

THIS FORM IS TO BE KEPT WITH THE LOCOMOTIVE. EACH LOCOMOTIVE SHALL BE INSPECTED EACH CALENDAR DAY THAT IT IS IN SERVICE. TIME, LOCATION, WHETHER OK OR DEFECTIVE, AND SIGNATURE, MUST BE PROVIDED AS INDICATED ON THIS FORM. A NON-COMPLYING LOCOMOTIVE TAG MUST BE COMPLETED FOR A DEFECTIVE LOCOMOTIVE. LOCOMOTIVE DAILY INSPECTION. FEDERAL LAW REQUIRES THAT THIS FORM REMAIN ON THE LOCOMOTIVE.

MONTH AUGUST UNIT NO. 15.02

DATE	TIME	LOCATION	OK	N/C	SIGNATURE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10	2325	ET	✓		Joseph Munson
11					
12	0025 2200	CWH	✓		W. Kelly
13	2245	CWH	✓		Joseph Munson
14	0650	CWH	✓		B. J.
15					
16	0715	CWH	✓		Joseph Munson
17	2340	CWH	✓		Joseph Munson
18	2320	E.T.	✓		W. Holmes
19					
20					
21	0024	B+	✓		W. Kelly
22	2310	E.T.	✓		Joseph Munson
23					
24	0020	B+	✓		W. Kelly
25	1930	CWH	✓		CWH
26					
27	0830	CWH	✓		J.
28	1545	CWH	✓		Joseph Munson
29	0717	CWH	✓		R. Bill
30	1100	CWH	✓		R. Bill
31	0730	CWH	✓		BB