PR001 08-Jan-19

Preliminary Report of Accident

U.S. Department of Labor

Mine Safety and Health Administration

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1. Accident Type:	Type: 2. Accident Classification					3. Date/Time of Accident 4. Date/T		4. Date/Time of De	ath	5. Fatal Case No	
Fatal Injury Machinery						01/05/2019 03:20 AM		01/05/2019 03:20 AM		1	
6. Mine Information :						•		-		•	
a) Mining Company Name b) Mine Name					c) Parent of Mining Company						
Hamilton County Coal, LL	Mine No. 1				A	Iliance Resource	Resource Partners LP				
7. Mine Location : a) City			b) County			c) State		8. Mine ID Number:	D Number: 9. Union:		
Dahlgren			Hamilton			IL	IL 1:			NO	
10. Primary Mineral Mined:			11. Number Emplo		a) Total b) Underground	c) Open Pit/	Quarry d) M	ill/Prep Plant	e) Other	
BITUMINOUS			Emplo	yees:	278	255		0	0	23	
12. Contractor Name:							13. Un			tor ID Number:	
Madisonville Mining, LLC								NO	B50		
15. Contractor Address: a) City					b) County		c) State	d) Zi	p Code	
Ma	disonville				Нор			KY		104	
16. Number of Contractor En	nployees:	a	a) Total	b)	Underground	c) Ope	en Pit/Quarry	d) Mill/Pr	ep Plant	e) Other	
			35		35	1	0		0	0	
17. Number of Persons in Mir		of Accide	nt:				of Persons Unacc				
a) Mine Employees:	23	b) Contractor	Employee	es: 11	a) Mine E	Employees:	0 b) C	ontractor Emp		
19) Location of Accident X 01-Underground		03	3-Open Pit		07-Advanc	e Mining	30-Mill/Prep	Plant Oth	er (specify)	20. Mining Height:	
02-Surface at Undergrou	und	_	5-Dredge Min	ina	08-Retreat	Ü	99-Office Fac	· -	er (speerly)	Feet Inches 7 0	
21. Nonfatal Injuries:	ılıdı İ		al Injuries:	mg		Willing		- Inty		7 0	
21. Nontatai injuries.	0	22. Fata	a mjuries.	1							
23. Victim Information :		a) Name			b) Age					
		John D). Ditterline			55					
c) Regular Job Title:			d) Activity	at Time of Acci	ident:					
Continuous Mine	er Operato	or				Outby Lab	orer		X C	ontractor Employee	
24. Experience : Years W	eeks Days			ears Wee	ks Days	Outby Lab	Years Week	•	-	Years Weeks Days	
24. Experience : Years We a) Total: 28	eeks Days	b) a	Y t the mine:	ears Wee	ks Days	Outby Lab		1 d) with	Contractor		
24. Experience : Years W. a) Total: 28 25. Autopsy Performed:	eeks Days 0 0 If Yes, L	b) a			ks Days	•	Years Week	1 d) with 26. Mine Telepho	Contractor ne No.:	Years Weeks Days	
24. Experience : Years We a) Total: 28	eeks Days 0 0 If Yes, L	b) a			ks Days	•	Years Week	1 d) with 26. Mine Telepho	Contractor	Years Weeks Days	
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