

# Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Slip or Fall of Person		3. Date/Time of Accident 10/10/2014 11:18 AM		4. Date/Time of Death 10/10/2014 12:30 PM		5. Fatal Case No 20							
6. Mine Information :															
a) Mining Company Name Lehigh Cement Company LLC			b) Mine Name EVANSVILLE PLANT			c) Parent of Mining Company Heidelberg Cement AG									
7. Mine Location :		a) City Fleetwood		b) County Berks		c) State PA		8. Mine ID Number: 36-00185		9. Union: YES					
10. Primary Mineral Mined: HYDRAULIC CEMENT			11. Number of Mine Employees:	a) Total 125	b) Underground 0	c) Open Pit/Quarry 0	d) Mill/Prep Plant 91	e) Other 34							
12. Contractor Name: F. T. Silfies					13. Union NO		14. Contractor ID Number: E714								
15. Contractor Address:		a) City Allentown		b) County Lehigh		c) State PA		d) Zip Code 18195							
16. Number of Contractor Employees:		a) Total 20		b) Underground 0		c) Open Pit/Quarry 0		d) Mill/Prep Plant 0		e) Other 20					
17. Number of Persons in Mine at Time of Accident:					18. Number of Persons Unaccounted For:										
a) Mine Employees: 73		b) Contractor Employees: 4			a) Mine Employees: 0		b) Contractor Employees: 0								
19) Location of Accident									20. Mining Height:						
<input type="checkbox"/> 01-Underground	<input type="checkbox"/> 02-Surface at Underground	<input type="checkbox"/> 03-Open Pit	<input type="checkbox"/> 06-Dredge Mining	<input type="checkbox"/> 07-Advance Mining	<input type="checkbox"/> 08-Retreat Mining	<input checked="" type="checkbox"/> 30-Mill/Prep Plant	<input type="checkbox"/> 99-Office Facility	<input type="checkbox"/> Other (specify)	Feet Inches						
21. Nonfatal Injuries: 0		22. Fatal Injuries: 1													
23. Victim Information :															
a) Name Lance H. Laity					b) Age 66										
c) Regular Job Title: Truck Driver					d) Activity at Time of Accident: Closing hatch on bulk truck										
<input checked="" type="checkbox"/> Contractor Employee															
24. Experience :	Years Weeks Days			Years Weeks Days			Years Weeks Days								
a) Total:	11	22	0	b) at the mine:	11	22	0	c) at activity (23d)	11	22	0	d) with Contractor	11	22	0
25. Autopsy Performed: If Yes, Location NO							26. Mine Telephone No.: (610) 926-1024								

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):

The truck driver was inside a loading rack closing the hatch on top of a bulk tanker truck. When the victim raised the rack to access the hatch, he fell between the rack and rounded side of the truck and then fell to the ground.

The information provided in this notice is based on preliminary data ONLY and does not represent final determinations regarding the nature of the incident or conclusions regarding the cause of the accident.

28. Equipment Manufacturer: SafeRack			29. Model: G4 Safe Rack				
30. District: M2000 Northeastern		32. Field Office: Wyomissing PA			33. Event Number: 6627362		
34. Accident Investigator: Thomas J. Shilling			35. MSHA Person Notified: Gary C. Merwine			Date 10/10/2014	Time 11:40 A
36. Type of Report: Initial		37. Name of Preparer and Date Prepared Mike Hancher <i>MH</i>			Date 10/10/2014		
38. Reason For Amendment:							