



Port of Stockton Rail Service Request



Please complete the following questionnaire about your project and the required rail service.

CUSTOMER INFORMATION

Date: _____

Company Name: _____

Contact Name: _____

Title: _____

Address: _____

City, State, Zip Code: _____

E-mail Address: _____

Phone Number: _____

Mobile Number: _____

Dun & Bradstreet (DUNS) Number: _____

INDUSTRY IS A:

- | | |
|---|---|
| _____ Corporation (Provide state below) | _____ Non-Profit |
| _____ Limited/General Partnership (Provide state below) | _____ Individual |
| _____ Limited Liability Company (LLC) | _____ Government Entity (Provide state below) |
| _____ Sole Proprietorship (Provide state and owner below) | _____ Other (please specify below) |

State: _____

Owner: _____

If you selected "Other", please Specify: _____

RAIL PROJECT CONTACTS:

Please provide the company name and contact information for those who will assist with your rail project. If you have not already done so, you will need to select a qualified rail engineering consultant and a rail contractor.

Engineering consultant contact information if applicable: _____

Rail contractor contact information if applicable: _____

Real estate broker / developer contact information if applicable: _____

| To be completed by the Port | | | |
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PROPOSED RAIL-SERVED LOCATION:

Please indicate the location of the proposed rail-served facility

_____ East Complex _____ West Complex

COMMODITY INFORMATION:

Please provide the following information regarding the commodities you plan to ship/receive.

Commodity name(s): _____

STCC number(s): _____

It is not necessary to complete any other fields on this page to obtain a Standard Transportation Commodity Classification (STCC) number.

HAZARDOUS MATERIAL/ES INFORMATION:

Is the commodity considered hazardous or environmentally sensitive? _____

Is this commodity a toxic inhalant hazard _____

If you have an environmental consultant, please list their contact information:

What environmental permits do you anticipate?

Please attach your Material Safety Data Sheet (MSDS)

SERVICE INFORMATION:

Select all that describe your planned operations.

_____ Shipper _____ Manifest
_____ Receiver _____ Unit Train _____ Number of Cars
_____ Care of party _____ Undetermined

Please describe your rail operation including arrival, departure, and track upon which industry shall accept the trains:

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Select all that describe your planned equipment.

- | | |
|---|--|
| <input type="checkbox"/> Boxcars | <input type="checkbox"/> Covered hoppers |
| <input type="checkbox"/> Flat cars | <input type="checkbox"/> Gondola cars |
| <input type="checkbox"/> Open-top hoppers | <input type="checkbox"/> Tank cars |
| <input type="checkbox"/> Railroad owned | <input type="checkbox"/> Private |
| <input type="checkbox"/> Leased | <input type="checkbox"/> Undetermined |
| <input type="checkbox"/> Other (please specify _____) | |

If you selected other, please specify: _____

Will you require access to the rail cars? _____

STORAGE INFORMATION:

Will your storage be loads or empties?

- Loads Empties Both loads and empties

LOADING/UNLOADING INFORMATION:

Select all that describe your planned operations.

- | | |
|--|---|
| <input type="checkbox"/> On Port property | <input type="checkbox"/> Industry will switch own cars (describe equipment below) |
| <input type="checkbox"/> On leased property | <input type="checkbox"/> Use of loading/unloading device |
| <input type="checkbox"/> Access to both sides of car | |

Additional comments: _____

Please describe how your product will be loaded/unloaded: _____

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If you will be using a loading/unloading device, please select all that apply.

- Overhead Portable (provide brand and description in comments below)
- Over track Fixed
- Under track Other (please specify below)

Additional comments: _____

OPERATIONS INFORMATION:

What is your target date for first shipment? (YYYY-MM-DD) _____

If there is a planned end to the movements, please describe. _____

What are your anticipated carloads per year? _____

How often will you require service?

- 1-3 days/week Occasional (describe in comments below)
- 4-7 days/ week Seasonal (describe in comments below)
- Monthly One-time

Additional comments: _____

What is the maximum number of cars to be spotted at one time _____

Will you be able to accept cars spot-on-arrival? _____

Please list the approximate hours you will require for loading/unloading. _____

Please include the following items along with your questionnaire:

1. General location map
2. Preliminary concept rail design with aerial image on an 11x17 paper per the Port of Stockton's *General Track Design Guidelines*.

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