

Preliminary Report of Accident

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



PR001 11/19/2020

1. Accident Type F - Fatal Injury		2. Accident Classification 17 - Machinery		3. Date/Time of Accident 11/08/2020 5:11 AM		4. Date/Time of Death 11/08/2020 12:00 PM		5. Fatal Case No FAI-6823656-1	
6. Mine Information									
a) Mining Company Name:		Round Mountain Gold Corporation							
b) Mine Name:		Smoky Valley Common Operations							
c) Parent of Mining Company:		Kinross Gold Corp							
7. Mine Location Information						8. Mine ID Number		9. Union	
a) City		b) County		c) State		26-00594		No	
Round Mountain		Nye		NV					
10. Primary Mineral Mined				11. Number of Employees					
Gold Ore Mining, N.E.C.				a) Total		b) Underground		c) Open Pit/Quarry	
				864				520	
								d) Mill/Prep Plant	
								265	
								e) Other	
								79	
12. Contractor Name						13. Contractor 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		b) Contractor Employees		a) Mine Employees		b) Contractor Employees			
183				0					
19. Accident Location								20. Mining Height	
03 - Open Pit								35 Feet Inches	
21. Nonfatal Injuries		22. Fatal Injuries							
		1							
23. Victims Information									
Robert A Larson									
a) First Name		a) MI		a) Last Name		b) Age		c) Regular Job Title	
Robert		A		Larson		58		Bulldozer Operator	
								d) Activity at Time of Accident	
								Operating Bulldozer	
Employee									
Mine Employee									
24. Mining Experience									
a) Total Experience		b) Experience at the Mine		c) Experience at the Activity at the Time of the Accident		d) Experience with Contractor			
41 Years 0 Weeks 0 Days		21 Years 5 Weeks 0 Days		17 Years 0 Weeks 0 Days		0 Years 0 Weeks 0 Days			
25. Autopsy Performed									
Yes		If Yes, Location							
		Washoe County Medical Examiner							
26. Mine Telephone No.									
(775) 377-3202									
27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations)									
A bulldozer was pushing blasted rock from a bench down to a front-end loader. As the bulldozer backed up the slope, it veered to the right and over the edge of the highwall. The bulldozer rolled approximately 308 feet downhill and came to rest on its left side.									
The information provided in this notice is based on preliminary data ONLY and does not represent final determination regarding the nature of the incident or conclusions regarding the cause of the accident.									
28. Equipment Manufacturer				29. Model					
Caterpillar				D10-T2					
30. District				32. Field Office				33. Event Number	
M7000 - Vacaville District				M7851 - Elko NV Field Office				6823656	
34. Accident Investigator									
First Name		MI		Last Name					
William		L		Whitby					
35. MSHA Person Notified									
First Name		MI		Last Name		Date/Time Notified			
Miles				Frandsen		11/08/2020 8:08 AM			
36. Type of Report		37. Name of Preparer							
Initial		Full Name		Date Prepared					
		James Fitch		11/09/2020					
38. Reason for Amendment									