## **Preliminary Report of Accident**



## PR001 06/15/2023

1. Accident Type F - Fatal Injury	2. Accident Classification 18 - Slip or Fall of Person	3. Date/Time of 06/08/2023 4		4. Date/Time of Death 06/08/2023 7:00 PM	5.	Fatal Case No FAI-6925257-1
6. Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company:	Boro Sand & Stone Corp N Attleboro Plant Thomas Walsh					
7. Mine Location Information a) City	b) County	c) State	8. Mine ID Nun 19-00290	nber	9. Union No	
NORTH ATTLEBORO	Bristol	MA	19-00290		NO	
10. Primary Mineral Mined Construction Sand & Gravel Min	ing, N.E.C.	11. Number of a) Total 3	Employees b) Undergrour 0	nd c) Open Pit/Quarry 0		Mill/Prep Plant e) Oth
12. Contractor Name				13. Contractor Union	14	4. Contractor ID Number
15. Contractor Address a) City	b) County	c) State		d) Zip Code		
16. Number of Contractor Employ a) Total		c) Open	Pit/Quarry	d) Mill/Pr	on Plant	a) Oth
17. Number of Persons in Mine at	b) County c) State d) Zip Code   mployees b) Underground c) Open Pit/Quarry d) Mill/Prep Plant e) Other   ine at Time of Accident b) Contractor Employees 18. Number of Persons Unaccounted for a) Mine Employees 0 b) Contractor Employees 20. Mining Height 0 Feet 0 Inches   22. Fatal Injuries 1 22. Fatal Injuries 1 20. Mining Height 0 Feet 0 Inches 0 Feet 0 Inches   b) Age c) By Experience at the Mine c) S 6 c) Regular Job Title 29 Years 0 Weeks 6 Days d) Activity at Time of Accident Maintenance Employee Mine Employee					
<b>19. Accident Location</b> 30 - Mill/Prep Plant		1			20	
21. Nonfatal Injuries					·	
23. Victims Information	<u> </u>					
David Ayick						
a) First Name a) David					ident	
24. Mining Experience a) Total Experience 29 Years 0 Weeks 6 Days				Time of the Accident		
25. Autopsy Performed No	If Yes, Location					
<b>26. Mine Telephone No.</b> (508) 699-2911						
27. Description of Accident (inclu A miner died after climbing over belt he was standing on unexpe	the handrail onto a belt conveyor				II 16 feet to t	he ground after the magnet
The information provided in this regarding thecause of the accid	s notice is based on preliminary da lent.	ata ONLY and does no	ot represent final de	etermination regarding the nat	ure of the inc	ident or conclusions
28. Equipment Manufacturer Eriez		29. Model Magnet Belt	Conveyor			
<b>30. District</b> M2000 - Warrendale District		32. Field Office M2861 - Por	e tsmouth NH Field	Office	3:	3. Event Number 6925257
34. Accident Investigator First Name Brian	<b>MI Last Nam</b> T Righi	e				
35. MSHA Person Notified First Name Cody	MI Last Nam Sheldon	e	<b>Date/Time No</b> 06/08/2023 5:			
36. Type of Report Initial	37. Name of Preparer Full Name Brian T Righi	<b>Date I</b> 06/08/	Prepared /2023			
38. Reason for Amendment						