

## Preliminary Report of Accident

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

PR001 12/02/2024

<b>1. Accident Type</b> F - Fatal Injury		<b>2. Accident Classification</b> 12 - Powered Haulage		<b>3. Date/Time of Accident</b> 11/27/2024 05:40 PM		<b>4. Date/Time of Death</b> 11/27/2024 05:40 PM		<b>5. Fatal Case No</b> FAI-F00E0A7-1	
<b>6. Mine Information</b>									
a) Mining Company Name:		Cargill Deicing Technology							
b) Mine Name:		Cargill Deicing Technology-Cleveland Mn							
c) Parent of Mining Company:		Cargill Inc							
<b>7. Mine Location Information</b>				<b>8. Mine ID Number</b>		<b>9. Union</b>			
a) City Cleveland		b) County Cuyahoga		c) State OH		33-01994		Yes	
<b>10. Primary Mineral Mined</b> Salt Mining				<b>11. Number of Employees</b>					
				a) Total 220		b) Underground 140		c) Open Pit/Quarry 0	
						d) Mill/Prep Plant 64		e) Other 16	
<b>12. Contractor Name</b>						<b>13. Contractor Union</b>		<b>14. Contractor ID Number</b>	
<b>15. Contractor Address</b>									
a) City		b) County		c) State		d) Zip Code			
<b>16. Number of Contractor Employees</b>									
a) Total		b) Underground		c) Open Pit/Quarry		d) Mill/Prep Plant		e) Other	
<b>17. Number of Persons in Mine at Time of Accident</b>					<b>18. Number of Persons Unaccounted for</b>				
a) Mine Employees 21		b) Contractor Employees 0			a) Mine Employees 0		b) Contractor Employees 0		
<b>19. Accident Location</b> 01 - Underground								<b>20. Mining Height</b> 20 Feet Inches	
<b>21. Nonfatal Injuries</b> 0		<b>22. Fatal Injuries</b> 1							
<b>23. Victims Information</b>									
<b>Grzegorz Sychla</b>									
a) First Name Grzegorz		a) MI		a) Last Name Sychla		b) Age 58		c) Regular Job Title Electrician	
								d) Activity at Time of Accident Restling Power on Stamler	
								Employee Mine Employee	
<b>24. Mining Experience</b>									
a) Total Experience 10 Years 37 Weeks 2 Days		b) Experience at the Mine 10 Years 37 Weeks 2 Days		c) Experience at the Activity at the Time of the Accident 10 Years 37 Weeks 2 Days		d) Experience with Contractor 0 Years 0 Weeks 0 Days			
<b>25. Autopsy Performed</b> No									
<b>26. Mine Telephone No.</b> (216) 651-7200									
<b>27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations)</b> An electrician died when a Load Haul Dump loader struck the parked utility vehicle he was occupying.  <i>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.</i>									
<b>28. Equipment Manufacturer</b> Caterpillar					<b>29. Model</b> R3000H				
<b>30. District</b> M2000 - Warrendale District					<b>32. Field Office</b> M2681 - Warrendale PA Field Office			<b>33. Event Number</b> F00E0A7	
<b>34. Accident Investigator</b>									
First Name Arthur		MI D		Last Name Wall					
<b>35. MSHA Person Notified</b>									
First Name Kevin		MI H		Last Name Abel		Date/Time Notified 11/27/2024 06:05 PM			
<b>36. Type of Report</b> Initial		<b>37. Name of Preparer</b> Full Name Kevin H Abel				<b>Date Prepared</b> 11/28/2024			
<b>38. Reason for Amendment</b>									