## **Preliminary Report of Accident**

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

## PR001 02/07/2023

1. Accident Type F - Fatal Injury	2. Accident Classification 18 - Slip or Fall of Person	3. Date/Time of Accident 01/30/2023 5:19 PM	4. Date/Time of Death 01/30/2023 5:19 PM	<b>5. Fatal Case No</b> FAI-7041203-1	
6. Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company:	Martin Marietta Kansas City, LLC Randolph Deep Mine Martin Marietta Materials Inc				
7. Mine Location Information a) City Overland Park	<b>b) County</b> Clay	c) State MO	8. Mine ID Number 23-02308	9. Union No	
10. Primary Mineral Mined Crushed & Broken Limestone Mi	ining, N.E.C.	11. Number of Employees a) Total b) Under 29 17	ground c) Open Pit/Quarry	d) Mill/Prep Plant e) Other 7 5	
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 Employer a) Total	ees b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other	
17. Number of Persons in Mine at a) Mine Employees	Time of Accident b) Contractor Employees	18. Number of Persons Unaccour a) Mine Employees	nted for b) Contractor Employees		
19. Accident Location 30 - Mill/Prep Plant				20. Mining Height Feet Inches	
21. Nonfatal Injuries	22. Fatal Injuries			1	
23. Victims Information					
Dobby I Allen	Bobby J Allen				
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a) First Name a) MI a) La	ast Name b) Age c) Regular Jo llen 42 Maintenand	bb Title d) Activity at Time on Mechanic Conveyor Belt Ma		Employee Mine Employee	
a) First Name a) MI a) La	b) Experience at the Mine	, ,	e Time of the Accident d) Ex		
a) First Name a) MI a) La Bobby J Al  24. Mining Experience a) Total Experience	b) Experience at the Mine	ce Mechanic Conveyor Belt Ma c) Experience at the Activity at th	e Time of the Accident d) Ex	Mine Employee	
a) First Name a) MI a) La Bobby J Al  24. Mining Experience a) Total Experience 10 Years 8 Weeks 0 Days  25. Autopsy Performed Yes  26. Mine Telephone No.	b) Experience at the Mine 0 Years 26 Weeks 5 Days  If Yes, Location	ce Mechanic Conveyor Belt Ma c) Experience at the Activity at th	e Time of the Accident d) Ex	Mine Employee	
a) First Name a) MI a) La Bobby J Al  24. Mining Experience a) Total Experience 10 Years 8 Weeks 0 Days  25. Autopsy Performed Yes  26. Mine Telephone No. (816) 452-6554  27. Description of Accident (include)	b) Experience at the Mine 0 Years 26 Weeks 5 Days  If Yes, Location Kansas City, Missouri  de equipment involved, the exact lo	ce Mechanic Conveyor Belt Ma c) Experience at the Activity at th 0 Years 26 Weeks 5 Days	e Time of the Accident d) Ex 0 Y	Mine Employee	
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