

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Machinery		3. Date/Time of Accident 10/17/2018 10:35 AM		4. Date/Time of Death 10/17/2018		5. Fatal Case No 8					
6. Mine Information :													
a) Mining Company Name PRINCESS POLLY ANNA COAL, INC.			b) Mine Name No. 1 Surface Mine			c) Parent of Mining Company Frederick J Taylor							
7. Mine Location :		a) City Lewisburg		b) County Greenbrier		c) State WV		8. Mine ID Number: 46-09473		9. Union: NO			
10. Primary Mineral Mined: BITUMINOUS			11. Number of Mine Employees:		a) Total 6	b) Underground 0	c) Open Pit/Quarry 6	d) Mill/Prep Plant 0	e) Other 0				
12. Contractor Name:						13. Union		14. Contractor ID Number:					
15. Contractor Address:													
a) City		b) County			c) State			d) Zip Code					
16. Number of Contractor Employees:													
a) Total		b) Underground		c) Open Pit/Quarry		d) Mill/Prep Plant		e) Other					
17. Number of Persons in Mine at Time of Accident:						18. Number of Persons Unaccounted For:							
a) Mine Employees: 6		b) Contractor Employees: 0		a) Mine Employees: 0		b) Contractor Employees: 0							
19) Location of Accident								20. Mining Height:					
<input type="checkbox"/> 01-Underground		<input checked="" type="checkbox"/> 03-Open Pit		<input type="checkbox"/> 07-Advance Mining		<input type="checkbox"/> 30-Mill/Prep Plant		<input type="checkbox"/> Other (specify)					
<input type="checkbox"/> 02-Surface at Underground		<input type="checkbox"/> 06-Dredge Mining		<input type="checkbox"/> 08-Retreat Mining		<input type="checkbox"/> 99-Office Facility		Feet Inches					
21. Nonfatal Injuries:			22. Fatal Injuries:			1							
23. Victim Information :													
a) Name Roger W. Herndon					b) Age 33								
c) Regular Job Title: Auger Helper						d) Activity at Time of Accident: <input checked="" type="checkbox"/> Mine Employee							
24. Experience :													
Years Weeks Days			Years Weeks Days			Years Weeks Days			Years Weeks Days				
a) Total:		12 0 0		b) at the mine:		0 0 3		c) at activity (23d)		0 0 3		d) with Contractor	
25. Autopsy Performed: If Yes, Location						26. Mine Telephone No.:							
						(304) 667-5611							

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

A 33 year old miner was attempting to move an auger steel with an onboard crane when a section of the auger struck his chest. He was transported by ambulance to a hospital where he died.

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: Salem (McCarthy)			29. Model: S-1500-B		
30. District: C0400 Mt. Hope		32. Field Office: Summersville WV			33. Event Number: 6304399
34. Accident Investigator: Russell Richardson			35. MSHA Person Notified: Kelly Acord		Date 10/17/2018
					Time 11:30 A
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Joey Presley			Date 10/18/2018
38. Reason For Amendment:					