Preliminary Report of Accident

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



PR001 09/11/2024

1. Accident Type F - Fatal Injury	2. Accident Classifica 21 - Other Accident Drowning	tion	3. Date/Time of 08/22/2024 8:		4. Date/Time of Death 08/22/2024 8:30 PM		5. Fatal Case No FAI-F005CB0-1	
Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company:	Paguay Stone LL Paguay Stone Qu Luis A Paguay							
7. Mine Location Information a) City New Milford	b) County Susqueha		State PA	8. Mine ID Num 36-08942	nber 9. Unio		1	
10. Primary Mineral Mined Dimension Sandstone Mining			11. Number of E a) Total 13	Employees b) Undergrour	od c) Open Pit/Quarr	y d	l) Mill/Prep Plant	e) Other
12. Contractor Name Vasquez Standup					13. Contractor Union No		14. Contractor ID Nu C1484	umber
15. Contractor Address a) City Montrose	b) County		c) State PA		d) Zip Code 18801			
16. Number of Contractor Emplo a) Total 1	byees b) Underground		c) Open I	Pit/Quarry	d) Mill/Pı	rep Plant		e) Other
17. Number of Persons in Mine a a) Mine Employees b)	at Time of Accident Contractor Employees		18. Number of F a) Mine Emp	Persons Unaccou loyees	nted for b) Contractor Employees			
19. Accident Location 03 - Open Pit							20. Mining Height Feet Inches	
21. Nonfatal Injuries	22. Fatal Injuries							
23. Victims Information								
Wilson Efrain Vasquez Sal	inas							
a) First Name Wilson	inas a) MI a) Last Name Efrain Vasquez Sa			gular Job Title reman	d) Activity at Time of Acc Unknown	cident	Employee Contractor Emp	loyee
a) First Name	a) MI a) Last Name	linas Mine d	30 Fo	reman he Activity at the		d) Expe		
a) First Name Wilson 24. Mining Experience a) Total Experience 12 Years 0 Weeks 0	a) MI a) Last Name Efrain Vasquez Sa b) Experience at the	Mine of Days	30 Fo	reman he Activity at the	Unknown	d) Expe	Contractor Emp	
a) First Name Wilson 24. Mining Experience a) Total Experience 12 Years 0 Weeks 0 Days 25. Autopsy Performed	a) MI a) Last Name Efrain Vasquez Sa b) Experience at the 0 Years 4 Weeks 0	Mine of Days	30 Fo	reman he Activity at the	Unknown	d) Expe	Contractor Emp	
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a) First Name Wilson 24. Mining Experience a) Total Experience 12 Years 0 Weeks 0 Days 25. Autopsy Performed Yes 26. Mine Telephone No. (570) 533-3419 27. Description of Accident (incl	a) MI a) Last Name Efrain Vasquez Sa b) Experience at the 0 Years 4 Weeks 0 If Yes, Locaunknown ude equipment involved, allow pool of water at the b	Mine C Days ation the exact Ic	2) Experience at t 0 Years 4 Week	he Activity at the s 0 Days	Time of the Accident	d) Exper 4 Yea	Contractor Emp rience with Contracto ars 0 Weeks 0 Days	or
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