

INTERACTIVE RAIL, LLC

RAILROAD FLAGGING SERVICE REQUEST

5 Public Square, Suite 301, Hagerstown, MD 21740 | 240-347-1444 | interactiverail.com

Interactive Rail provides qualified railroad flaggers for roadway worker protection and on-track safety anywhere in the United States. Our flaggers are trained and qualified under 49 CFR Part 214 and are experienced working with Class I, short line and industrial railroads. Use this form to request flagging protection for work on or near railroad track and right-of-way.

Before you submit:

- Please submit requests at least four (4) business days before the requested start date. Short-notice requests may be accommodated subject to flagger availability.
- A completed request is not a confirmation. We will contact you to confirm availability, review the job, and provide a quote and service agreement.
- Email the completed form to interact@interactiverail.com or les.hanlon@interactiverail.com, or call 240-347-1444 with questions.

1. Requesting Party

Company / Organization	
Requested By (Name & Title)	
Phone	
Email	
Company Address	
Billing Contact & Email	
Customer PO / Job Number (if any)	

2. Job Location

Job Site Address / Location	
Nearest City & State	
Host Railroad & Subdivision	
Milepost(s) / Track(s) / Crossing DOT #	
Railroad Contact / Permit or Right-of-Entry #	
On-Site Contact Name & Phone	

3. Work to Be Protected

Description of Work	
Type of Work	☐ Utility / Pipeline ☐ Construction ☐ Survey / Inspection ☐ Crossing Work ☐ Other: _____
Equipment Fouling the Track	☐ None ☐ Excavator / Crane ☐ Boring Rig ☐ Hi-Rail ☐ Other: _____
Number of Crew Members On Site	

4. Schedule

Requested Start Date	
Anticipated End Date	
Daily Report Time / Expected Hours per Day	
Work Days	☐ Mon-Fri ☐ Weekends ☐ Nights ☐ Other: _____
Number of Flaggers Requested	

5. Project Conditions

Prevailing Wage (Davis-Bacon / State) Project?	☐ No ☐ Yes — please attach the wage determination
Railroad Protective Liability Insurance Required?	☐ No ☐ Yes ☐ Unsure
Site-Specific Training, Badging or Drug & Alcohol Program Required?	☐ No ☐ Yes — describe:
How did you hear about us?	
Additional Notes / Special Instructions	

Submitted By: _____ Date: _____

Thank you for your request. A member of the Interactive Rail team will respond within one business day.