

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Powered Haulage		3. Date/Time of Accident 12/17/2010 07:30 PM		4. Date/Time of Death 12/17/2010 07:30 PM		5. Fatal Case No 22							
6. Mine Information :															
a) Mining Company Name S W Barrick & Sons			b) Mine Name S W Barrick & Sons			c) Parent of Mining Company Laurel Sand & Gravel Inc									
7. Mine Location :		a) City Woodsboro		b) County Frederick		c) State MD		8. Mine ID Number: 18-00008		9. Union: NO					
10. Primary Mineral Mined: CRUSHED & BROKEN LIMESTONE M			11. Number of Mine Employees:		a) Total 53	b) Underground 0	c) Open Pit/Quarry 24	d) Mill/Prep Plant 24	e) Other 5						
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:					18. Number of Persons Unaccounted For:										
a) Mine Employees: 9		b) Contractor Employees:			a) Mine Employees:		b) Contractor Employees:								
19) Location of Accident									20. Mining Height:						
<input type="checkbox"/> 01-Underground	<input checked="" type="checkbox"/> 03-Open Pit	<input type="checkbox"/> 07-Advance Mining	<input type="checkbox"/> 30-Mill/Prep Plant	<input type="checkbox"/> Other (specify)	Feet	Inches									
<input type="checkbox"/> 02-Surface at Underground	<input type="checkbox"/> 06-Dredge Mining	<input type="checkbox"/> 08-Retreat Mining	<input type="checkbox"/> 99-Office Facility												
21. Nonfatal Injuries:			22. Fatal Injuries: 1												
23. Victim Information :															
a) Name John Gaither			b) Age 35												
c) Regular Job Title: Quarry Truck Driver				d) Activity at Time of Accident: Cleaning transfer chutes			<input checked="" type="checkbox"/> Mine Employee								
24. Experience :	Years Weeks Days		Years Weeks Days			Years Weeks Days			Years Weeks Days						
a) Total:	0	11	4	b) at the mine:	0	11	4	c) at activity (23d)	0	11	4	d) with Contractor	0	0	0
25. Autopsy Performed: If Yes, Location YES Baltimore, MD						26. Mine Telephone No.: (301) 845-6776									

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

The victim was standing on a belt conveyor, working inside a chute, when the belt conveyor started. He was pulled out of the chute and conveyed under two other chutes located on the same belt conveyor. After the belt conveyor was shut down, he was found under a third chute.

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: Not listed			29. Model:			
30. District: M2000 Northeastern		32. Field Office: Wyomissing-South PA			33. Event Number: 0907354	
34. Accident Investigator: Thomas Shilling			35. MSHA Person Notified: Kevin H. Abel		Date 12/17/2010	Time 08:48 P
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Mike Hancher <i>MH</i>			Date 12/20/2010	
38. Reason For Amendment:						