

Quarterly Mine Employment
and Coal Production Report

(SEE INSTRUCTIONS ON REVERSE SIDE OF COPY 2)

DOL - MSHA - PEIR - OIEI
P.O. Box 25367
Denver, Colorado 80225 - 0367

Date Report Completed

| | | |
|-----|-----|-----|
| Mo. | Day | Yr. |
|-----|-----|-----|

1. Persons Working, Employee-Hours, and Coal Production

| (1) Operation Sub Unit Code(s) previously reported: | Code | (2) Average number of persons working during quarter | (3) Total employee hours worked during the quarter | (4) Production of clean coal during quarter, (short tons) |
|---|---|--|--|---|
| Underground Mine | Underground | 01 | | |
| | Surface Shops, Yards, etc. | 02 | | |
| Surface Mine (including associated shops and yards) | Strip, Open Pit, or Quarry | 03 | | |
| | Auger (Coal Mine Only) | 04 | | |
| | Culm Bank or Refuse Pile (Coal Mine Only) | 05 | | |
| | Dredge | 06 | | |
| | Other Surface Mining (Metal/Nonmetal Only) | 12 | | |
| Independent Shops or Yards | 17 | | | |
| Mill Operations, Preparation Plants, or Breakers (include associated shops and yards) | 30 | | | |
| Office (professional and clerical employees at the mine or plant working in an office) | 99 | | | |

2. Other Reportable Data

How many MSHA reportable injuries or illnesses did you have this quarter?

| | | |
|--|-------------|------------------------|
| Person to be contacted regarding this report: | Name _____ | Tel. No. (_____) _____ |
| | Title _____ | area code |

For Quarter Year

Mail Before

Check here if this report is being submitted by a contractor

If any information below is incorrect, please enter correct information here:

County: _____

Operation Name: _____

Operating Company Name and Mailing Address: _____

County _____

MSHA ID Number

Contractor ID

Operation Name

Operating Company Name and Mailing Address


Copy 1 - Return to MSHA (Denver)

Quarterly Mine Employment and Coal Production Report

U.S. Department of Labor

Mine Safety and Health Administration


OBM Control Number 1219-0007; Approval Expires April 30, 2011

 This report is required by law (30 U.S.C. subsection 813; 30 C.F.R. Part 50). Failure to report may result in the issuance of a citation or order under 30 U.S.C. subsection 814 to an operator of a coal or other mine, the assessment of a civil penalty against an operator of a coal or other mine under 30 U.S.C. subsection 820(a), and the institution of a civil action under 30 U.S.C. subsection 818. An individual who knowingly makes a false statement in any report shall, upon conviction, be punished by a fine of not more than \$10,000 or by imprisonment for not more than 5 years, or both, under 30 U.S.C. subsection 820(f). Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick scheme, or device, a material fact, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined under 18 U. S. C. or imprisoned not more than five years, or both, under 18 U. S. C. subsection 1001.

Important:

(INSTRUCTIONS)

 **This form must be completed and mailed or faxed within 15 days after the end of each calendar quarter.**

-  **INSTRUCTIONS**
1. Fill out this form as completely as possible and return Copy 1 of this report to:
MSHA
PEIR - Office of Injury and Employment Information **OR** You may FAX Copy 1 to Fax # 1- 888 - 231 - 5515
P.O. BOX 25367
Denver, CO 80225-0367
 2. If it is necessary to make any address changes, indicate correct information on this form.
 3. When pre-addressed, this form is only for the operation with I. D. number as shown. Do not use for any other operation.
 4. **Sand and Gravel** operators report employment data under code 03 or 06 as appropriate, except for data on office workers which should be reported under code 99.
 5. All mine operators and independent contractors reporting as required by 30 C.F.R. Part 50, should show persons working and employee hours worked; those producing coal should also show production date.
 6. **Independent Contractors** should complete quarterly only one form for activities at all coal locations, and one form for activities at metal and nonmetal locations.

The public reporting burden for this collection of Information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of Information. Send comments regarding this estimated response time or any other aspect of this collection of information, including suggestions for reducing this burden, to Mine Safety and Health Administration, U.S. Department of Labor, 1100 Wilson Boulevard, Arlington, VA 22209-3939.

Persons are not required to respond to this collection of information unless this form displays a currently valid OMB control number.

MSHA Form 7000-2, July 97 (revised)