** **Model:**
**Year:** **COF/WOF Expiry Date:** **Colour:**

**OWNER'S DETAILS**

**Owner's Name:**
**Driver's Name:** **Driver License No:**
**Insurance Company:**
**Direction of Travel: From:** **To:**
**Description of Damage / Injury:**

**IMMEDIATE ACTION TAKEN**

**Action Description:**
**First Name:** **Surname:**
**Position:** **Date:**
**Was the Site Frozen?** **By Whom:**

## INVESTIGATION FINDINGS / CAUSATION

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

## SUMMARY OF COST

| | |
|---|---|
| **Property Damage:** | $ |
| **Rail Vehicle Damage:** | $ |
| **Cargo / Freight Damage:** | $ |
| **Motor Vehicle Damage:** | $ |
| **Rail Other Costs:** | $ |
| **Operational Interruption:** | $ |
| **HSE Costs:** | No Costs Entered |
| **Total Cost of Incident:** | **$** |

## SUMMARY OF COST - DAMAGE DETAILS

| Rail VehicleID | Customer | Load | Damage | Est. Cost of Vehicle | Est. Cost of Load |
|---|---|---|---|---|---|
| | | | | $ | $ |

## SUMMARY OF COST - OTHER RAIL COST

| Cost Type | Cost Name Details | No Hours Kms | Cost Per Hour Km | Estimated Cost |
|---|---|---|---|---|
| | | | $ | $ |

## INVESTIGATION RECORDS

### Logs Obtained

**Loco Logs:**
**CTC Logs:**
**TC Voice Logs:** **Was print out uploaded?** No
**CCTV:**

### Agencies Advised

**TAIC:**
**NZTA:**
**Department of Labour:**

### Checklist

**Electronic Weightbridge Print Out:**
**Staff Involved Report:**
**Witness Reports:**
**Other Train Crew Reports:**
**MLD1 (if track related):**
**Pesonnel Involved HR Details Uploaded:**
**Site Plans:**

## CORRESPONDENCE IN

**Short Title:**
**Date Received:** **Receipt Method:** **Priviledged and Confidential:**
**Received From:**
**File Name:**
**Description:**

**CORRECTIVE ACTIONS**

**Action No.** 1 **Action/Rec.No:** **Action Type:**

**Action Description:**

**Target Comp Date:** **Actual Comp Date:**

| **Internal Assignee:** | **External Assignee:** |
|---|---|
| **First Name(s):** | **Organisation:** |
| **Surname:** | **Name/Role:** |

| **Assigned for Follow Up:** | **Other Action Required** |
|---|---|
| **Technical Committee:** | **Risk Register Action Required:** |
| **NRSS Exec:** | **Effectiveness Review Required:** |
| **Safety Action Team:** | **Feedback Sent to Person Involved:** |
| **HSE Exec:** | |
| **Business Unit:** | |
| **Com / Action Taken:** | |

**INVESTIGATORS**

| **Type** | **First Name (s)** | **Surname** | **Target Due Date** | **Actual Comp. Date** |
|---|---|---|---|---|
| Investigator | | | | |
| Approver | | | | |
| Reviewer | | | | |

**SIGN OFF**

| **Business Unit** | **Name** | **Signature** | **Date** |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

Page 4

## LC2 Level Crossing Collission Report

KiwiRail National Rail System
LEVEL CROSSING COLLISION REPORT **LC2 -**

**INVESTIGATION DETAILS**

**Investigation No:** **Investigation Status:**
**Date Opened:** **Date Closed:**
**Investigation Level:** **Responsibility:**
**Scope Of Investigation:**

**INCIDENT DETAILS**

**Incident Date:** **Incident Time:**
**Weather:** **Wind:** **Visibility:**
**Operating Process 1:** **Primary Effect 1:**
**Operating Process 2:** **Primary Effect 2:**
**Short Title:**
**Incident Description:**
**Line ID:** **Location Type:**
**Location:**
**Station From:** **Station To:**
**Meterage:**

**RAIL PERSON INVOLVED**

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Date Of Birth:**
**Occupation:** **Employee No:**
**Team:** **Contractor Name:**
**Type of Injury:**
**Further Injury Description and Notes:**
**Shift:** **Hours Worked Since Shift began:** **hr** **Number of Shifts since day off:**
**Length of service in current position:** **Years** **Months**
**Total Rail Service:** **Years** **Months**
**Was this person certified for the task?** **Was the certification current?** **Date:**
**Is Theory Assessment Current?** **Date:**
**Is Safety Observations Current?** **Date:**
**Is the Road Knowledge Current?** **Date:**
**Is this person required to wear corrective visual aids?**
**Were they wearing them at time of incident?**
**Was Eye Protection being worn at time of incident?**
**Was Ear Protection being worn at time of incident?**
**Was a Drug and Alcohol test completed?**
**Are there any Medical Restrictions?**
**Details of Medical Restrictions and other Information:**

Page 1

**PERSON INVOLVED**

**Person Type:** Male Female

**First Name:** **Last Name:**

**Title:** **Occupation:**

**Type of Injury:**

**Further Injury Description and Notes:**

**WITNESS**

**Witness No:** **Person Type:**

**First Name:** **Last Name:**

**Witness's Description of Incident:**

none

**RAIL VEHICLE INVOLVED**

**Train/Shunt ID:** **Train Type:**

**Train From:** **Train To:**

**Train Length:** m **Train Weight:** t **Train Speed:** km/h

**Lead Locomotive:** **Running Long/Short Hood:**

**Unit Being:** **Loco and Class:**

**Locomotive Being:**

| | | Home Terminal |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**

**Additional Rail Vehicle Information:**

**MOTOR VEHICLE INVOLVED**

**Registration No:** **Make:** **Model:**

**Year:** **COF/WOF Expiry Date:** **Colour:**

**OWNER'S DETAILS**

**Owner's Name:**

**Driver's Name:** **Driver License No:**

**Insurance Company:**

**Direction of Travel: From:** **To:**

**Description of Damage / Injury:**

**IMMEDIATE ACTION TAKEN**

**Action Description:**

**First Name:** **Surname:**

**Position:** **Date:**

**Was the Site Frozen?** **By Whom:**

## LEVEL CROSSING INVESTIGATION DETAILS

**Whistle Sounded:** **Seconds Sounded:** **Distance from Crossing:** **m**
**Headlamp was burning:** **Distance rear of the train beyond crossing when stopped:** **m**
**Particulars of Braking:**
das
**Point of Impact:**

**Type:** **Warning Device:** **Was it Working?**
**Compulsory Stop Sign:** **Condition**
**Railway Track Sign:** **Condition**
**St Andrew's Cross Sign:** **Condition**
**Road Markings or Other Local Notices:** **Condition**
**Cross Keeper on Duty?** **Was Crossing Keeper displaying Stop Signal:**
**Visibility for LE:**

**Visibility for Road Driver:**

**The police were notified:** **Date Notified:** **Time Notified:** **Ref. No:**

## INVESTIGATION FINDINGS / CAUSATION

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

## SUMMARY OF COST

| | |
|---|---|
| **Property Damage:** | $ |
| **Rail Vehicle Damage:** | $ |
| **Cargo / Freight Damage:** | $ |
| **Motor Vehicle Damage:** | $ |
| **Rail Other Costs:** | $ |
| **Operational Interruption:** | $ |
| **HSE Costs:** | No Costs Entered |
| **Total Cost of Incident:** | **$** |

## SUMMARY OF COST - DAMAGE DETAILS

| Rail VehicleID | Customer | Load | Damage | Est. Cost of Vehicle | Est. Cost of Load |
|---|---|---|---|---|---|
| | | | | $ | $ |

## SUMMARY OF COST - OTHER RAIL COST

| Cost Type | Cost Name Details | No Hours Kms | Cost Per Hour Km | Estimated Cost |
|---|---|---|---|---|
| | | | $ | $ |

## INVESTIGATION RECORDS

### Logs Obtained

**Loco Logs:**
**CTC Logs:**
**TC Voice Logs:** **Was print out uploaded?**
**CCTV:**

### Agencies Advised

**TAIC:** No
**NZTA:** No
**Department of Labour:** No

### Checklist

**Electronic Weightbridge Print Out:**
**Staff Involved Report:**
**Witness Reports:**
**Other Train Crew Reports:**
**MLD1 (if track related):**
**Pesonnel Involved HR Details Uploaded:**
**Site Plans:**

## CORRESPONDENCE IN

**Short Title:**
**Date Received:** **Receipt Method:** **Priviledged and Confidential:**
**Received From:**
**File Name:**
**Description:**

## CORRECTIVE ACTIONS

**Action No.** 1 **Action/Rec.No:** **Action Type:**
**Action Description:**

**Target Comp Date:** **Actual Comp Date:**

### Internal Assignee:

**First Name(s):**
**Surname:**

### External Assignee:

**Organisation:**
**Name/Role:**

### Assigned for Follow Up:

**Technical Committee:**
**NRSS Exec:**
**Safety Action Team:**
**HSE Exec:**
**Business Unit:**
**Com / Action Taken:**

### Other Action Required

**Risk Register Action Required:**
**Effectiveness Review Required:**
**Feedback Sent to Person Involved:**

## INVESTIGATORS

| Type | First Name (s) | Surname | Target Due Date | Actual Comp. Date |
|---|---|---|---|---|
| Investigator | | | | |
| Approver | | | | |
| Reviewer | | | | |

## SIGN OFF

| Business Unit | Name | Signature | Date |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

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## MLD3 Mainline Train Derailment Report

KiwiRail National Rail System
MAINLINE TRAIN DERAILMENT REPORT **MLD3 -**

**INVESTIGATION DETAILS**

**Investigation No:** **Investigation Status:**
**Date Opened:** **Date Closed:**
**Investigation Level:** **Responsibility:**
**Scope Of Investigation:**

**INCIDENT DETAILS**

**Incident Date:** **Incident Time:**
**Weather:** **Wind:** **Visibility:**
**Operating Process 1:** **Primary Effect 1:**
**Operating Process 2:** **Primary Effect 2:**
**Short Title:**
**Incident Description:**
**Line ID:** **Location Type:**
**Location:**
**Station From:** **Station To:**
**Meterage:**

**RAIL PERSON INVOLVED**

**Person Type:** **Male** **Female**
**First Name:** **Last Name:**
**Title:** **Date Of Birth:**
**Occupation:** **Employee No:**
**Team:** **Contractor Name:**
**Type of Injury:**
**Further Injury Description and Notes:**
**Shift:** **Hours Worked Since Shift began:** **hr** **Number of Shifts since day off:**
**Length of service in current position:** **Years** **Months**
**Total Rail Service:** **Years** **Months**
**Was this person certified for the task?** **Was the certification current?** **Date:**
**Is Theory Assessment Current?** **Date:**
**Is Safety Observations Current?** **Date:**
**Is the Road Knowledge Current?** **Date:**
**Is this person required to wear corrective visual aids?**
**Were they wearing them at time of incident?**
**Was Eye Protection being worn at time of incident?**
**Was Ear Protection being worn at time of incident?**
**Was a Drug and Alcohol test completed?**
**Are there any Medical Restrictions?**
**Details of Medical Restrictions and other Information:**

Page 1

**PERSON INVOLVED**

**Person Type:** **Male** **Female**

**First Name:** **Last Name:**

**Title:** **Occupation:**

**Type of Injury:**

**Further Injury Description and Notes:**

**WITNESS**

**Witness No:** **Person Type:**

**First Name:** **Last Name:**

**Witness's Description of Incident:**

**RAIL VEHICLE INVOLVED**

**Train/Shunt ID:** **Train Type:**

**Train From:** **Train To:**

**Train Length:** m **Train Weight:** t **Train Speed:** km/h

**Lead Locomotive:** **Running Long/Short Hood:**

**Unit Being:** **Loco and Class:**

**Locomotive Being:**

| | | **Home Terminal** |
|---|---|---|
| **Name of LE:** | | |
| **Name of Second Person:** | | |
| **Name of Remote Operator:** | | |

**Trans Shipped:**

**Additional Rail Vehicle Information:**

**MOTOR VEHICLE INVOLVED**

**Registration No:** **Make:** **Model:**

**Year:** **COF/WOF Expiry Date:** **Colour:**

**OWNER'S DETAILS**

**Owner's Name:**

**Driver's Name:** **Driver License No:**

**Insurance Company:**

**Direction of Travel: From:** **To:**

**Description of Damage / Injury:**

**IMMEDIATE ACTION TAKEN**

**Action Description:**

**First Name:** **Surname:**

**Position:** **Date:**

**Was the Site Frozen?** **By Whom:**

## MLD3 INVESTIGATION DETAILS

### NETWORK

**Derailment Details:**
**Point of Derailment:**
**Stopped:** **Distance train ran before stopping:**

**Location Details:**
**Turnout in vicinity of derailment:** **Derailment Occured at:**
**Track Gradient:** **Track Curved:**
**Track Grad:** **Radius:** **m**
**Wear:** **Weight of Rail:** **lbs Rail Was:**

**Notes:**

### OPERATOR

**Marshalling of Train Corect:**
**Weight of Derailed Vehicle:** **Tonnage ahead of derailed vehicle:**
**Est. Speed at time of derailment:** **km/hr** **Tonnage behind of derailed vehicle:**
**Automatic Brake in Operation:** **Dynamic/Regenerative Brake in Operation:**
**Locomotive Operating in Power:** **Notch:**

**Load Details:**
**Nature of the Load:**
**Load Secured:**
**Load Distribution:**

**Notes:**

### MECHANICAL

**First Vehcile to Derail:** **Handbrake was:** **Loco 69A:**
**Maintenace History:**

**Last Inspected on:** **At:**
**Defects before Derailment:**

**Track closed Duration:** **Hours** **Minutes**
**Notes:**

## INVESTIGATION FINDINGS / CAUSATION

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

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## INVESTIGATION FINDINGS / CAUSATION

### OPERATOR

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

### NETWORK

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

### MECHANICAL SERVICES

**Findings:**

**Cause Type:**
**Cause Group:**
**Cause Category:**
**Influences 1:**
**Influences 2:**
**Severity:**

## SUMMARY OF COST

| | |
|---|---|
| **Property Damage:** | $ |
| **Rail Vehicle Damage:** | $ |
| **Cargo / Freight Damage:** | $ |
| **Motor Vehicle Damage:** | $ |
| **Rail Other Costs:** | $ |
| **Operational Interruption:** | $ |
| **HSE Costs:** | No Costs Entered |
| **Total Cost of Incident:** | **$** |

## SUMMARY OF COST - DAMAGE DETAILS

| Rail VehicleID | Customer | Load | Damage | Est. Cost of Vehicle | Est. Cost of Load |
|---|---|---|---|---|---|
| | | | | $ | $ |

## SUMMARY OF COST - OTHER RAIL COST

| Cost Type | Cost Name Details | No Hours Kms | Cost Per Hour Km | Estimated Cost |
|---|---|---|---|---|
| | | | $ | $ |

**CORRECTIVE ACTIONS**

**Action No.** 1 **Action/Rec.No:** **Action Type:**

**Action Description:**

**Target Comp Date:** **Actual Comp Date:**

| **Internal Assignee:** | **External Assignee:** |
|---|---|
| **First Name(s):** | **Organisation:** |
| **Surname:** | **Name/Role:** |

| **Assigned for Follow Up:** | **Other Action Required** |
|---|---|
| **Technical Committee:** | **Risk Register Action Required:** |
| **NRSS Exec:** | **Effectiveness Review Required:** |
| **Safety Action Team:** | **Feedback Sent to Person Involved:** |
| **HSE Exec:** | |
| **Business Unit:** | |
| **Com / Action Taken:** | |

**INVESTIGATORS**

| **Type** | **First Name (s)** | **Surname** | **Target Due Date** | **Actual Comp. Date** |
|---|---|---|---|---|
| Investigator | | | | |
| Approver | | | | |
| Reviewer | | | | |

**SIGN OFF**

| **Business Unit** | **Name** | **Signature** | **Date** |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

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