



REQUEST FOR HAZARDOUS MATERIALS COMMODITY FLOW INFORMATION

Organization Requesting Information: _____

Contact Person: _____

Phone Number: _____

E-Mail Address: _____

Mailing Address: _____
(Street Address)

(City, State, Zip)

Geographical Description of Area for Study: _____

By signing below I acknowledge and agree to the terms set forth by Norfolk Southern Railway Company (NSRC) for use and dissemination of the NSRC Hazardous Materials Commodity Flow Information. NSRC considers this information to be restricted information of a security sensitive nature. I thus affirm and agree that the information provided by NSRC in this report will be used solely for and by bona fide emergency planning and response organizations for the expressed purpose of emergency and contingency planning. This information will not be distributed publicly in whole or in part without the expressed written permission of NSRC.

(Signature of person requesting commodity flow information)

Return completed form and a letter on official stationery requesting the information to:

HMTraffic@nscorp.com

(For NSRC Use Only)

Initials of person responsible for approval: ____ YES ____ NO Date: _____

Hazardous Materials Service Support:

Date Request Received: _____

Time Period Covered: _____

Date Report Sent: _____

Report sent via: E-Mail U.S. Mail