



**HIGHWAY FACTORS GROUP CHAIRMAN'S
FACTUAL REPORT**

Highway Attachment 4 – Baltimore City Police Crash Report

Baltimore, Maryland

HWY17MH007

(13 pages)

Report Number:

ADH3640041

Reporting Agency:

BALTIMORE CITY
POLICE DEPARTMENT

State of Maryland Motor Vehicle Crash Report

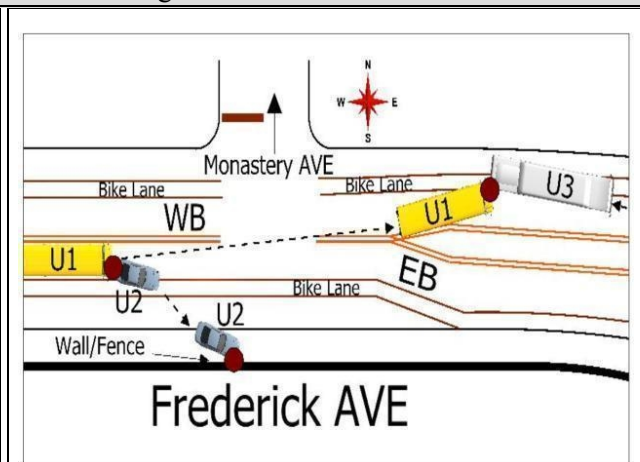
Case Information:

Report Type: **Fatal Crash** County: **Baltimore City** Municipality: **N/A**
 Local Case No.: **8161100095** Local Codes: **CAD#0554** Crash Date: **11/1/2016**
 Investigating Officer: **OFF T. Bender - H364** Crash Time: **06:30 AM** Photos Taken

Location:

GPS X-Coordinates: **-76.6809614002705** GPS Y-Coordinates: **39.2818135965305**
 Main Road: **FREDERICK AVE** Route #: **MD144**
 Intersecting Road: **S MONASTERY AVE** Intersecting Route #: **MU4130**
 Mile Point: **1.6890** Mile Point Direction: **E** Distance: **0 F** Distance Direction: **E**

Accident Diagram:



Narrative:

U/1-YELLOW BUS WAS TRAVELING EB ON FREDERICK AVENUE IN EB LANE-1. FOR UNKNOWN REASONS, U/1 REAR ENDED U/2-MUSTANG WHO WAS ALSO TRAVELING EB ON FREDERICK AVENUE (U/2 HAD BEEN SLOWING TO MAKE A LEFT TURN). U/1 AFTER THIS COLLISION CONTINUED EB SEVERAL HUNDRED FEET ON FREDERICK AVENUE. U/1 GUIDED ACROSS THE CENTER OF THE ROADWAY INTO WB TRAFFIC. U/1 THEN HIT THE FRONT LEFT OF U/3-MTA BUS AND CAUSED A CATASTROPHIC CRASH. DRIVERS OF U/1 AND U/3 WERE PRONOUNCED DECEASED ON SCENE. (4) OTHER OCCUPANTS OF U/3 WERE PRONOUNCED DECEASED ON SCENE. INVESTIGATION HAS BEEN UNABLE TO DETERMINE WHAT CAUSED U/1 TO REAR END U/2 AND THEN CONTINUE DOWN THE ROADWAY UNTIL MAKING CONTACT WITH U/3. AFTER U/2 WAS REAR ENDED, U/2 WAS REDIRECTED INTO A STONE WALL TOPPED WITH METAL FENCE ON THE SOUTH CURB LINE BEFORE COMING TO REST (FENCE OWNER-(OWNER-LOUDON PARK CEMETERY OF 3620 WILKENS AVE MD 21229).

ACRS DIAGRAM NOT TO SCALE

Crash Type:

Collision Type: **Same Dir Rear End**
 Harmful Event One: **Other Vehicle** Harmful Event Two: **Other Vehicle**
 Fixed Object Struck: **N/A** School Bus Involved: **Directly Involved**
 Const./Maint. Zone: **No** Const./Maint. Loc.:
 Workers Present: Const./Maint. Closure:

Road/Area:

Lane No.: **1** Lane Dir.: **E** Lane Type:
 No. of Lanes: **1** Rd. Alignment: **Straight** Rd. Grade: **Level**
 Rd. Division: **Two-Way, Not Divided** Traffic Control: **No Controls**
 Intersection: **T-Intersection** Inter. Area: **N/A**
 Junction: **Intersection**

Conditions:

Road Condition: **No Defects** Contrib - Road: **N/A**
 Weather: **Clear** Contrib - Environment: **N/A**
 Surface Condition: **Dry** Light: **Dark Lights On**

Vehicle 1 (20337H):

Basic Information

Registration: **20337H** Tag State: **MD** Exp Year: **2017** VIN #: **4DRBUAAP9FB029679**
Year: **2015** Make: **INTERNATIONAL** Model: **BUS** Body Type: **Bus - School**
Insurer: **TOPA INSURANCE COMPANY** Policy #: **[REDACTED]**
Towed Vehicle: **N/A**

At Fault/Citation(s)

At Fault: **Yes** Citation Issued: **No** Citation Code:

Owner

First: **AAAFORDABLE** Middle: Last: **TRANSPORTATION**
Street: **46 SOUTH FRANKLINTOWN ROAD** Home Phone:
City: **BALTIMORE** State: **MD** Zip: **21223** Other Phone:

Driver:

DL#: **[REDACTED]** DL State: **MD** DL Class: **A** CDL: **Yes**
First: **GLENN** Middle: **R** Last: **CHAPPELL**
Street: **[REDACTED]**
City: **BALTIMORE** State: **MD** Zip: **21239** Home Phone: **() -**
DOB: **[REDACTED]** Sex: **M** Other Phone: **() -**

Safety Equip.: **Shoulder/Lap Belt(S)** Equip. Problem: **No Misuse** Airbag Deployed: **N/A**

Alch. Test Given: **N/A** Alch. Test Type: **Other** BAC:
Substance Use: **None Detected** Drug Test Given: **N/A** Drug Test Result:

Condition: **Unknown** Ejected: **Trapped**
Injury Severity: **Fatal Injury** EMS Unit: **C** EMS Run Number: **N/A**

Occupant:

First: **ROBIN** Middle: Last: **SIMMONS**
Street: **[REDACTED]**
City: **BALTIMORE** State: **MD** Zip: **21223** Home Phone: **() -**
DOB: **[REDACTED]** Sex: **F** Other Phone: **[REDACTED]**

Safety Equip.: **None** Equip. Problem: **N/A** Airbag Deployed: **N/A**

Seat: **Other** Seating Location: **In Vehicle** Seating Row: **2**

Injury Severity: **Suspected Minor Injury** Ejected: **Not Ejected/Trapped**
EMS Unit: **A** EMS Run Number: **UNKNOWN**

Impact & Damage

First Impact: **Twelve Oclock** Areas Damaged: **Twelve Oclock, Eleven Oclock, Twelve Oclock**
Main Impact: **Twelve Oclock**
Most Harmful Event: **Other Vehicle**
Damage Extent: **Destroyed** Fire: **No**

Circumstances

Going Direction: **E** Continuing Direction: **E** Vehicle Movement: **Unknown** Speed Limit:
Left Scene: **No** Driverless Vehicle: **No** Emergency Vehicle: **No** **30**
Special Function: **Vehicle Used As School Bus**

Contrib. Circumstances Person: **Followed Too Closely**
Driver Distracted By: **Unknown** Contrib. Circumstances Vehicle: **N/A**

Sequence of Events: **Struck Motor Vehicle In Transport, Struck Motor Vehicle In Transport**

Towing

Towed: **Yes**

Removed By:

Removed To: **1515 WASHINGTON BLVD;
BALTIMORE, MD**

Additional Vehicle Use Information

Commercial Name: **AAAFORDABLE TRANSPORTATION**

Carrier **Other**
Classification:

Street: **46 SOUTH FRANKLINTOWN ROAD**

DOT #: **1982031**

City: **BALTIMORE**

State: **MD**

Zip: **21223**

Body Type: **Bus**

Configuration: **Bus Seats For More Than 15 Occupants Incl Driver**

Gross Vehicle Weight: **More Than 26000 Lbs**

Bus Use: **School**

No. of Axles: **2**

MC Number: **999999**

HAZMAT Spill: **No**

Placard Displayed: **No**

HAZMAT Class: **Unknown** Placard Number:

END - Vehicle 1 ()

Vehicle 2 ([REDACTED]):

Basic Information

Registration: [REDACTED] Tag State: MD Exp Year: 2017 VIN #: 1ZVBP8AM4C5 [REDACTED]
Year: 2012 Make: FORD Model: MUSTANG Body Type: Passenger Car
Insurer: GEICO Policy #: [REDACTED]
Towed Vehicle: N/A

At Fault/Citation(s)

At Fault: No Citation Issued: No Citation Code:

Owner

First: SHAWN Middle: CHRISTOPHER Last: BRAXTON
Street: [REDACTED] Home Phone: () -
City: COLUMBIA State: MD Zip: 21045 Other Phone: [REDACTED]

Driver:

DL#: [REDACTED] DL State: MD DL Class: CM CDL: No
First: SHAWN Middle: CHRISTOPHER Last: BRAXTON
Street: [REDACTED]
City: COLUMBIA State: MD Zip: 21045 Home Phone: () -
DOB: [REDACTED] Sex: M Other Phone: [REDACTED]

Safety Equip.: Shoulder/Lap Belt(S) Equip. Problem: No Misuse Airbag Deployed: Deployed - Side

Alch. Test Given: N/A Alch. Test Type: BAC:
Substance Use: None Detected Drug Test Given: N/A Drug Test Result:

Condition: Apparently Normal Ejected: Not Ejected/Trapped
Injury Severity: Possible Injury EMS Unit: B EMS Run Number: 0331619876

Impact & Damage

First Impact: Six Oclock Areas Damaged: Six Oclock, Five Oclock, Seven Oclock
Main Impact: Six Oclock
Most Harmful Event: Other Vehicle
Damage Extent: Destroyed Fire: No

Circumstances

Going Direction: E Continuing Direction: E Vehicle Movement: Slowing Or Stopping Speed Limit:
Left Scene: No Driverless Vehicle: No Emergency Vehicle: No 30
Special Function: N/A

Contrib. Circumstances Person: N/A
Driver Distracted By: Not Distracted Contrib. Circumstances Vehicle: N/A

Sequence of Events: Fence

Towing

Towed: Yes Removed By: Removed To: CITY YARD

END - Vehicle 2 ([REDACTED])

Vehicle 3 (SG22892):

Basic Information

Registration: **SG22892** Tag State: **MD** Exp Year: VIN #: **5FYD4FS185B028137**
Year: **2005** Make: **NEW FLYER USA** Model: **D40LF** Body Type: **Bus - Transit**
Insurer: **STATE OF MARYLAND** Policy #: **SELF INSURED**
Towed Vehicle: **N/A**

At Fault/Citation(s)

At Fault: **No** Citation Issued: **No** Citation Code:

Owner

First: **MARYLAND** Middle: **TRANSIT** Last: **ADMINISTRATION**
Street: **1515 WASHINGTON BLVD** Home Phone:
City: **BALTIMORE** State: **MD** Zip: **21230** Other Phone:

Driver:

DL#: [REDACTED] DL State: **MD** DL Class: **B** CDL: **Yes**
First: **EBONEE** Middle: **DANELL** Last: **BAKER**
Street: [REDACTED]
City: **BALTIMORE** State: **MD** Zip: **21230** Home Phone:
DOB: [REDACTED] Sex: **F** Other Phone:

Safety Equip.: **Shoulder/Lap Belt(S)** Equip. Problem: **No Misuse** Airbag Deployed: **N/A**

Alch. Test Given: **N/A** Alch. Test Type: BAC:
Substance Use: **None Detected** Drug Test Given: **N/A** Drug Test Result:

Condition: **Apparently Normal** Ejected: **Trapped**
Injury Severity: **Fatal Injury** EMS Unit: **D** EMS Run Number: **N/A**

Occupant:

First: **GERALD** Middle: Last: **HOLLOWAY**
Street: [REDACTED]
City: **BALTIMORE** State: **MD** Zip: **21214** Home Phone: **() -**
DOB: [REDACTED] Sex: **M** Other Phone: **() -**

Safety Equip.: **None** Equip. Problem: **N/A** Airbag Deployed: **N/A**

Seat: **Other** Seating Location: **In Vehicle** Seating Row: **2**

Injury Severity: **Fatal Injury** Ejected: **Trapped**
EMS Unit: **E** EMS Run Number: **N/A**

Occupant:

First: **PATTIE** Middle: **LYNN** Last: **MARTINEZ**
Street: [REDACTED]
City: **BALTIMORE** State: **MD** Zip: **21231** Home Phone: **() -**
DOB: [REDACTED] Sex: **F** Other Phone: **() -**

Safety Equip.: **None** Equip. Problem: **N/A** Airbag Deployed: **N/A**

Seat: **Other** Seating Location: **In Vehicle** Seating Row: **2**

Injury Severity: **Fatal Injury** Ejected: **Trapped**
EMS Unit: EMS Run Number:

Occupant:			
First: OTIS	Middle: THOMAS	Last: JONES	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21229	Home Phone: () - [REDACTED]
DOB: [REDACTED]	Sex: M	Other Phone: [REDACTED]	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Suspected Minor Injury		Ejected: Not Ejected/Trapped	
EMS Unit: F	EMS Run Number: UNKNOWN		

Occupant:			
First: LAQWANDA	Middle: TASHIA	Last: BOOKER	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21223	Home Phone: () - [REDACTED]
DOB: [REDACTED]	Sex: F	Other Phone: [REDACTED]	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Suspected Minor Injury		Ejected: Not Ejected/Trapped	
EMS Unit: G	EMS Run Number: UNKNOWN		

Occupant:			
First: TERANCE	Middle: LEE	Last: CASEY	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21202	Home Phone: [REDACTED]
DOB: [REDACTED]	Sex: M	Other Phone: [REDACTED]	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Fatal Injury		Ejected: Trapped	
EMS Unit: H	EMS Run Number: N/A		

Occupant:			
First: CHERRY	Middle: DENISE	Last: YARBOROUGH	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21215	Home Phone: [REDACTED]
DOB: [REDACTED]	Sex: F	Other Phone: [REDACTED]	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Fatal Injury		Ejected: Trapped	
EMS Unit: I	EMS Run Number: N/A		

Occupant:			
First: LATASHA	Middle:	Last: MCKNIGHT	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21229	Home Phone:
DOB: [REDACTED]	Sex: F	Other Phone:	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Suspected Serious Injury	Ejected: Not Ejected/Trapped		
EMS Unit: J	EMS Run Number: UNKNOWN		

Occupant:			
First: ALPHA	Middle:	Last: DIALLO	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21229	Home Phone:
DOB: [REDACTED]	Sex: M	Other Phone:	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Suspected Serious Injury	Ejected: Not Ejected/Trapped		
EMS Unit: K	EMS Run Number: UNKNOWN		

Occupant:			
First: CHELLA	Middle: ELIZABETH	Last: STEPHENS	
Street: [REDACTED]			
City: REISTERSTOWN	State: MD	Zip: 21136	Home Phone:
DOB: [REDACTED]	Sex: F	Other Phone:	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Suspected Minor Injury	Ejected: Not Ejected/Trapped		
EMS Unit: L	EMS Run Number: UNKNOWN		

Occupant:			
First: ELSIE	Middle: MARIE	Last: LEWIS	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21230	Home Phone:
DOB: [REDACTED]	Sex: F	Other Phone:	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Suspected Minor Injury	Ejected: Not Ejected/Trapped		
EMS Unit: M	EMS Run Number: UNKNOWN		

Occupant:			
First: MICHELLE	Middle:	Last: KENNEDY	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21230	Home Phone:
DOB: [REDACTED]	Sex: F	Other Phone:	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Suspected Minor Injury		Ejected: Not Ejected/Trapped	
EMS Unit: N	EMS Run Number: UNKNOWN		

Occupant:			
First: MICHELLE	Middle: NICOLE	Last: WEST	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21223	Home Phone:
DOB: [REDACTED]	Sex: F	Other Phone:	
Safety Equip.: N/A	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Suspected Minor Injury		Ejected: Not Ejected/Trapped	
EMS Unit: O	EMS Run Number: UNKNOWN		

Occupant:			
First: OMAR	Middle: MOAB	Last: RICE	
Street: [REDACTED]			
City: BALTIMORE	State: MD	Zip: 21201	Home Phone:
DOB: [REDACTED]	Sex: M	Other Phone:	
Safety Equip.: None	Equip. Problem: N/A	Airbag Deployed: N/A	
Seat: Other	Seating Location: In Vehicle	Seating Row: 2	
Injury Severity: Suspected Minor Injury		Ejected: Not Ejected/Trapped	
EMS Unit: P	EMS Run Number: UNKNOWN		

Impact & Damage

First Impact: **Twelve Oclock** Areas Damaged: **Twelve Oclock, Eleven Oclock, Ten Oclock**
Main Impact: **Twelve Oclock**
Most Harmful Event: **Other Vehicle**
Damage Extent: **Destroyed** Fire: **No**

Circumstances

Going Direction: **W** Continuing Direction: **W** Vehicle Movement: **Slowing Or Stopping** Speed Limit:
Left Scene: **No** Driverless Vehicle: **No** Emergency Vehicle: **No** **30**
Special Function: **Vehicle Used As Other Bus**

Contrib. Circumstances Person: **N/A**
Driver Distracted By: **Not Distracted** Contrib. Circumstances Vehicle: **N/A**

Sequence of Events: **N/A**

Towing

Towed: **Yes** Removed By: Removed To:

Additional Vehicle Use Information

Commercial Name: **STATE OF MD-MASS TRANSIT
ADMINISTRATION**

Carrier **Not In Commerce Government**
Classification:

Street: **1515 WASHINGTON BLBD; BALTIMOR**
City: **BALTIMORE**

State: **MD**

Zip: **21230**

DOT #: **99999999**

Body Type: **Bus**

Configuration: **Bus Seats For More Than 15 Occupants Incl Driver**

Gross Vehicle Weight: **More Than 26000 Lbs**

Bus Use: **Transit**

No. of Axles: **2**

MC Number: **999999**

HAZMAT Spill: **No**

Placard Displayed: **No**

HAZMAT Class: **Unknown**

Placard Number:

END - Vehicle 3 (SG22892)

Witness (BOSTON, ANGELO):

First: **ANGELO** Middle: Last: **BOSTON**
Street: [REDACTED]
City: **BALTIMORE** State: **Md** Zip: **21229**
Home Phone: [REDACTED] Other Phone:

Witness (CUMMINGS, KAMERON):

First: **KAMERON** Middle: Last: **CUMMINGS**
Street: [REDACTED]
City: **BALTIMORE** State: **Md** Zip: **21229**
Home Phone: [REDACTED] Other Phone:

Witness (CRAIG, ALLISON):

First: **ALLISON** Middle: Last: **CRAIG**
Street: [REDACTED]
City: **BALTIMORE** State: **Md** Zip: **21229**
Home Phone: [REDACTED] Other Phone:

EMS Unit A (UNKNOWN):	
EMS Type: Ground Transport	Taken to: UNIVERSITY OF MARYLAND HOSPITAL
EMS Unit B (BALTIMOR CITY MEDIC #12):	
EMS Type: Ground Transport	Taken to: JOHNS HOPKINS HOSPITAL
EMS Unit C (OCME):	
EMS Type: Ground Transport	Taken to: OCME
EMS Unit D (OCME):	
EMS Type: Ground Transport	Taken to: OCME
EMS Unit E (OCME):	
EMS Type: Ground Transport	Taken to: OCME
EMS Unit F (UNKNOWN):	
EMS Type: Ground Transport	Taken to: ST AGNES HOSPITAL
EMS Unit G (BALTIMORE CITY MEDIC #11):	
EMS Type: Ground Transport	Taken to: SINAI HOSPITAL EMERGENCY ROOM
EMS Unit H (OCME):	
EMS Type: Ground Transport	Taken to: OCME
EMS Unit I (OCME):	
EMS Type: Ground Transport	Taken to: OCME
EMS Unit J (BALTIMORE CITY MEDIC #05):	
EMS Type: Ground Transport	Taken to: UNIVERSITY OF MARYLAND-SHOCK TRAUMA
EMS Unit K (BALTIMORE CITY MEDIC #22):	
EMS Type: Ground Transport	Taken to: UNIVERSITY OF MARYLAND-SHOCK TRAUMA
EMS Unit L (BALTIMORE CITY AMBO #23):	
EMS Type: Ground Transport	Taken to: UNIVERSITY OF MARYLAND
EMS Unit M (UNKNOWN):	
EMS Type: Ground Transport	Taken to: UNIVERSITY OF MARYLAND-SHOCK TRAUMA
EMS Unit N (BALTIMORE CITY AMBO #24):	
EMS Type: Ground Transport	Taken to: JOHNS HOPKINS HOSPITAL
EMS Unit O (UNKNOWN):	
EMS Type: Ground Transport	Taken to: ST AGNES HOSPITAL

EMS Unit P (BALTIMORE CITY MEDIC #12):

EMS Type: **Ground Transport**

Taken to: **JOHNS HOPKINS HOSPITAL**