AMTRAK OFFICE OF THE CLEARANCE ENGINEER

MRASURED BY ______

PRIVATE CAR CLEARANCE FORM
-- PC-5 REV 6/92 --

CAR NAME	DATE MEASURED				
CAR OWNER	ADDRESS				
PHONE NUMBER					
revised form must be submitt the car. It is the responsi that measurements are accura	completed for each private car. A sed following exterior modification of bility of the car owner to ensure te and complete. Failure to provide ements will result in withdrawal of an AMTRAK trains.				
as any much be leasted on le	well straight track for measurement.				

2) Car must be located of	on 1	eve	el, st	raight t	rack for	measurem	ent.
3) Provide measurements	for	tl:	ne fol	lowing c	ritical a	ppliance	s.
Appliance Name	App	olio	cable		above rail	Width center	
Antenna	Y	or	N _	ft		ft_	in
Exhaust Stack	Y	or	N _	ft	_in(max)	ft_	in
Side Marker Lights	Y	or	N _	ft	_in(max) ·	ft_	in
Grab Irons	¥	or	N _	ft	_in(min)	ft_	in
Steps(Stirrup)	Y	or	N	ft	_in(min)	ft_	in
Steps(Vestibule Fixed)	Y	or	N	ft	_in(min)	ft_	in
Steps(Vestibule Folding) Y	or	N]	ft	_in(min)	ft_	in
Battery Box		or	N	ft	_in(min)	ft_	in
Generator Box	Y	or	N	ft	_in(min)	ft_	in
			-		- . : . :		,

Miscellaneous Box/Tank Y or N ____ft__in(min) ___ft__in

4) Complete the general car diagrams on the reverse of this form
to clarify measurements of critical appliances and to provide
overall car dimensions (height, width, length).

Y or N

5) Return completed form to:

Water Tank

CAR NUMBER

AMTRAK
Office of the Clearance Engineer
30th Street Station, 3rd Floor South
Philadelphia PA 19104

Fax# 215-349-1710

____ft___in(min)

ft

in

Notes:

Max - Show maximum height of appliance
Min - Show minimum height of appliance

