

Preliminary Report of Accident

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



PR001 07/16/2025

1. Accident Type F - Fatal Injury		2. Accident Classification 12 - Powered Haulage		3. Date/Time of Accident 07/12/2025 7:40 AM		4. Date/Time of Death 07/12/2025 09:30 AM		5. Fatal Case No FAI-F015839-1																																				
6. Mine Information																																												
a) Mining Company Name:		GCC Rio Grande Inc																																										
b) Mine Name:		Pueblo Plant & Quarry																																										
c) Parent of Mining Company:		GCC SAB de CV																																										
7. Mine Location Information			8. Mine ID Number			9. Union																																						
a) City PUEBLO			b) County Pueblo			c) State CO			d) Mill/Prep Plant No																																			
10. Primary Mineral Mined Hydraulic Cement			11. Number of Employees			c) Open Pit/Quarry																																						
			a) Total 145			d) Mill/Prep Plant 95																																						
			b) Underground			e) Other 34																																						
12. Contractor Name Koury Transport LLC					13. Contractor Union No			14. Contractor ID Number V316																																				
15. Contractor Address					d) Zip Code																																							
a) City Pueblo					b) County CO																																							
16. Number of Contractor Employees					d) Mill/Prep Plant																																							
a) Total 1					e) Other 1																																							
17. Number of Persons in Mine at Time of Accident					18. Number of Persons Unaccounted for																																							
a) Mine Employees 7					a) Mine Employees 0																																							
b) Contractor Employees 1					b) Contractor Employees 0																																							
19. Accident Location 30 - Mill/Prep Plant								20. Mining Height Feet Inches																																				
21. Nonfatal Injuries			22. Fatal Injuries 1																																									
23. Victims Information																																												
<table border="1"> <tr> <td>a) First Name Victor</td> <td>a) MI</td> <td>a) Last Name Armas</td> <td>b) Age 62</td> <td>c) Regular Job Title Truck Driver</td> <td>d) Activity at Time of Accident Driving Over the Road Haul Truck</td> <td>Employee Contractor Employee</td> </tr> <tr> <td colspan="7">24. Mining Experience</td> </tr> <tr> <td colspan="2">a) Total Experience 2 Years 0 Weeks 0 Days</td> <td colspan="2">b) Experience at the Mine 2 Years 0 Weeks 0 Days</td> <td colspan="2">c) Experience at the Activity at the Time of the Accident 2 Years 0 Weeks 0 Days</td> <td>d) Experience with Contractor 2 Years 0 Weeks 0</td> </tr> <tr> <td colspan="7">25. Autopsy Performed Yes</td> </tr> <tr> <td colspan="7">If Yes, Location Saint Mary Corwin Hospital Pueblo (Common Spirit)</td> </tr> </table>										a) First Name Victor	a) MI	a) Last Name Armas	b) Age 62	c) Regular Job Title Truck Driver	d) Activity at Time of Accident Driving Over the Road Haul Truck	Employee Contractor Employee	24. Mining Experience							a) Total Experience 2 Years 0 Weeks 0 Days		b) Experience at the Mine 2 Years 0 Weeks 0 Days		c) Experience at the Activity at the Time of the Accident 2 Years 0 Weeks 0 Days		d) Experience with Contractor 2 Years 0 Weeks 0	25. Autopsy Performed Yes							If Yes, Location Saint Mary Corwin Hospital Pueblo (Common Spirit)						
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26. Mine Telephone No. (719) 647-6800																																												
27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A delivery truck driver died when the truck he was driving travelled off the road and crashed in a ravine. <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>																																												
28. Equipment Manufacturer Freightliner					29. Model Cascadia																																							
30. District M6000 - Denver District					32. Field Office M6642 - Denver CO Field Office			33. Event Number F015839																																				
34. Accident Investigator																																												
First Name Steven		MI		Last Name Polgar																																								
35. MSHA Person Notified																																												
First Name Dennis		MI		Last Name Bellfi		Date/Time Notified 07/12/2025 7:43 AM																																						
36. Type of Report Initial		37. Name of Preparer Full Name Christopher Bryant			Date Prepared 07/14/2025																																							
38. Reason for Amendment																																												