



June 13, 2008

MEMORANDUM FOR RICHARD E. STICKLER
Acting Assistant Secretary
Mine Safety and Health

FROM: CHARLES J. THOMAS *Charles J. Thomas*
Director, Office of Accountability

SUBJECT: MSHA Office of Accountability Audit, Boulder City,
Nevada Field Office, and the [REDACTED]

Introduction

This memorandum summarizes the Office of Accountability audit of the subject mine and field office. Audit subjects included MSHA field activities, level of enforcement, Field Activity Reviews (FARs), MSHA supervisory and managerial oversight, mine plans, conditions and practices at the mine, and related mine files. The audit was conducted during the week of [REDACTED] by Jerry Kissell and Arlie A. Webb. Positive findings and issues requiring attention are included in this audit report.

Overview

The primary reasons for this audit were based on data indicating:

1. A level trend of enforcement, (there were a total of 83 issuances in 2005, 47 issuances in CY 2006, 66 issuances in CY 2007, and only 32 issuances in CY 2008, so far) as the NFDL has continued elevated with no changes in violation issuances or level of enforcement appearing.
2. An increase in the NFDL incident rate, from 11.26 in 2nd quarter CY 2006 to 11.04 in CY 2007 and continued at 12.31 in CY 2008. These NFDL rates exceed the national average for like industry by as much as 4 times.

3. There were three accidents related to handling materials in 2008, six accidents related to slips, trips, or falls occurred in CY 2007 as well as one handling of materials accident reported. Eighteen accidents were reported in CY 2007 and CY 2008 to date.

The audit revealed several positive findings related to MSHA activities, including documentation indicative of complete, thorough inspections, and knowledge of the mine industry processes. Several positive findings regarding the mine operator's efforts, such as the Lock-out/Tag-out program is followed throughout the facility, the haul road design, maintenance and berming is very well maintained, radio communications are used throughout the facility and allows for immediate notification, and the relations between the company employee's and management and MSHA are very open and stable.

There were also issues noted at the field office that will require corrective actions. The need to recognize inadequate or missing guards, efficient use of supervisory time, calibration of detection equipment, and properly addressing the hazards associated with coal, coal dust and float coal dust.

There were no headquarters Peer Reviews conducted during FY 2007 that involved the Western district, this field office, or this mine. District Peer Reviews were conducted at the Kent, Washington and Albany, Oregon field offices. Due to publication of the revised MSHA Accountability Handbook in March 2008, the Western District did not formalize the Albany report until recently because it was unknown if that report would have to meet the requirements of the revised handbook. OPPE advised HQ Metal Nonmetal in March that the report would be sufficient if it met the requirements of the previous handbook. The report was then written and is now being reviewed.

Audit Results (Positive Findings)

1. E01 inspection reports and accompanying documentation for the 2nd quarter of FY 2008 and the 3rd quarter of FY 2007 indicated the mine was inspected in its entirety.
2. During the most recently completed E01 inspection (2nd quarter of FY 2008), inspectors spent an average of 51% of the total E01 time on-site, with 28% spent on travel, 4% of the event time was spent on "other" inspection activities.
3. Interviews with mine personnel indicated, although a younger work force, the training quality which was adequate, as exhibited by the miner's knowledge of the process and equipment.

4. An effective Lock-out and tag-out policy was observed. This policy ensures that all persons use their individual lock when participating in equipment maintenance or repair. A gang lock was observed with multiple locks attached while repairs were being made on the bucket conveyor for the silo structure. (Attachment A)
5. Communications at the mine site are conducted through radio communications.
6. Citation issuance were conducted and issued on mine site during this audit.
7. Field Activity Reviews and Accompanied Activity Reports were well documented, and indicated a complete, highly detailed observation of the inspector's work practices, conduct, and use of inspection and safety equipment. Deficiencies observed by the supervisor are documented, corrective actions are listed, and follow up activities indicate corrections are effective. At the time of the audit, the new supervisor had already begun using field activity reviews and accompanied inspections to mentor inspectors and provide a level of enforcement more consistent with the conditions and practices observed at the mines.
8. Frequent staff meetings are conducted by the new supervisor to discuss improving inspection activities, proper level of enforcement, and other procedures implemented by the district in a timely manner.
9. The office mine files were found up to date and contained all required information.
10. The majority of citations and orders are being issued on site by inspectors from this field office. Several positives result from this action, such as;
 - a. The mine operator is fully aware of the condition or practice requiring correction, aiding in quick and appropriate actions to abate;
 - b. giving the inspector the earliest possible opportunity to discuss root cause(s), corrective actions, and potential injuries related to the violation; and
 - c. reducing "travel" time and "other" time by the efficient use of on-site time, often preventing a return visit to the mine site just to deliver issued paperwork. Increased inspector on-site time is, in and of itself, a positive factor in the reduction of accidents and violations.

Record Books

All applicable record books at the plant were well maintained and complete. The inspector conducted a thorough review of plans, postings, and required records.

Audit Results (Issues Requiring Attention)

Enforcement

1. Six citations were issued associated with inadequate or no guarding during the audit mine site visit. Four of these issuances were issued on equipment that had existing guards that appeared to be obvious aftermarket designs. These guards appeared to exist for at least one prior inspection.

Action Required - Greater attention to detail is needed during inspection of conveyors, shafts, couplings and other equipment where there are potential entanglement points with moving machine parts. Termination on guarding violations needs to be adequate to ensure the guards are in compliance with the language in the standard. Supervisors must monitor and mentor inspectors during inspections, providing corrective criticism when warranted.

2. At the time of this audit, the Boulder City, Nevada, field office did not have any means to calibrate or "bump test" gas detection equipment. Even though the office had two Solaris brand, multi-gas detectors, the necessary equipment to maintain those detectors were not available.

Action Required - Proper calibration and "bump testing" equipment needs to be provided and maintained at each field office to permit adequate and accurate testing of gases, and to allow rapid response to hazard complaints and situations such as low oxygen content, toxic gases, and explosive gases. Note: This issue has been corrected.

3. Numerous Metal Nonmetal operations use coal fired boilers, kilns, or heaters as part of the operation. This frequently involves the storage, belt conveyor transport, crushing, and burning of the coal. During this audit, several requests were made regarding combustibility, explosiveness, and other hazards associated with coal, coal dust and float coal dust. Inspection personnel were unsure how to evaluate citations or orders issued for accumulations of coal, coal dust, and/or float coal dust at metal/non metal mines. Some inspectors also indicated a need for training

in the proper method for collecting samples of combustible materials for analysis. Due to the 100% inspection plan adopted by Metal Nonmetal in FY 2008 the journeyman training in this subject was cancelled and is planned to be given in the next fiscal year.

Action Required – Although the Mine Academy has one or more presentations that address this subject, all MNM inspection personnel that inspect cement plants need to be trained relative to the combustibility, explosiveness, and other hazards associated with coal, as well as proper sampling procedures.

Recommendation - The Office of Accountability recommends that an internet based training course, addressing these specific issues in detail, should be developed by the Mine Academy, and all MNM inspection personnel required to complete the course. Using an internet based training course will allow tracking of course completion, thus ensuring that all inspection personnel have had the training. A Web-based training course would also allow inspection personnel to complete this training without the need to spend valuable inspection time traveling to and from the Mine Academy. Discussions with Headquarters management indicate training was canceled to implement and support the 100% completion of inspection plan and will be rescheduled.

Mine Visit

During the mine visit, 17 citations were issued for the following conditions.
(Attachment B)

1. Citation No. [REDACTED] was issued under 30 CFR, §56.14107(a) for failure to adequately guard the electric motor drive shaft on a Telsmith cone crusher.
2. Citation No. [REDACTED] was issued under 30 CFR, §56.14107(a) for failure to adequately guard a take up pulley.
3. Citation No. [REDACTED] (104 (d)(1) citation was issued under 30 CFR, §56.14105 for a failure to effectively protect persons from injury while performing repairs on equipment while energized. The supervisor received an amputated finger tip during this activity.
4. Citation No. [REDACTED] was issued under 30 CFR, §46.7a, a miner could not perform the emergency steering test when requested by the inspector.

5. Citation No. [REDACTED] was issued under 30 CFR, §56.14100b for failure to properly maintain the emergency steering system on a water truck.
6. Citation No. [REDACTED] was issued under 30 CFR, §56.14130e for failure to properly maintain a ROPS on a Bobcat skid steer.
7. Citation No. [REDACTED] was issued under 30 CFR, §47.41a for failure to maintain a label on a 55 gallon drum identifying its contents.
8. Citation No. [REDACTED] was issued under 30 CFR, §56.20003a for failure to cleanup accumulations of coal in the coal surge tunnel.
9. Citation No. [REDACTED] was issued under 30 CFR, §56.14107a for failure to guard a shaft from the gear reducer to the pulley on the screw drive on top of the #5 coal bin.
10. Citation No. [REDACTED] was issued under 30 CFR, §56.14107a for failure to guard the weigh belt for bin #4.
11. Citation No. [REDACTED] was issued under 30 CFR, §56.12001 for a defective 110 volt GFCI outlet.
12. Citation No. [REDACTED] was issued under 30 CFR, §56.14107a for failure to guard an electric motor drive shaft for the #1 and #2 coal mill fan.
13. Citation No. [REDACTED] was issued under 30 CFR, §56.15005 for failure to wear fall protection while closing the lids on his bulk load container trailer.
14. Citation No. [REDACTED] was issued under 30 CFR, §47.41a for failure to maintain the trailer braking system on the bulk load container trailer.
15. Citation No. [REDACTED] was issued under 30 CFR, §56.14107a for failure to guard the drive shaft from the gear reducer to the bottom drive pulley at the top of the elevator.
16. Citation No. [REDACTED] was issued under 30 CFR, §56.12004 for mechanical damage to welding leads at the east hoisting elevator.
17. Citation No. [REDACTED] was issued under 30 CFR, §47.41a for failure to label a one gallon container identifying its contents.

In each case, the audit team agreed that citations were evaluated properly for gravity, negligence, and the level of enforcement. (With miner errors that were corrected through modifications.)

The audit team conducted in-mine activities on the day shift on [REDACTED] and also the evening shift on [REDACTED]

The mine was clean and well maintained in most all areas visited by the audit team. Haul roads and berming met regulatory compliance. The average grade on the haul roads into the pit area was 9-10%. The roadways were well maintained and dust control was constant.

The mining equipment observed and inspected was maintained in good condition, with few exceptions.

The work force is predominately new, as **80 percent of the employee's have 5 years or less experience.**

The weekend shifts are manned normally with 7-10 employees. The audit team observed 7 persons working on the Sunday night shift. Of these 7 miners on duty, it was noted the employee's were young miners with limited experience. It was observed that no "maintenance" employee's worked on the weekend shifts. The kiln operators and laborers primarily completed the required maintenance duties necessary. The supervisor was responsible to ensure repair tasks were completed safely. Maintenance persons worked Saturday, overtime, to correct conditions that were cited on the previous inspection day.

MSHA Supervisory/Management Oversight

At the time of this audit, the Boulder City, Nevada, field office did not have an office assistant, clerk or secretary. Standard clerical activities such as receiving and sending mail, monitoring telephones, filing completed reports, providing a contact point for hazardous condition complaints, etc. were being performed by the field office supervisor. This adversely affects the supervisor's ability to properly accompany, monitor, and mentor subordinates.

Metal and Nonmetal has recently hired or is hiring 26 additional automation clerks nationwide. Boulder City, NV field office was one of the offices selected to receive one of these positions. No action required.

Peer Reviews

MSHA Headquarters conducted two Peer Review audits during 2007. The audits were conducted in North East District and Rocky Mountain District.

The Western District conducted two Peer Reviews during 2007. These reviews were conducted at the Kent, WA field office and Albany, Oregon field offices. The Accountability Handbook in effect at that time stated that each district "...will conduct Peer Reviews of selected field offices annually." (*plural*)

Recommendation – Districts should conduct several Peer Reviews throughout each year to promote identification and correction of issues on a continuing basis, rather than one field office per year.

Attachments

- A. Lock-out/Tag-out documents
- B. Citations issued during this audit

cc: R. Friend
J. Pallasch
F. Quintana
N. Merrifield
W. Wilson
K. Stricklin
T. Bentley
G. Fesak
J. Duncan

Attachment A -

Lock-out Pictures, Bucket Conveyor Switch Gear.
(One lock per employee attached to spider.)



Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I - Violation Data				
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number	
4. Served To		5. Operator		
6. Mine		7. Mine ID		
				(Contractor)
8. Condition or Practice				8a. Written Notice (103g) <input type="checkbox"/>
<p>The shaft from the electric motor for the Telsmith cone crusher drive was not guarded. Miners could contact the moving machine parts and suffer broken bones, loss of fingers. The area is accessed on an as needed basis for maintenance. The opening was approx 3 inches wide between the motor housing and the existing guard and it was 20 inches in from the edge of the frame, making the chance of an accident unlikley.</p>				
COPY				
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>				
9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14107a
Section II - Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action		E. Citation/Order Number		F. Dated Mo Da Yr
A. Citation <input type="checkbox"/>		B. Order <input type="checkbox"/>		C. Safeguard <input type="checkbox"/>
D. Written Notice <input type="checkbox"/>				
15. Area or Equipment				
16. Termination Due				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section III - Termination Action				
17. Action to Terminate				
18. Terminated				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section IV - Automated System Data				
19. Type of Inspection (activity code) E01		20. Event Number		21. Primary of Mill P
22. Signature				23. AR Number
<small>MSHA Form 7000-3, Mar-85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small>				

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr [redacted]	2. Time (24 Hr. Clock) [redacted]	3. Citation/ Order Number [redacted]
4. Served To [redacted]	5. Operator [redacted]	
6. Mine [redacted]	7. Mine ID [redacted]	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The existing guard for the # 204 take up pulley was not sufficient. Miners could contact the moving machine parts and suffer lacerations to the hands, or loss of fingers. The opening in the existing guard was approx 3 inches tall by 14 inches long and was approx 6 inches above the walkway, making the chance for an accident unlikely.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.14107a
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Section II - Inspector's Evaluation

10. Gravity	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>			
	C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		D. Number of Persons Affected: 001	

11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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12. Type of Action	104a	13. Type of issuance (check one)	Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
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14. Initial Action	A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/ Order Number	F. Dated	Mo Da Yr
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr [redacted]	B. Time (24 Hr. Clock) [redacted]
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Section III - Termination Action

17. Action to Terminate

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV - Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number [redacted]	21. Primary or Mill P
22. Signature [redacted]			23. AR Number [redacted]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I - Violation Data				
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number	
4. Served To	5. Operator			
6. Mine	7. Mine ID		(Contractor)	
8. Condition of Practice			8a. Written Notice (103g)	
<p>Repairs were being made to the lifting cables for the DCL with the power on. Cables were being manually placed onto the sheave while being "bumped," to turn the pulley. The [redacted] who was placing the cables on the pulley told another miner to "bump it again" and this is when his finger tip was amputated. The [redacted] engaged in aggravated conduct constituting more than ordinary negligence by making repairs to machinery with the power on. This violation is an unwarrantable failure to comply with a mandatory standard.</p>				
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>				
9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.14105
Section II - Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input checked="" type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> D. Number of Persons Affected: 001				
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input checked="" type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action		13. Type of Issuance (check one)		
104d1		Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action			E. Citation/Order Number	
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			F. Dated Mo Da Yr	
15. Area or Equipment				
16. Termination Due				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section III - Termination Action				
17. Action to Terminate The Company has put written Policy in place on how to the cables will be replaced on the sheaves.				
18. Terminated				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section IV - Automated System Data				
19. Type of Inspection (activity code)		20. Event Number		21. Primary or Mill
E01				P
22. Signature			23. AR Number	

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 408 3rd Street, SW, MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I--Violation Data				
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number	
4. Subject To		5. Operator		
6. Mine		7. Mine ID		
				(Contractor)
b. Condition of Practice				8a. Written Notice (103g)
<p>When asked, the miner could not perform the emergency steering test as required. The miner was exposed to over travel and collision hazards from uncontrolled steering, if engine were to fail. This unit is operated on a daily basis thru-out the mine site.</p>				
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>				
9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	
			46.7a	
Section II--Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action			E. Citation/Order Number	F. Dated Mo Da Yr
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>				
15. Area or Equipment				
16. Termination Due				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section III--Termination Action				
17. Action to Terminate				
18. Terminated				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section IV--Automated System Data				
19. Type of Inspection (activity code) E01		20. Event Number		21. Primary or Mill P
22. Signatu				23. AR Number
<p><small>MSHA Form 7000-3, Mar 85 (revised). In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-866-REG-FAIR (1-866-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small></p>				

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I - Violation Data				
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number	
4. Signed To		5. Signature		
6. Mine		7. Mine ID		
8. Condition or Practice				8a. Written Notice (103g) <input type="checkbox"/>
<p>When tested the emergency steering did not function on the Komatsu water truck, Co # 205, (S.N.6237). This exposed the operator to possible over travel and collision injuries due to not being able to avoid hazards due to mechanical failure. This unit travels on all mine roads, on grades of up to 10% and on switchback turns.</p>				
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>				
9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	
			56.14100b	
Section II - Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/Order Number		F. Dated Mo Da Yr
15. Area or Equipment				
16. Termination Due		A. Date Mo Da Yr	B. Time (24 Hr. Clock)	
Section III - Termination Action				
17. Action to Terminate The emergency steering test was re-tested and found to be functional.				
18. Terminated		A. Date Mo Da Yr	B. Time (24 Hr. Clock)	
Section IV - Automated System Data				
19. Type of Inspection (activity code) E01		20. Event Number		21. Primary or Mill P
22. Signature			23. AR Number	
<p><small>MSHA Form 7000-3, Mar 85 (rev/isd). In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 406 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small></p>				

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I - Violation Data				
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number	
4. Served To		5. Operator		
6. Mine		7. Mine ID		
8. Condition or Practice				6a. Written Notice (103g) <input type="checkbox"/>
<p>The ROPS on the Bobcat 763 skid steer, (S.N. 512267149) had visually obvious abnormal structural problems. The right front was bowed out and the top on each front corner was crushed. Miners were exposed to crushing injuries if the ROPS were to fail during a rollover or impact incident. This unit is used to stem blast holes, 2-3 times per week.</p>				
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>				
9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14130c
Section II - Inspector's Evaluation				
10. Gravity:				
A. Injury or Illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or Illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action [04a]		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action		E. Citation/Order Number		F. Dated Mo Da Yr
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>				
15. Area or Equipment				
16. Termination Due				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section III - Termination Action				
17. Action to Terminate				
18. Terminated				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section IV - Automated System Data				
19. Type of Inspection (activity code) E01		20. Event Number		21. Primary or Mill P
22. Signature				23. AR Number
<small>MSHA Form 7000-3, Mar 95 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement activities, contact the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, NW, Washington, DC 20540, or call 1-888-752-7373. You may also contact the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, NW, Washington, DC 20540. You may have, including:</small>				

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration	
Section I-Violation Data			
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
4. Served To	5. Operator		
6. Mine	7. Mine ID		
8. Condition of Practice			8a. Written Notice (103g)
<p>There was approx 55 gallons of liquid found in a plastic barrel without labeling. The container was located on the fire deck outside the control room. The 55 gallon container had what appeared to be water in it. The purpose of the label is to reduce the possibility of injury or illness by ensuring that each miner is provided correct information about the chemical hazard and appropriate protective measures to be taken. If a miner is exposed to a unknown chemical it might result in skin or eye irritation and/or burns.</p>			
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>			
9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			47.41a
Section II-Inspector's Evaluation			
10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>			
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/Order Number	F. Dated Mo Da Yr
15. Area or Equipment			
16. Termination Due A. Date Mo Da Yr		B. Time (24 Hr. Clock)	
Section III-Termination Action			
17. Action to Terminate The operator labeled the barrel as to the contents.			
18. Terminated A. Date Mo Da Yr		B. Time (24 Hr. Clock)	
Section IV-Automated System Data			
19. Type of Inspection (activity code) E01	20. Event Number	21. Primary or Mill P	
22. Signature			23. AR Number
<small>MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency/enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small>			

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration	
Section I--Violation Data			
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
4. Served To	5. Operator		
6. Mine	7. Mine ID		(Contractor)
8. Condition or Practice			8a. Written Notice (103g)
<p>The area around the tail pulley in the coal surge tunnel had built up coal on the floor. The material was from several inches deep to approx 2 feet above the floor. The area affected was approx 9 feet long by 7 feet wide. Miners could slip trip and fall due to the build up. Miners access this area as needed for maintenance or repair.</p>			
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>			
9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.20003a
Section II--Inspector's Evaluation			
10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>			
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/Order Number	F. Dated Mo Da Yr
15. Area or Equipment			
16. Termination Due		A. Date Mo Da Yr	B. Time (24 Hr. Clock)
Section III--Termination Action			
17. Action to Terminate The area around the coal feed belt tail pulley has been cleaned up, terminating the citation.			
18. Terminated		A. Date Mo Da Yr	B. Time (24 Hr. Clock)
Section IV--Automated System Data			
19. Type of Inspection (activity code) E01		20. Event Number	21. Primary or Mill P
22. Signat			23. AR Number
<p><small>MSHA Form 7000-3a (Rev. 10-2000) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small></p>			

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I--Violation Data				
1. Date Mo Da Yr		2. Time (24 Hr. Clock)		3. Citation/ Order Number
4. Served To		5. Operator		
6. Mine		7. Mine ID (Contractor)		
8. Condition of Practice				8a. Written Notice (103g) <input type="checkbox"/>
<p>The shaft from the gear reducer to the pulley for the screw drive was not sufficiently guarded. The exposed shaft was approx 6 inches in from the edge of the existing guard. The exposed keyed shaft was approx 3 inches long. This was located on the top of coal bin # 5. The coal bin depth is monitored from the control room. Miners access this area on an as needed basis for repairs and maintenance.</p>				
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>				
9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.14107a	
Section II--Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless/Disregard <input type="checkbox"/>				
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>				E. Citation/ Order Number
				F. Dated Mo Da Yr
15. Area or Equipment				
16. Termination Date				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section III--Termination Action				
17. Action to Terminate				
18. Terminated				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section IV--Automated System Data				
19. Type of Inspection (activity code) E01		20. Event Number		21. Primary or Mill P
22. Signature				23. AR Number
<small>MSHA Form 7000-3, Mar 89 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small>				

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I - Violation Data				
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number	
4. Served To				
5. Operator				
6. Mine	7. Mine ID			
				(Contractor)
8. Condition or Practice				8a. Written Notice (103g)
<p>The guard for the weigh belt for bin # 4 was off. The guards were off and laying on the deck. The distance into the hazard was approx 10 inches. The opening was approx 6 feet long by 2 feet wide. Miners had been working in this area as evidenced by a hammer and bars nearby. The deck had coal laying on it making the floor uneven.</p>				
See Continuation Form (MSHA Form 7000-8a) <input type="checkbox"/>				
9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14107a
Section II - Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104a		13. Type of Insurance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>				E. Citation/Order Number
				F. Dated Mo Da Yr
15. Area or Equipment				
16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Clock)				
Section III - Termination Action				
17. Action to Terminate				
18. Terminated A. Date Mo Da Yr B. Time (24 Hr. Clock)				
Section IV - Automated System Data				
19. Type of Inspection (activity code) E01	20. Event Number	21. Primary or Mill P		
22. Signature				23. AR Number
<small>MSHA Form 7000-3, Mar 85 (revised) - In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small>				

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration			
Section I--Violation Data					
1. Date Mo Da Yr		2. Time (24 Hr. Clock)		3. Citation/ Order Number	
4. Served To		5. Quantity		6. Mine	
				7. Mine ID	
8. Condition or Practice				8a. Written Notice (103g) <input type="checkbox"/>	
<p>The 110 volt GFCI located by the coal feed belt # 4 was not working. When tested it would not trip out as required. If a fault were to occur in any piece of electrical equipment that was plugged into this GFCI, it would not trip out as required. This would cause a person to be exposed to an electrical shock longer. The circuit breaker would trip out when the fault reached the amps that it was set to trip out at. The GFCI is supposed to trip out in milliamps, (4.2)</p>					
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>					
9. Violation		A. Health Safety Other		B. Section of Act	
				C. Part/Section of Title 30 CFR	
				56.12001	
Section II--Inspector's Evaluation					
10. Gravity:					
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>					
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>					
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>					
D. Number of Persons Affected: 001					
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>					
12. Type of Action 104a			13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number		F. Dated Mo Da Yr
15. Area or Equipment					
16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Clock)					
Section III--Termination Action					
17. Action to Terminate					
18. Terminated A. Date Mo Da Yr B. Time (24 Hr. Clock)					
Section IV--Automated System Data					
19. Type of Inspection (activity code) E01		20. Event Number		21. Primary or Mill P	
22. Signature				23. AR Number	

MSHA Form 7000-3, Mar 85 (revised). In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration	
Section I--Violation Data			
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
4. Served To	5. Operator		
6. Mine	7. Mine ID		
8. Condition or Practice			8a. Written Notice (103g)
<p>The shaft for the electric motor to the fan on the coal mill # 1 and # 2 was not adequately guarded. The opening was approx 4 inches between the motor and the existing guard. There is a grease zerk that is within approx 6 inches of the moving machine part. If the oiler were to slip, his hand would go towards the hazard, not away from it. There are tripping hazards in the concrete in front of the guard, there are two bolts that are approx 7/8 inches diameter by approx 4 inches tall.</p>			
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>			
9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.14107a
Section II--Inspector's Evaluation			
10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>			
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number
			F. Dated Mo Da Yr
15. Area or Equipment			
16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Clock)			
Section III--Termination Action			
17. Action to Terminate			
18. Terminated A. Date Mo Da Yr B. Time (24 Hr. Clock)			
Section IV--Automated System Data			
19. Type of Inspection (activity code) EOI	20. Event Number	21. Primary or Mill p	
22. Sig			23. AR Number
<p>MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1990, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, S.W. MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</p>			

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order U.S. Department of Labor
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To		5. Operator
6. Mine		7. Mine ID (Contractor)

8a. Written Notice (103g)

A contractor driver was observed not wearing fall protection while closing the lids on his dry bulk material trailer. The trailer company number was [redacted]. The last 8 digits of the truck VIN was [redacted]. The license plate number of the trailer was [redacted]. The fall to the ground from the top of the trailer was approx 11 feet. Falls from this height have proven fatal. The mine supplies the contractor drivers with access racks, which include safety lines and harnesses. All drivers entering the mine must sign documentation on every trip that they will use the mine provided truck racks. This truck driver did sign and date this document twice today upon entering the mine site.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.15005
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Section II - Inspector's Evaluation

10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input checked="" type="checkbox"/>	
C. Significant and Substantial:			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001	
11. Negligence (check one)						
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>	C. Moderate <input type="checkbox"/>	D. High <input checked="" type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action		104a		13. Type of Issuance (check one)		
				Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action				E. Citation/ Order Number		F. Dated Mo Da Yr
A. Citation <input type="checkbox"/>		B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>		
15. Area or Equipment						

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
---------------------	------------------	------------------------

Section III - Termination Action

17. Action to Terminate The truck driver was re-instructed on the [redacted] rules for using the truck racks and the provided fall protection.

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV - Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number	21. Primary or MII: P
22. Signature			23. AR Number

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration	
Section I - Violation Data			
1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number	
4. Served To	5. Operator		
6. Mine	7. Mine ID		(Contractor)
8. Condition or Practice			8a. Written Notice (103g)
<p>The trailer brakes on the dry bulk trailer did not apply when the dash mounted valve was pulled. There was visible space between the drums and the brake shoes, on the trailer. All 4 sets of brake shoes on the trailer had visible space. This unit hauls approx 60,000 pounds of dry material. The driver leaves the truck to open and close the lids and wash off excess material from the trailers at least three times per trip. If the trailer were to move after parking it could cause fatal crushing injuries.</p>			
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>			
9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.14101a3
Section II - Inspector's Evaluation			
10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" type="checkbox"/>			
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number
15. Area or Equipment			F. Dated Mo Da Yr
16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Clock)			
Section III - Termination Action			
17. Action to Terminate Trailer parking brakes did function when tested.			
18. Terminated A. Date Mo Da Yr B. Time (24 Hr. Clock)			
Section IV - Automated System Data			
19. Type of Inspection (activity code) E01	20. Event Number	21. Primary or Mill p	
22. Signature			23. AR Number
<small>MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small>			

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I--Violation Data				
1. Date Mo Da Yr	2. Time (24 Hr. Clock)		3. Citation/ Order Number	
4. Supervisor		5. District		
6. Mine		7. Mine ID (Contractor)		
8. Condition or Practice				8a. Written Notice (103g) <input type="checkbox"/>
<p>The shaft from the bottom drive pulley to the gear reducer was unguarded. The moving taper locks with exposed bolt heads on both sides of the gear reducer were unguarded. The distance into the moving parts was approx 2-3 inches from the existing guard. There was an air hose, a broken scraper, a double jack a steel bar and a 2X8 piece of board laying on the deck. The top of the elevator is a small area, the widest part of the deck is approx 36-40 inches wide.</p>				
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>				
9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.14107a	
Section II--Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action				
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/ Order Number		F. Dated Mo Da Yr
15. Area or Equipment				
16. Termination Due				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section III--Termination Action				
17. Action to Terminate				
18. Terminated				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section IV--Automated System Data				
19. Type of Inspection (activity code) E01		20. Event Number		21. Primary or Mill P
22. Signature				23. AR Number
<p><small>MSHA Form 7000-3a (Rev. 10-2003) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small></p>				

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order U.S. Department of Labor
Mine Safety and Health Administration



Section I - Violation Data

1. Date	Mo Da Yr	2. Time (24 Hr. Clock)		3. Citation/Order Number	
4. Section 77				5. Operator	
6. Mine				7. Mine ID	(Contractor)

8. Condition or Practice 8a. Written Notice (103g)

Welding leads were found on the east hoisting elevator that were cracked, and conductors visible. The leads were hanging and ready for use. It does not appear that they have been used for some time. No welding was visible in the immediate area.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR		56.1000
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Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial: Yes No D. Number of Persons Affected: 001

11. Negligence (check one) A. None B. Low C. Moderate D. High E. Reckless Disregard

12. Type of Action: 104a 13. Type of Issuance (check one) Citation Order Safeguard

14. Initial Action: A. Citation B. Order C. Safeguard D. Written Notice E. Citation/Order Number F. Dated: Mo Da Yr

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)			
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Section III - Termination Action

17. Action to Terminate The operator removed the welding leads from the hoisting elevator, terminating the citation.

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)			
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Section IV - Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number		21. Primary or Mill	P
22. Signature				23. AR Number	

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-PAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order Continuation

U.S. Department of Labor
Mine Safety and Health Administration



Section I - Subsequent Action/Continuation Data

1. Subsequent Action 1a: Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr [Redacted]	3. Citation/Order Number [Redacted]
4. Served To [Redacted]	5. Operator [Redacted]	
6. Mine [Redacted]	7. Mine ID [Redacted]	(Contractor)

Section II - Justification for Action

Change	From	To
9. C. Part/Section	56.1000	56.12004

Reason The computer defaults to 56.1000 and citation was issued before this was noticed.

The computer defaults to 56.1000 for the standard. This was not noted before the citation was issued. The correct standard should have been 56.12004.

See Continuation Form

Section III - Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr	B. Time (24 Hr. Clock)	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input checked="" type="checkbox"/> E. Modified
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Section IV - Inspection Data

9. Type of Inspection E01	10. Event Number [Redacted]		
11. Signature [Redacted]	AP Number [Redacted]	12. Date Mo Da Yr [Redacted]	13. Time (24 Hr. Clock) [Redacted]

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I - Violation Data				
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number	
4. Signed To		5. Operator		
6. Mine		7. Mine ID		
8. Condition or Practice				8a. Written Notice (103g)
<p>A one gallon metal can was found with an oily type of liquid inside. The metal can had approx one half gallon in it. There was no label or any writing to indicate the contents. The can did say kerosene-oil on it, but this was stamped on from the manufacturer. Miners working at the mine need to know what hazards they are working with or exposed to. This was a small amount of liquid, located away from any working places.</p>				
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>				
9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	
			47.41a	
Section II - Inspector's Evaluation				
10. Gravity:				
A. Injury or Illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104a		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number	F. Dated Mo Da Yr
15. Area or Equipment				
16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Clock)				
Section III - Termination Action				
17. Action to Terminate The operator removed the can to their dump sump, terminating the citation.				
18. Terminated A. Date Mo Da Yr B. Time (24 Hr. Clock)				
Section IV - Automated System Data				
19. Type of Inspection (activity code) E01		20. Event Number	21. Primary or Mill P	
22. Signature			23. AR Number	
<p><small>MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20415. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.</small></p>				

(b) (6)