

Preliminary Report of Accident

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



PR001 07/21/2025

1. Accident Type F - Fatal Injury		2. Accident Classification 07 - Fall of Roof or Back		3. Date/Time of Accident 07/12/2025 4:45 AM		4. Date/Time of Death 07/13/2025 04:05 AM		5. Fatal Case No FAI-F01495E-1	
6. Mine Information									
a) Mining Company Name:		Nyrstar Tennessee Mines, Strawberry Plains LLC							
b) Mine Name:		Young Mine							
c) Parent of Mining Company:		Nyrstar Netherlands Holdings B.V.							
7. Mine Location Information			8. Mine ID Number			9. Union			
a) City STRAWBERRY PLAINS			b) County Jefferson		c) State TN		40-00168		No
10. Primary Mineral Mined Lead-Zinc Ore Mining, N.E.C.					11. Number of Employees				
					a) Total 161		b) Underground 145		c) Open Pit/Quarry 0
							d) Mill/Prep Plant 0		e) Other 16
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 Employees									
a) Total		b) Underground		c) Open Pit/Quarry		d) Mill/Prep Plant		e) Other	
17. Number of Persons in Mine at Time of Accident					18. Number of Persons Unaccounted for				
a) Mine Employees 23		b) Contractor Employees 0			a) Mine Employees 0		b) Contractor Employees 0		
19. Accident Location 01-08 - Underground Retreat Mining								20. Mining Height 110 Feet 0 Inches	
21. Nonfatal Injuries 0		22. Fatal Injuries 1							
23. Victims Information									
Alan Whitaker									
a) First Name Alan		a) MI		a) Last Name Whitaker		b) Age 36		c) Regular Job Title Miner 2	
								d) Activity at Time of Accident Loader Operator	
								Employee Mine Employee	
24. Mining Experience									
a) Total Experience 3 Years 6 Weeks 4 Days		b) Experience at the Mine 3 Years 6 Weeks 4 Days			c) Experience at the Activity at the Time of the Accident 2 Years 9 Weeks 1 Days			d) Experience with Contractor 0 Years 0 Weeks 0	
25. Autopsy Performed No									
If Yes, Location									
26. Mine Telephone No. (615) 512-4285									
27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A miner died when material from the roof and rib fell onto the loader he was operating. <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 Not listed Sandvick					29. Model LH514				
30. District C0700 - Barbourville District					32. Field Office C0712 - Knoxville TN Field Office			33. Event Number F01495E	
34. Accident Investigator									
First Name Daniel		MI		Last Name Fox					
35. MSHA Person Notified									
First Name Grady		MI		Last Name Russel		Date/Time Notified 07/12/2025 5:19 AM			
36. Type of Report Initial		37. Name of Preparer Full Name Daniel Fox			Date Prepared 07/12/2025				
38. Reason for Amendment									