Preliminary Report of Accident



PR001 05/29/2025

| 1. Accident Type F - Fatal Injury | 2. Accident Classification 12 - Powered Haulage | 3. Date/Time of 05/19/2025 2:0 | | 4. Date/Time of Death 05/19/2025 2:00 PM | | 5. Fatal Case No FAI-F016FBB-1 |
|--|---|---|--|---|-----------|---|
| 6. Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company: | Hahm International Inc Silver Lake Mine Scott R Descher | | | | | |
| 7. Mine Location Information a) City APPLE VALLEY | b) County c San Bernardino | :) State CA | 8. Mine ID Num 04-05281 | ber 9. Union | | n |
| 10. Primary Mineral Mined Iron Ore Mining, N.E.C. | 11. Number of Employees a) Totalc) Open Pit/Quarryd) Mill/Prep Plante) 6631 | | | | | |
| 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 Employ a) Total | yees b) Underground | c) Open F | Pit/Quarry | d) Mill/P | rep Plant | e) Other |
| 17. Number of Persons in Mine at Time of Accident a) Mine Employees 518. Number of Persons Unaccounted for a) Mine Employees b) Contractor Employees3a) Mine Employees b) Contractor Employees | | | | | | |
| 19. Accident Location 03 - Open Pit | | | | | | 20. Mining Height 40 Feet Inches |
| 21. Nonfatal Injuries | 22. Fatal Injuries | | | | | I |
| 23. Victims Information | 1 | | | | | |
| Joseph F Maidaa | | | | | | |
| a) First Name a Joseph |) MI a) Last Name F Maidaa | 26 Eq | gular Job Title uipment perator | d) Activity at Time of Act Truck Driver | cident | Employee Mine Employee |
| 24. Mining Experience a) Total Experience 1 Years 13 Weeks 0 Days | b) Experience at the Mine 1 Years 13 Weeks 0 Days | c) Experience at t 0 Years 13 Wee | | Time of the Accident | | erience with Contractor ears 0 Weeks 0 |
| 25. Autopsy Performed Yes | If Yes, Location San Bernardino Coroner office | | | | | |
| 26. Mine Telephone No. (760) 403-3182 | | | | | | |
| 27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A truck driver died when the articulated truck he was operating traveled through a gate, over a berm, and fell down an approximately forty-foot highwall to the bench below. | | | | | | |
| 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 thecause of the accident. | | | | | | |
| 28. Equipment Manufacturer Caterpillar | | 29. Model (2017) 745 C | ; | | | |
| 30. District M7000 - Vacaville District | | 32. Field Office M7831 - San | Bernardino CA Fie | eld Office | | 33. Event Number F016FBB |
| 34. Accident Investigator First Name William | MI Last Name C Rugh | | | | | 1 |
| 35. MSHA Person Notified First Name Benjamin | MI Last Name Burns | | Date/Time Not 05/19/2025 4:2 | | | |
| 36. Type of Report Initial | 37. Name of Preparer Full Name William C Rugh | Date P 05/20/2 | Prepared 2025 | | | |
| 38. Reason for Amendment | | | | | | |