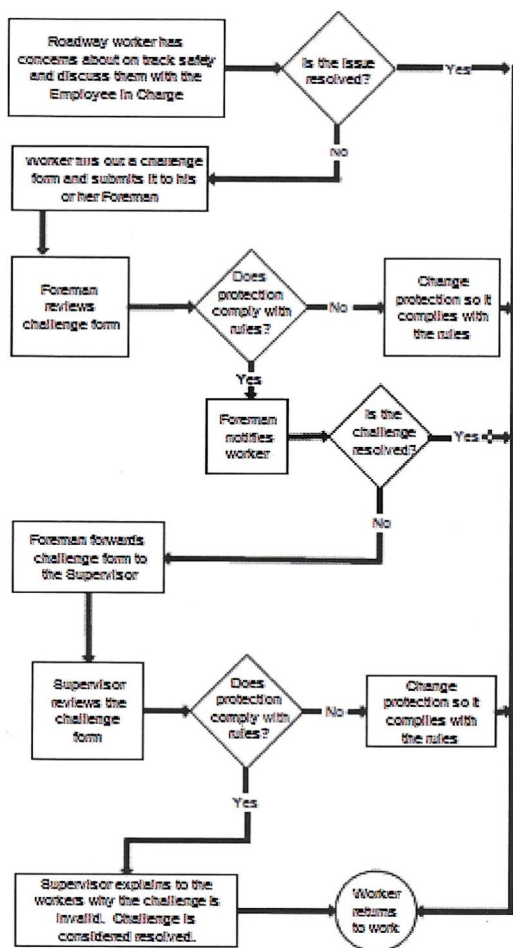


On Track Good Faith Challenge Flow Chart

On-Track Good Faith Challenge
Flow Chart

On-Track Protection Good Faith Challenge Form

Name: _____

Badge No: _____

Job Position: _____

Supervisor's Name/Title: _____

Date and Time of Occurrence: _____

Work Location
Track and Milepost: _____On-Track Procedures
Applied (or lacking) at
Work Location: _____Safety or Operating
Rule not being complied
With (Give # if known): _____

Reason for Challenge: _____

Other employees with
Information regarding
Situation: _____

Signature: _____

Date: _____

Determination by Supervisor: _____

Foreman: _____ Date: _____

INSTRUCTIONS: The employee making challenge shall complete this form, sign and date it, give it to their Foreman who shall document their determination, sign and forward to the Supervisor.