PR001
18-May-12

Preliminary Report of Accident

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

1. Accident Type:	2. Accident Classification	3. Date/Time of Accident	4. Date/Time of Death	5. Fatal Case No
Fatal Injury	Powered Haulage	05/15/2012 02:40 PM	05/15/2012 02:40 PM	6

6. Mine Information :

a) Mining Company Name	b) Mine Name	c) Parent of Mining Company
Sterling Materials	Sterling Materials	Samuel (Alex) Boone

7. Mine Location : a) City	b) County	c) State	8. Mine ID Number:	9. Union:
Verona	Gallatin	KY	15-18068	NO

10. Primary Mineral Mined:	11. Number of Mine Employees: a) Total	b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other
CRUSHED & BROKEN LIMESTONE M	48	38		6	4

12. Contractor Name:	13. 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: a) Mine Employees:	b) Contractor Employees:	18. Number of Persons Unaccounted For: a) Mine Employees:	b) Contractor Employees:

19) Location of Accident

- [X] 01-Underground
- [ ] 02-Surface at Underground
- [ ] 03-Open Pit
- [ ] 06-Dredge Mining
- [ ] 07-Advance Mining
- [ ] 08-Retreat Mining
- [ ] 30-Mill/Prep Plant
- [ ] 99-Office Facility
- [ ] Other (specify)

20. Mining Height: Feet Inches

21. Nonfatal Injuries:	22. Fatal Injuries:
0	1

23. Victim Information : a) Name	b) Age
Angela W. Common	37

c) Regular Job Title:	d) Activity at Time of Accident:	[X] Mine Employee
Haul Truck Driver	Operating Haul Truck	

24. Experience :	Years	Weeks	Days		Years	Weeks	Days		Years	Weeks	Days		Years	Weeks	Days
a) Total:	2	20		b) at the mine:	2	20		c) at activity (23d)	2	20		d) with Contractor			

25. Autopsy Performed:	If Yes, Location	26. Mine Telephone No.:
YES	Gallatin County	(859) 567-7300

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):

The miner was operating a loaded 40 ton articulated haul truck down a slope when the truck went out of control and hit a rib. The cab section overturned. The victim was ejected from the truck

The information provided in this notice is based on preliminary data ONLY and does not represent final determinations regarding the nature of the incident or conclusions regarding the cause of the accident.

28. Equipment Manufacturer:	29. Model:
Volvo	A40F

30. District:	32. Field Office:	33. Event Number:
M3000 Southeastern	Lexington KY	6585615

34. Accident Investigator:	35. MSHA Person Notified:	Date	Time
Mike Evans	Scott Johnson	05/15/2012	04:02 P

36. Type of Report:	37. Name of Preparer and Date Prepared:	Date
Initial	Mike Hancher MH	05/16/2012

38. Reason For Amendment: