



STATEMENT FORM
SECURITY DEPARTMENT 015

REPORT #
1 1

NN 5076-S (Rev. 5)

DATE 10-4-22		TIME 20:30		SHIFT Night		DEPARTMENT		HUNTINGTON INGALLS INDUSTRIES-NEWPORT NEWS PRIVATE/PROPRIETARY INFORMATION LEVEL 1 NOT TO BE COPIED WITHOUT PROPER AUTHORIZATION FROM 015			
LAST NAME Gardner		FIRST NAME Maurice		MIDDLE NAME Jarou		RACE B	SEX M	DATE OF BIRTH		SSN (NON-ENS)	
ADDRESS		CITY		STATE		ZIP CODE		PHONE		WORK PHONE	
EMPLOYED BY Kokosing								SUPERVISOR Philip White		WORK PHONE	

THIS STATEMENT IS A TRUTHFULLY WRITTEN ACCOUNT OF MY PERSONAL OBSERVATIONS AND KNOWLEDGE AS TO THE BELOW DESCRIBED INCIDENT.

I called on the radio to flat the barge up some. The fore-man answer and said ok. Then he told me exit the crane as fast as I can because it was on fire. I jumped out and started to getting and fire extinguisher to help but the fire had gotten to big.

IF AN EMPLOYEE HAS A REASONABLE BELIEF THAT DISCIPLINE OR OTHER ADVERSE CONSEQUENCES MAY RESULT FROM WHAT HE OR SHE SAYS, THE EMPLOYEE HAS THE RIGHT TO REQUEST UNION REPRESENTATION.

Witness (Print):
Witness (Sign):

Statement By (Print):
Statement By (Sign):



Newport News Shipbuilding
A Division of Huntington Ingalls Industries

STATEMENT FORM SECURITY DEPARTMENT 015

REPORT #

1 / 1

NN 5076-S (Rev. 5)

DATE 10/5/22		TIME 0030		SHIFT		DEPARTMENT Tugboat		HUNTINGTON INGALLS INDUSTRIES-NEWPORT NEWS PRIVATE/PROPRIETARY INFORMATION LEVEL 1 NOT TO BE COPIED WITHOUT PROPER AUTHORIZATION FROM 015			
LAST NAME Stevens		FIRST NAME Donnie		MIDDLE NAME Summers		RACE W	SEX M	DATE OF BIRTH 12/29/47		FORM SSN (WORK-1015)	
ADDRESS				CITY		HOME PHONE		WORK PHONE			
EMPLOYED BY Skiffs Craft Towing Inc.						SUPERVISOR		WORK PHONE			

THIS STATEMENT IS A TRUTHFULLY WRITTEN ACCOUNT OF MY PERSONAL OBSERVATIONS AND KNOWLEDGE AS TO THE BELOW DESCRIBED INCIDENT.

2230 Frank call me over the VHF to tell me they had a fire. I sounded the gen. Alarm to alert crew. We attempted to put fire out with fire pump with no luck. We passed our BS portable fire extinguisher to dredge. Called CG to report fire.

IF AN EMPLOYEE HAS A REASONABLE BELIEF THAT DISCIPLINE OR OTHER ADVERSE CONSEQUENCES MAY RESULT FROM WHAT HE OR SHE SAYS, THE EMPLOYEE HAS THE RIGHT TO REQUEST UNION REPRESENTATION.

Witness (Print):

Witness (Sign):

Statement By (Print):

Statement By (Sign):

Donnie Stevens



STATEMENT FORM SECURITY DEPARTMENT 015

REPORT #

1 / 1

NN 5076-S (Rev. 5)

DATE 10/05/2022	TIME 0030	SHIFT	DEPARTMENT Tugboat	HUNTINGTON INGALLS INDUSTRIES-NEWPORT NEWS PRIVATE/PROPRIETARY INFORMATION LEVEL 1 NOT TO BE COPIED WITHOUT PROPER AUTHORIZATION FROM 015			
LAST NAME Stevens	FIRST NAME Brandon	MIDDLE NAME Michael	RACE W	SEX M	DATE OF BIRTH	PERM	SSN (NON-UNION)
EMPLOYED BY Skiffs Creek Towing Inc			STATE	ZIP CODE	HOME PHONE	WORK PHONE	
					SUPERVISOR Capt. Brandon Stevens	WORK PHONE Same	

THIS STATEMENT IS A TRUTHFULLY WRITTEN ACCOUNT OF MY PERSONAL OBSERVATIONS AND KNOWLEDGE AS TO THE BELOW DESCRIBED INCIDENT.

On 10/4/2022 I was in the Bunkroom, sleeping (offwatch) at approx. 2230 the general Alarm sounded on the tug. (Justin) I woke up to see the KOKOV Crane with fire coming from it. we then charged our fire pump and passed over our fire Extinguisher. ~~we~~ We Attempted to put the fire out with Fire pump with no luck in putting out the fire.

IF AN EMPLOYEE HAS A REASONABLE BELIEF THAT DISCIPLINE OR OTHER ADVERSE CONSEQUENCES MAY RESULT FROM WHAT HE OR SHE SAYS, THE EMPLOYEE HAS THE RIGHT TO REQUEST UNION REPRESENTATION.

Witness (Print):

Witness (Sign):

Statement By (Print): Brandon Stevens

Statement By (Sign):



Newport News Shipbuilding
A Division of Huntington Ingalls Industries

STATEMENT FORM SECURITY DEPARTMENT 015

REPORT #

NN 5076-S (Rev. 5)

DATE 10-5-22		TIME 2350	SHIFT	DEPARTMENT Tugboat	HUNTINGTON INGALLS INDUSTRIES-NEWPORT NEWS PRIVATE/PROPRIETARY INFORMATION LEVEL 1 NOT TO BE COPIED WITHOUT PROPER AUTHORIZATION FROM 015				
LAST NAME Sterling	FIRST NAME Jacob	MIDDLE NAME Robert	RACE W	SEX M	DATE OF BIRTH	PERM	SSN (NON-UNNS)		
ADDRESS		CITY	STATE	ZIP CODE	HOME PHONE		WORK PHONE		
EMPLOYED BY Skiffes Creek Towing					SUPERVISOR Brandon		WORK PHONE		

THIS STATEMENT IS A TRUTHFULLY WRITTEN ACCOUNT OF MY PERSONAL OBSERVATIONS AND KNOWLEDGE AS TO THE BELOW DESCRIBED INCIDENT.

ON 10-4-22 at 2736 I was sitting in galley when I heard
 General alarm went up to wheel house when I seen the crane on
 fire went down pulled out fire hose attempt to put fire out handed
 our BS portable fire extinguisher to guy on dredge

IF AN EMPLOYEE HAS A REASONABLE BELIEF THAT DISCIPLINE OR OTHER ADVERSE CONSEQUENCES MAY RESULT FROM WHAT HE OR SHE SAYS, THE EMPLOYEE HAS THE RIGHT TO REQUEST UNION REPRESENTATION.

Witness (Print): _____

Witness (Sign): _____

Statement By (Print): **Jacob Sterling**

Statement By (Sign): _____



STATEMENT FORM
SECURITY DEPARTMENT 015

REPORT #

NN 5076-S (Rev. 5)

DATE 10-4-22		TIME 2230	SHIFT NIGHT	DEPARTMENT HUNTINGTON INGALLS INDUSTRIES-NEWPORT NEWS	PRIVATE/PROPRIETARY INFORMATION LEVEL 1 NOT TO BE COPIED WITHOUT PROPER AUTHORIZATION FROM 015		
LAST NAME HUNTER	FIRST NAME MICHAEL	MIDDLE NAME WAYNE	RACE B	SEX M	DATE OF BIRTH	PERM	SSN (NEW-ENG)
ADD	CITY	STATE	ZIP CODE	WORK FROM			
KODOSING				SUPERVISOR PHILIPP WHITE			

THIS STATEMENT IS A TRUTHFULLY WRITTEN ACCOUNT OF MY PERSONAL OBSERVATIONS AND KNOWLEDGE AS TO THE BELOW DESCRIBED INCIDENT.

UPON THE OPERATING CALLING MYSELF & LOWWORKERS ON RADIO TO FLEET THE BARGE WE SPOTTED THE FIRE UNDER THE ENGINE STREAMING FROM APOD. WE IMMEDIATELY TOLD OPERATOR TO EXIT THE CRANE AND BEGAN FIGHTING THE FIRE WITH EXTINGUISHERS. THE FIRE QUICKLY GREW OUT OF CONTROL AND OUR FOREMAN INSTRUCTED US TO EVALUATE THE RIG ONTO OUR BOAT.

IF AN EMPLOYEE HAS A REASONABLE BELIEF THAT DISCIPLINE OR OTHER ADVERSE CONSEQUENCES MAY RESULT FROM WHAT HE OR SHE SAYS, THE EMPLOYEE HAS THE RIGHT TO REQUEST UNION REPRESENTATION.

Witness (Print): ~~Michael Hunter~~

Statement By (Print) Michael Hunter

Witness (Sign): ~~Michael Hunter~~

Statement By (Sign): ~~Michael Hunter~~



**STATEMENT FORM
SECURITY DEPARTMENT 015**

REPORT #

NN 5076-S (Rev. 5)

DATE 10/4/22	TIME 22:30 10:30	SHIFT Night	DEPARTMENT	HUNTINGTON INGALLS INDUSTRIES-NEWPORT NEWS PRIVATE/PROPRIETARY INFORMATION LEVEL 1 NOT TO BE COPIED WITHOUT PROPER AUTHORIZATION FROM 015			
LAST NAME Pittman	FIRST NAME Renardo	MIDDLE NAME Reshard	RACE B	SEX M	DATE OF BIRTH	PERM	SSN (NON-USA)
ADDRESS		CITY	STATE	ZIP CODE	WORK PHONE		WORK PHONE
EMPLOYED BY Koka Sing							

THIS STATEMENT IS A TRUTHFULLY WRITTEN ACCOUNT OF MY PERSONAL OBSERVATIONS AND KNOWLEDGE AS TO THE BELOW DESCRIBED INCIDENT.

AS Follows: Operaters asked us to Fleet the barge upon aproching
The crane notice fire dripping from which appeared to be coming
From the engine and was a fire where it was dripping approximately
6 to 12 inches in length and I proceeded to grab fire extingisher but less
Then 20 sec to 40 The fire started to get out of control and in a
desperate attempt to exstgish the fire we was unable to control it
~~_____~~

IF AN EMPLOYEE HAS A REASONABLE BELIEF THAT DISCIPLINE OR OTHER ADVERSE CONSEQUENCES MAY RESULT FROM WHAT HE OR SHE SAYS, THE EMPLOYEE HAS THE RIGHT TO REQUEST UNION REPRESENTATION.

Witness (Print):

Witness (Sign):

Statement By (Print): Renardo Pittman

Statement By (Sign):



STATEMENT FORM SECURITY DEPARTMENT 015

REPORT #

NN 5076-S (Rev. 5)

DATE 10/4/22		TIME 2330	SHIFT Nights	DEPARTMENT	HUNTINGTON INGALLS INDUSTRIES-NEWPORT NEWS PRIVATE/PROPRIETARY INFORMATION LEVEL 1 NOT TO BE COPIED WITHOUT PROPER AUTHORIZATION FROM 015				
LAST NAME STOWERS	FIRST NAME FRANCIS	MIDDLE NAME JR	RACE POLY	SEX M	DATE OF BIRTH	PERM	SSN (NON-EMP)	[REDACTED]	
CITY		STATE	ZIP CODE	HOME PHONE	[REDACTED]				
EMPLOYED BY KOKOSING CONSTRUCTION				SUPERVISOR PITUP WHITE					

THIS STATEMENT IS A TRUTHFULLY WRITTEN ACCOUNT OF MY PERSONAL OBSERVATIONS AND KNOWLEDGE AS TO THE BELOW DESCRIBED INCIDENT.

THE OPERATOR CALLED ON THE RADIO TO FLEET THE PUMP SLOW. WHEN WE MET AND THE TWO DECK HANDS WENT TO FLEET THE SWW WE SEEN A STREAM OF FIRE COMING FROM THE BACK OF THE CRANE SO I ~~CAME~~ RAN BACK TO THE OFFICE TO CALL THE OPERATOR TO GET OUT OF THE CRANE THEN WENT BACK TO TRY AND EXTINGUISH THE FIRE WITH THE FIRE EXTINGUISHER AND START THE TRASH PUMP TO TRY AND PUT THE FIRE OUT.

IF AN EMPLOYEE HAS A REASONABLE BELIEF THAT DISCIPLINE OR OTHER ADVERSE CONSEQUENCES MAY RESULT FROM WHAT HE OR SHE SAYS, THE EMPLOYEE HAS THE RIGHT TO REQUEST UNION REPRESENTATION.

Witness (Print):

Witness (Sign):

Statement By (Print): FRANCIS STOWERS

Statement By (Sign):