PR001 18-May-12

Preliminary Report of Accident

U.S. Department of Labor

Mine Safety and Health Administration



1. Accident Type:	2. Accident Classification			3. Date/Time of Accident 4.		4. Date/Time of Death		5. Fatal Case No	
Fatal Injury	Powered Haulage			05/15/2012 02:40 PM			05/15/2012 02:40 PM		6
6. Mine Information :									<u> </u>
a) Mining Company Name			c)	Parent of Mining (Company				
Sterling Materials Sterling Materials			als	Samuel (Alex) Boone					
7. Mine Location :	b) Co	b) County c) State			8. Mine ID Number:			9. Union:	
Verona		Gallatin	Gallatin		KY		15-18068		NO
10. Primary Mineral Mined:	NATOTONE NA	11. Number of Mine Employees:	a) Total b)	Underground	c) Op	en Pit/0	Quarry d) M	Iill/Prep Plant	e) Other
CRUSHED & BROKEN L	IMESTONEM	Time Employees.	48	38			· · · · · · · · · · · · · · · · · · ·	6	4
12. Contractor Name:						13. Uni	o n	14. Contra	ctor ID Number:
15. Contractor Address:	a) City		b)	County			c) State	d) Z	ip Code
16. Number of Contractor Em	ployees: a) Total b)	Underground	c) Op	en Pit/Qua	rry	d) Mill/Pr	ep Plant	e) Other
17. Number of Persons in Min	o at Time of Asside	nt.		18. Number	o C D ou so no	Unaga	aunted For		
4									,
a) Mine Employees: 19) Location of Accident) Contractor Employee	s:	a) Mine E	Imployees:		b) C	ontractor Emp	<u></u>
X 01-Underground 03-Open Pit 07-Advance Min					30-Mi	ill/Prep	Plant Oth	er (specify)	20. Mining Height: Feet Inches
02-Surface at Underground 06-Dredge Mining 08-Retreat Mining 99-Office Facility								l rees menes	
21. Nonfatal Injuries:	22. Fata	l Injuries:	Ī		hamanid				
23. Victim Information :		Name	<u> </u>	b) Age			····		
	Angela	W. Common		37					
c) Regular Job Title:		d) Activity	at Time of Acci					X N	Iine Employee
Haul Truck Drive	er			Operating					
24. Experience: Years Weeks Days Years Weeks Days					Years Weeks Days				Years Weeks Days
a) Total: 2 2		t the mine: 2 20	c) at	activity (23d)	2	20	, — -	Contractor	
25. Autopsy Performed: If Yes, Location							26. Mine Telepho		
YES Gallatin County					(859) 567-7300				
27. Description of Accident (in						-	- '		
The miner was operating a The victim was ejected from		rticulated haul truck	down a slope	when the tru	ck went o	ut of c	ontrol and hit a ri	b. The cab	section overturned.
The victim was ejected in	in the truck								
The information provided in t regarding the cause of the acc		n preliminary data ON	LY and does not	represent fina	l determin:	ations r	egarding the nature	of the incider	nt or conclusions
28. Equipment Manufacturer: Volvo					29. Model: A40F				
30. District: M3000 Southeastern		32. Field Offi	32. Field Office: Lexington KY			33. Event Num			5615
34. Accident Investigator:			35. MSHA Per	son Notified:			D	ate	Time
Mike Evans			Scott J				05/15/		04:02 P
36. Type of Report:				01115011					
	itial	37. Name of Preparer a	nd Date Prepare Mike Hancher	d: M				Date 05/16/20	