Preliminary Report of Accident PR001 08/22/2019

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



1. Accident Type F - Fatal Injury	2. Accident Classification 18 - Slip or Fall of Person	3. Date/Time of Accident 08/20/2019 8:00 AM	4. Date/Time of Death 08/20/2019 8:51 AM	5. Fatal Case No 17
6. Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company:	Scrubgrass Generating Compan Scrubgrass Fuel Handling Facilit Falcon Power LLC et al			
7. Mine Location Information a) City Kennerdell	b) County Venango	c) State PA	8. Mine ID Number 36-08567	9. Union No
10. Primary Mineral Mined		11. Number of Employees a) Total b) Under	rground c) Open Pit/Quarry	d) Mill/Prep Plant e) Other
12. Contractor Name			13. Contractor Union	14. Contractor ID Number
15. Contractor Address a) City	b) County	c) State	d) Zip Code	3 3
16. Number of Contractor Emplo a) Total	yees b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other
17. Number of Persons in Mine a a) Mine Employees 3	t Time of Accident b) Contractor Employees 4	18. Number of Persons Unaccou a) Mine Employees	inted for b) Contractor Employees 0	
19. Accident Location 30 - Mill/Prep Plant				20. Mining Height Feet Inches
21. Nonfatal Injuries	22. Fatal Injuries			1 (120) SUBSTANCE
23. Victims Information				
Thomas A Flinspach				
a) First Name a) MI a) Thomas A	Last Name b) Age c) Regula Flinspach 20 Mobile	and the second s	y at Time of Accident ling Refuse Kettle	Employee Mine Employee
24. Mining Experience a) Total Experience 0 Years 27 Weeks 0 Day	b) Experience at the Mine s 0 Years 27 Weeks 0 Days	c) Experience at the Activity at the 0 Years 27 Weeks 0 Days	50 - 10 10 10 10 10 10 10 10 10 10 10 10 10	sperience with Contractor Years 0 Weeks 0 Days
25. Autopsy Performed Yes	If Yes, Location Venango County Coroner			
26. Mine Telephone No. (814) 385-4367				/
On August 20, 2019, at approx victim was working with another	ude equipment involved, the exact imately 8:00 a.m., a miner was fatally r miner unloading a refuse kettle attact s notice is based on preliminary data	injured when he sustained traumatic ched to an electric hoist when he we	injuries from a forty foot fall down a nt over the unguarded edge of the sh	aft.
28. Equipment Manufacturer Not listed Not Reported		29. Model N/A		, d = 5
30. District C0200 - New-Stanton, PA		32. Field Office C0202 - Kittanning PA Field Office	ffice	33. Event Number 6232118
34. Accident Investigator First Name Steven	MI Last Name E Pentz			
35. MSHA Person Notified First Name Timothy	MI Last Name M Horton	Date/Time No 08/20/2019 8:		
36. Type of Report Initial	37. Name of Preparer Full Name David J McDonald	Date Prepared 08/20/2019	u ·	
38. Reason for Amendment	I.			