



Study Group WAGON USERS

Proposed amendment to GCU Appendix 7-Form Hr

Record of amendments

Amended by	Date	Paragraph	Amendment
Bernhard Schlor	8.3.2017	Appendix 7	Form Hr

Title	Adjust Form Hr in line with the new Appendix 10			
Proposed amendment made by: RU / Keeper / other body	UIC Maintenance Working Group			
Proposed amendment concerns:	Appendix 7			
Proposer:	Bernhard Schlor			
Location, date:	Vienna, 8.3.2017			
Concise description:	Adjust Form Hr in line with the new Appendix 10 to clarify the reasons for removing wheelsets			

1. Starting (current situation)

1.1. Introduction

Form Hr is used to exchange information between the keeper and the workshop responsible for changing wheelsets.

1.2. Mode of operation

Workshops responsible for changing wheelsets on damaged wagons provide the following information using Form Hr, which allows standard repair to be carried out on the wheelsets for the keeper and which is necessary for the full wheelset documentation required.

1.3. Anomaly / description of problem

Not all significant reasons for removal are documented and some codes have twofold significance.

1.4. Does this concern a recognised code of practice* (e.g. DIN, EN)?

\square No \square Yes (state which): EN 15 313

* "Code of practice: a written set of rules that, when correctly applied; can be used to control one or more specific hazards." (source: Regulation EC 352/2009, Article 3)

"Technical provisions laid down in writing or conveyed verbally and pertaining to procedures, equipment and modes of operation which are generally agreed by the populations concerned (specialists, users, consumer and public authorities) to be suitable for achieving the objective prescribed by law, and which have either proven their worth in practice or, it is generally agreed, are likely to within a reasonable period of time" (translation/source: BMJ Handbuch der Rechtsförmlichkeit – German Ministry of Justice)

2. Target situation

2.1. Elimination of anomaly/problem (goal)

Update the list of reasons for removal in Form Hr (see appendix)

3. Additional text and/or change relates only to proposed amendments to GCU Appendix 7/Muster Hr:

See enclosure

4. Reason:

5. Assess potential positive/negative impacts

Assessment of operations, costs, administration, interoperability, competitiveness etc., using a scale of 1 (very low) to 5 (very high).

Justify observations.

Positive/negative impacts:

Impacts on

Operations, costs and administration (+1): No additional expense

Interoperability (+4): Guarantees collection of the data required

Safety (+3): Data from previous incidents will help with early detection of damage to wheelsets Competitiveness (+2): Will highlight the sector's high level of safety awareness compared to competitors in the road/water/air modes.

6. Safety appraisal of proposed amendment

Description of actual/target system, and scope of change to be made (see points 1 and 2).

The safety appraisal should be removed since only known guidelines would be implemented.

Safety study conducted by:

6.1.	Does the change made impact on safety?	🖾 No 🗌 Yes
Reas		
6.2.	⊠No □ Yes	
Rease		
6.3.	Determining and classifying risk:	⊠ deleted
6.3.1.	Effect of change in normal operation:	
6.3.2.	Effect of change in the event of disruption / deviation from normal operation:	
6.3.3.		
	No	
	Yes (describe possible misuse):	
6.4.	Have safety measures been applied?	⊠No 🗌 Yes
	ach type of risk, one of the following risk acceptance criteria is to lected:	
•	"Code of practice" (acknowledged technical rules)	
•	Use of reference system Explicit risk assessment	
6.5.	Has a risk analysis been submitted to the assessment body?	⊠No 🗌 Yes
Asses		
Attacl	[appendix]	

Issuing RU (LC	DGO)	Form H ^R _{Drawn up}						
Wagon number:						- -		on:
Damage report ref	ference	number:						
							Fax no.:	
Keeper:		Email:						
Remarks: Condition of all th	e whee	lsets of the	wagon - for	undama	ned wh	eelset(s), c	omplete only	the fields "POS" and "B"
	т/м	B measured	C	Monol yes /	oloc		wheelset	Wheelset number(s) of damaged wheelset(s)
		measured		yes /				
Pos: position of axle	e (as ne	ar marking o	n wadon)					
If no marking prese	ent, coui	nt from eithe	r end of wag	on.				
Number of damag wheelsets:	jed							
Reason for withdrawal from servic 1.2.2 Thermal overload 1.3.2 Wheel wear (tread) 1.3.3 Wheel flats 1.3.4 Metal inclusions 1.3.5 Cavities/exfoliation 1.5.1 Damage to wheel centre 1.6.1 Damage to axle 1.7.2 Out-of-round wheel				I.8.1.1 Axle box leaking 1.8.1.2 Loss of lubricant 1.8.3 Hot axle box 1.8.4 Wear plate displaced or missing 7.1.7 Overload (provide details) 8.1.1 Derailment Other:				
	4							
Addresses:		Contact add	ress:				Delivery ac Station coc	
							Delivery re	estrictions, if applicable
		Tel.: Fax: Email:						
Quotes:		see page 2						
Date:		_					Signa Company st	
Please complete in	block le	etters						Form H ^R Page 1

Issuing RU (LOGO)	Form H ^R
Wagon number:	
Damage report referer	ce number:
Keeper:	Fax no.: Email:
Quotes:	3.1 Request for replacement wheelset(s) using form H ^K
	3.2 Repair one or more wheelsets Repair to be done by approved depot
Remarks:	Track occupancy costs as per Appendix 7 point 1.2.
Reply:	To be completed by the keeper We hereby accept your quote no
	and will send you the requested wheelsets by (point 3.1 only)
Addresses:	The damaged wheelsets should be returned to the address indicated below: (point 3.1 only)
	Delivery address: Station code: Delivery restrictions, if applicable
	Billing address:
Date:	Signature: Company stamp:
Please complete in bloc	