

Railroad Crossing Traffic Control Device Inspection Form

Location

Date

Time

Inspector Name

Weather

Device Type

Inspection Items

Item	Condition	Comments
Warning Lights	<input type="text"/>	<input type="text"/>
Gates Function	<input type="text"/>	<input type="text"/>
Audible Signals	<input type="text"/>	<input type="text"/>
Signage Condition	<input type="text"/>	<input type="text"/>
Pavement Markings	<input type="text"/>	<input type="text"/>
Visibility (Approach)	<input type="text"/>	<input type="text"/>

Corrective Actions Taken/Required

Additional Observations

Inspector Signature

Date Signed