Preliminary Report of Accident

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

PR001 07/16/2021

Accident Type F - Fatal Injury	2. Accident Classification 06 - Fall of Face, Rib, Pillar or Highwall	3. Date/Time of Accident 07/13/2021 12:38 PM	4. Date/Time of Death 07/13/2021 2:33 PM	5. Fatal Case No FAI-6412460-1
Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company	Nyrstar Tennessee Mines, Strawb Immel Mine y: Nyrstar NV	erry Plains LLC		
7. Mine Location Information a) City STRAWBERRY PLAINS	b) Count Knox	y c) State TN	8. Mine ID Number 40-00170	9. Union No
10. Primary Mineral Mined Lead-Zinc Ore Mining, N.E.C		11. Number of Employees a) Total b) Underg	ground 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	
16. Number of Contractor Empl a) Total	loyees b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other
17. Number of Persons in Mine a) Mine Employees 42	at Time of Accident b) Contractor Employees 0	18. Number of Persons Unaccour a) Mine Employees	nted for b) Contractor Employees	
19. Accident Location 01 - Underground		1		20. Mining Height 108 Feet 0 Inches
21. Nonfatal Injuries	22. Fatal Injuries			1
23. Victims Information	<u> </u>			
Gerald Turbyville				
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a) First Name a) MI Gerald		ular Job Title d) Activity at Tin er Operator Scaling	ne of Accident	Employee Mine Employee
a) First Name a) MI	Turbyville 68 Scale b) Experience at the Mine		he Time of the Accident d) Ex	
a) First Name a) MI Gerald 24. Mining Experience a) Total Experience 10 Years 40 Weeks 2 II 25. Autopsy Performed	Turbyville 68 Scale b) Experience at the Mine Days 10 Years 40 Weeks 2 Days If Yes, Location	c) Experience at the Activity at to 10 Years 40 Weeks 2 Days	he Time of the Accident d) Ex	Mine Employee
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