## PR001

U.S. Department of Labor

07/31/2013

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01-Aug-13	Pr	Preliminary Report of Accident Mir					e Safety and Health Administration			
1. Accident Type:	2. Accident Clas	accident Classification			3. Date/Time of Accident 4. Date/				5. Fatal Case No	
Fatal Injury	Machinery			07/31/201	3 07:00 AM	07/3	1/2013 07:00 A	м	11	
6. Mine Information :				<del></del> ,-	-					
a) Mining Company Name		b) Mine Name				c) Parent o	of Mining Company	,		
Amerikohl Mining Inc		Amerikohl Str	ips			John M	Stilley			
7. Mine Location :	a) City	b) (	County	c) State		8. Mine II	D Number:	9.	Union:	
С	Oubois	Jefferso	n .	PA			6-09654	ł	NO	
10. Primary Mineral Mine		11. Number of		Underground	c) Open Pi	t/Quarry	d) Mill/Prep	Plant	e) Other	
BITUMINOUS		Mine Employees:	8			8				
12. Contractor Name:		<del></del>	<del></del>	<u> </u>	13. U	nion	14. Co	ntracto	r ID Number:	
15. Contractor Address:	a) City		<b>b</b> )	County	<u>L</u>	c) St	ate	d) Zip	Code	
16. Number of Contractor	Employees:	a) Total b	) Underground	c) Ope	n Pit/Quarry		d) Mill/Prep Plant		e) Other	
17. Number of Persons in N	Mine at Time of Acc	ident:		18. Number	of Persons Una	ccounted F	or:			
a) Mine Employees:	8	b) Contractor Employe	MOE'	a) Mine E			b) Contractor	Fmple	Voor	
19) Location of Accident	<b>`</b>	S, Contractor Employe		a) Milie El	mpiojees.		D) Contractor	Empio	20. Mining Height:	
01-Underground	X	03-Open Pit	07-Advance	e Mining	30-Mill/Pre	p Plant	Other (speci	fy)	Feet Inches	
02-Surface at Underg	round	06-Dredge Mining	08-Retreat	Mining	99-Office F	acility			3 0	
21. Nonfatal Injuries:	22. F	atal Injuries:								
23. Victim Information :	l	a) Name		b) Age						
c) Regular Job Title:	Steel	yn G. Kanouff	ty of Time of Acci	28				7 74:		
Mechanic		d) Activity at Time of Accident:  Mechanic					X		ne Employee	
	Weeks Days	Years Wo	eeks Days		Years We	eks Davs		Y	ears Weeks Days	
a) Total: 7			_	activity (23d)		3	d) with Contract		0 0 0	
25. Autopsy Performed:	If Yes, Location	<del></del>	<u> </u>		· · · ·		ne Telephone No.:			
YES Johnstow	_					}	(724) 262-2	339		
27. Description of Accident	_	t involved the exact loca	tion in the mine of	and status of res	and and recover	n aparatia	`'			
On July 31, 2013, at ap strut on a CAT 773E Re pronounced dead at the	ock Truck. The fa	atally injured victim w	as found lying b	etween the ri	ght front tire	and the b	ottom of the fend	er. Th	e victim was	
The information provided regarding the cause of the 28. Equipment Manufactu	accident.			t represent final	determination 29. Model:	s regarding	the nature of the in 773E		or conclusions	
C0200 Ne	w Stanton	32. Figur Of	Indiana					40112		
34. Accident Investigator:			35. MSHA Per				Date		Time	
Craig A. Mikulsky				H. Hixson			07/31/2013		07:18 A	
36. Type of Report:		37. Name of Preparer	and Date Prepare	ed:				Date	_ <del></del>	

Craig A. Mikulsky

38. Reason For Amendment:

Initial