

## **CCROU 10 HOUR NOTICE VIOLATIONS**

(completed form to be forwarded to your respective BLE/UTU Rep)

TRAIN NUMBER \_\_\_\_\_  
and subdivision \_\_\_\_\_

TIME OF ORDER \_\_\_\_\_

TIME NOTICE GIVEN \_\_\_\_\_

WHO NOTICE WAS GIVEN TO \_\_\_\_\_  
RTC's initials or other name(s)

TERMINAL TAKEN TO \_\_\_\_\_  
(objective vs. home)

TIME AND LOCATION OF \_\_\_\_\_  
TIE DOWN / RE-CREW

TIME OF ARRIVAL OF \_\_\_\_\_  
TRANSPORTATION

METHOD OF TRAVEL \_\_\_\_\_  
(cab, train, BP, etc.)

TIME OF ARRIVAL \_\_\_\_\_  
AT REST LOCATION

TOTAL TIME ON DUTY \_\_\_\_\_

Completed forms may be forward to your respective representatives via OCS mail, fax or at your monthly meeting.

UTU FORMS may be faxed to 705 745 7818 (J.D.Campbell)

BLE FORMS may be faxed to 905 665 9301 (R.F.Hewitt)

In order for your voice to be heard it is imperative that all use this form and process.