



**Please answer these preliminary questions as completely as possible so the CSX team can accurately assess your project's rail service needs and expedite assistance.**

- **Customer Information**
  - Company:
  - Address:
  - Company Contact/Title:
  - Phone:
  - Email:
  - Are you an existing CSX account customer?
- **Commodity**
  - Standard Transportation Commodity Code ([STCC Search](#)):
  - Is it a hazardous material?
- **Origin** (*rail-served shipper*)
  - Name:
  - Physical Address:
- **Destination** (*rail-served consignee*)
  - Name:
  - Physical Address:
- **Freight Payer** (*if different from customer; freight payer **must** be identified before rate is requested*)
  - Name:
  - Address:
- **Estimated Volume** (*number of cars per day, week, month, or year*):
- **Number of Days per Week Service Needed** (*if applicable*):
- **Car Information**
  - Ownership (*private, railroad-owned, or mixed*):
  - Type (*standard/high-roof boxcar; covered/open hopper; tank car; plain/coil gondola; general purpose/bulkhead/center-beam flatcar; or other*):
  - Specifications (*length, other*):
- **Expected Move Date:**
- **Estimated Length of Service**
  - Short-Term (*specify time length, number of shipments*):
  - Ongoing/Long-Term:
- **Other Service Issues or Concerns:**
- **Estimated Economic Impact:**
  - New Jobs Created:
  - Capital Investment: