



## GRADE CROSSING APPLICATION & INSTRUCTIONS

RealEstate@PioneerLines.com

A completed application, non-refundable fee in the amount of **\$4,750 USD**, and a print or sketch of the proposed lease premises (including dimensions, coordinates, and cardinal directions) are required to begin the lease process. The print or sketch should depict any planned or existing improvements on the requested premises and the distance from the nearest track.

The non-refundable fee of **\$4,750 USD** includes contract preparation and basic engineering review. If your project is complex or involves HAZMAT, additional engineering review fees will be required. Additional fees will also be requested if flagging or a Right of Entry are required for your project.

**Make all checks payable to:**

Pioneer Railroad Services, Inc.  
C/O Real Estate Department  
75 Remittance Drive  
Dept. 4648  
Chicago, IL 60675-4648

LIST CHECK NUMBER(S): \_\_\_\_\_  
\_\_\_\_\_

Once an executable lease, license, or other agreement is submitted to you, it must be fully executed within thirty (30) days. Thereafter, the application and materials will be archived, and resubmission (including fees) will be required. All annual rental payments can be submitted to the same name and address shown above.

**It is the Railroad's policy that two existing grade crossings must be removed for one new grade crossing installation to be approved. Applications submitted without the required fees will not be processed. If this application is approved, applicant agrees to reimburse the railroad for any cost incurred for installation, maintenance, and/or supervision required for this installation and further agrees to assume all liability for accidents or injuries which arise as a result of this installation.**

PLEASE INITIAL HERE INDICATING YOUR UNDERSTANDING OF THIS POLICY: \_\_\_\_\_



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## SECTION 1: APPLICANT INFORMATION AND LOCATION

1. Legal Name of Applicant: \_\_\_\_\_
2. Agreement to be in the name of (if different from above): \_\_\_\_\_
3. Type of Entity (select ONE): Corporation \_\_\_\_\_ LLC \_\_\_\_\_ Individual \_\_\_\_\_ Municipality \_\_\_\_\_  
Partnership \_\_\_\_\_ General \_\_\_\_\_ Limited \_\_\_\_\_ Other \_\_\_\_\_
4. If applicable, state/province of incorporation or organization: \_\_\_\_\_
5. Federal Tax Identification number (U.S. Leases): \_\_\_\_\_
6. Mailing Address: \_\_\_\_\_
7. Overnight Delivery Service Address (if different): \_\_\_\_\_
8. Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_
9. Phone No.: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax No.: ( \_\_\_\_\_ ) \_\_\_\_\_
10. Email: \_\_\_\_\_
11. Email address where non-billing notices can be sent to: \_\_\_\_\_
12. Is Applicant a condemning authority? \_\_\_Yes\_\_\_ No
13. Is Applicant an active railroad shipper? \_\_\_Yes\_\_\_ No
14. Is track usage needed? \_\_\_Yes\_\_\_ No (**NOTE:** If track usage is required, submit a Track Lease Application)
15. Does Applicant have existing agreements with Pioneer Lines or its predecessors? If so, attach a list of those agreement numbers with this application.

**16. Billing Contact Name, Phone Number, Email, and Address Required:**

NAME:	
PHONE NUMBER:	EMAIL:
ADDRESS:	

17. Railroad Name: \_\_\_\_\_  
 Nearest Milepost: \_\_\_\_\_ DOT No.: \_\_\_\_\_  
 Track Station (from): \_\_\_\_\_ Track Station (to): \_\_\_\_\_

(Adjacent Address)

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_  
 City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Located on the (N/S/E/W) \_\_\_\_\_ side of (landmark, intersection) \_\_\_\_\_

**Geographical Coordinates Required (in decimal degrees)**

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_



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## SECTION 2: CROSSING INFORMATION

1. Type of Road Crossing:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Farm Crossing        | <input type="checkbox"/> Private Commercial Crossing  | <input type="checkbox"/> Existing Crossing |
| <input type="checkbox"/> Pedestrian           | <input type="checkbox"/> Contractor's Crossing        | <input type="checkbox"/> Other _____       |
| <input type="checkbox"/> Residential Crossing | <input type="checkbox"/> New Installation             | <input type="checkbox"/> Relocation        |
| <input type="checkbox"/> Public Crossing      | <input type="checkbox"/> Temporary Use for _____ Mos. | <input type="checkbox"/> Reconstruction    |

2. Crossing will be used to access \_\_\_\_\_

3. Proposed Width of Crossing: \_\_\_\_\_ feet

4. Desired Material for Crossing (select one): Wood Planks ( ) Concrete ( ) Asphalt ( ) Rubber ( ) Other \_\_\_\_\_

5. Type of Vehicles to be driven over crossing:

- |   |   |                                      |
|---|---|--------------------------------------|
| <input type="checkbox"/> Passenger Cars | <input type="checkbox"/> Recreational Vehicles        | <input type="checkbox"/> Pickups     |
| <input type="checkbox"/> Farm Equipment | <input type="checkbox"/> Heavy Construction Equipment | <input type="checkbox"/> Other _____ |

6. Approximate number of daily one-way trips over the crossing \_\_\_\_\_

7. Name of Owner of Property to be served by crossing \_\_\_\_\_

8. Address if different than above \_\_\_\_\_

**Attach a legal description of your property to be served by the crossing and a property or county map showing the location of the crossing. Indicate on the map the distance measured along the track between the crossing and fixed objects in the vicinity (i.e., bridge, culvert, railroad mile marker, public road).**

## SECTION 3: TO BE COMPLETED FOR EXISTING CROSSINGS ONLY

Name(s) of previous users of crossing \_\_\_\_\_

Crossing is currently covered by Agreement Number \_\_\_\_\_

Dated \_\_\_\_\_ with \_\_\_\_\_

## SECTION 4: TO BE COMPLETED FOR INSTALLATION OF NEW CROSSINGS ONLY

How is the property currently accessed?

\_\_\_\_\_

Why was the access to property not obtained from previous owner?

\_\_\_\_\_

Desired crossing will be \_\_\_\_\_ feet ( ) North ( ) South ( ) East ( ) West of nearest ( ) Public ( ) Private Road crossing.

Track is in \_\_\_\_\_ ft. cut/fill      Number tracks crossed \_\_\_\_\_      Track is on: ( ) Curve ( ) Straight



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By submitting this application for credit, you authorize Pioneer Lines, or affiliates, to make any inquiries necessary to determine credit worthiness. You release your banking details that would assist to determine credit worthiness.

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein. Our terms of sale and service are NET 30 DAYS from the date listed on the invoice. Invoices that are beyond granted terms will be assessed a late fee of 18% APR (1.5% monthly) additional Terms and Conditions apply. A \$20.00 charge will apply for any NSF/Non-Sufficient Checks.

Date: \_\_\_\_\_

LIST CHECK NUMBER(S): \_\_\_\_\_

Signature: \_\_\_\_\_

\_\_\_\_\_

Name Printed: \_\_\_\_\_

Title: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Fax No: \_\_\_\_\_

**BE SURE TO RETURN THE COVER SHEET WITH YOUR APPLICATION**