



**NR3180 LINE BLOCKAGE FORM V4** **December 2018: Side 2 of 2**

<b>SECTION 6: LEVEL CROSSING ARRANGEMENTS</b>					
Level Crossing		Supervising Signal Box		Method	
				<input type="checkbox"/> A	<input type="checkbox"/> Q <input type="checkbox"/> E
				<input type="checkbox"/> A	<input type="checkbox"/> Q <input type="checkbox"/> E
				<input type="checkbox"/> A	<input type="checkbox"/> Q <input type="checkbox"/> E
				<input type="checkbox"/> A	<input type="checkbox"/> Q <input type="checkbox"/> E
				<input type="checkbox"/> A	<input type="checkbox"/> Q <input type="checkbox"/> E
<b>A</b>	If an attendant is required throughout (at AHBC, CCTV or OD crossings)	<b>Q</b>	If an attendant is required some of the time (at AHBC, CCTV or OD crossings)	<b>E</b>	If the signals/sirens/bells are switched off (at ABCL or AOCL crossings)

<b>SECTION 7A: CHANGE OF SIGNALLER</b>						
Name	Time	Date		Name	Time	Date

<b>SECTION 7B: CHANGE OF PERSONNEL [COSS / SWL / PC / Signalling Technician]</b>						
Name	Job Role	Employer	Phone Number	Signature / Location	Time	Date

<b>SECTION 8: IWA / COSS / SWL SIGNING IN TO THE LINE BLOCKAGE (WITH) A PC</b>							
Name of COSS / IWA / SWL Employer	Phone Number	Signature if Present or Sentinel Number	Authority Given to Share Line Blockage		IWA / COSS / SWL Confirms work is completed and Line Blockage protection is no longer needed		Signature if present or Sentinel Number
			Time		Time		
			Time		Time		
			Date		Date		
			Time		Time		
			Date		Date		
			Time		Time		
			Date		Date		
			Time		Time		
			Date		Date		
			Time		Time		
			Date		Date		
			Time		Time		
			Date		Date		
			Time		Time		
			Date		Date		
			Time		Time		
			Date		Date		

WON/GZAC No. SBSI/SWP No. IR/FAULT No.....SIDE 1 of 1

<b>Signalling Disconnections/Route Barring*</b>						
	1	2	3	4	5	6
<b>Signalling Technician – Name</b>				<b>Phone No.</b>		
<b>Location</b>						
<b>Equipment disconnected/equipment barred</b>						
<b>Time permission given to Signalling Technician to disconnect/bar equipment</b>						
<b>Time requester advised protection in place</b>						
<b>Time equipment re-connected/barring removed</b>						

[Note: \* Delete as applicable]

<b>Detonators</b>						
	1	2	3	4	5	6
<b>Detonators placed at signal(s) or beyond points</b>						
<b>Time applied</b>						

<b>Token</b>						
	1	2	3	4	5	6
<b>Location</b>						
<b>Time released</b>						
<b>Time returned</b>						

<b>T-COD</b>						
	1	2	3	4	5	6
<b>Time permission given to apply</b>						
<b>Track Circuit Number(s) showing occupied</b>						

<b>Lock Out Device</b>						
	1	2	3	4	5	6
<b>Lock Out Device Number</b>						
<b>Time given</b>						
<b>Time given back</b>						

APPENDIX B TO NR3180 EPR AND LINE CLEAR VERIFICATION FORM V4 DECEMBER 2018

WON/GZAC No/SBSI/SWP No. IR/FAULT No .....SIDE 1 of 1						
EPR	1	2	3	4	5	6
EPR applied on Axle counter Number						
Time Confirmation EPR Applied						

**EPR REMOVAL STAGE 1 VERIFICATION:** Proposed EPR removal agreed with signaller and aligns with the limits and the lines intended to be handed back in this line blockage.

**EPR REMOVAL STAGE 2 VERIFICATION:** EPR removal observed as completed to correct limits, authority to allow signal protection arrangements to be removed.

Line Blockage Number	Stage 1 Verification		Name	Signature	Stage 2 Verification Time / Date		Name	Signature
	Time	Date			Time	Date		
1	Time				Time			
	Date				Date			
2	Time				Time			
	Date				Date			
3	Time				Time			
	Date				Date			
4	Time				Time			
	Date				Date			
5	Time				Time			
	Date				Date			
6	Time				Time			
	Date				Date			