

# Railroad Worker Clearance Form

## Applicant Contact Information

Company

Billing Address

City or town  State

ZIP

Form No.

Applicant Name

Phone

Applicant E-mail

Date Submitted

## Work Activity Information

City or town  Railroad

Mile Post No.  Structure No.

Brief Work Description

Work Duration in Foul Zone

Work Start Date

Expected Completion Date

Equipment to be used in foul zone

Work Proximity to Rail (feet)