State of Maryland Motor Vehicle Crash Report

Report Type: **Injury Crash**

Case Information

Local Case No.: **24MSP018630** Crash Date: **06/09/2024 07:46** County: **Washington**
Agency: **MARYLAND STATE POLICE** Investigating Officer: **TFC J.Socks-6504**

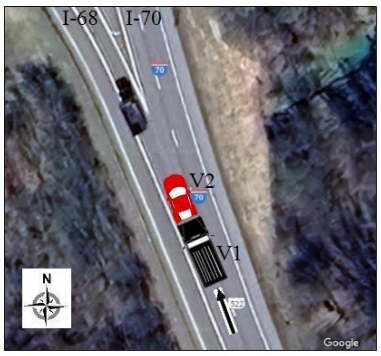
☐ Commercial Vehicles Involved ☐ Non-Motorist Involved ☐ Impaired
☐ Work Zone Related ☐ School Bus Related ☐ Photos Taken

Location

12.57 FEET NORTH OF MILE POINT 37.590 ON IS 70 - EISENHOWER MEMORIAL HWY (WB/L)

GPS Coordinates of Crash: **39.7121140288537, -78.1865001365726**
Contributing Circumstances: **None**
Surface Condition: **Dry** Weather Condition: **Cloudy**
Roadway Defects: **No Defects**
Traffic Control: Light Condition: **Daylight**
Junction: **Entrance/Exit Ramp or Related** Intersection:

Accident Diagram



Narrative

VEHICLE 2 WAS TRAVELING WESTBOUND ON I-70 PRIOR TO I-68 IN LANE 1 WHEN IT WAS REAR ENDED BY VEHICLE 1. THE WITNESS TO THE ACCIDENT ADVISED VEHICLE 1 PASSED HER TRAVELING AT A HIGH RATE OF SPEED, WELL OVER THE POSTED SPEED LIMIT AT WHICH SHE WAS TRAVELING AT THE TIME.

SHORTLY AFTER VEHICLE 1 PASSED THE WITNESS, SHE OBSERVED VEHICLE 1 REAR END VEHICLE 2 JUST PRIOR TO EXIT 1 FOR I-68.

ALL THREE INDIVIDUALS INVOLVED IN THE ACCIDENT WERE TRANSPORTED TO THE HOSPITAL.

BOTH VEHICLES WERE TOWED FROM THE SCENE.

MARYLAND STATE PROPERTY WAS NOT DAMAGED.

Crash Information

Collision Type: **Front to Rear**
Harmful Event 1: **Motor Vehicle In Transport**

Vehicle 1 (MJM4046)

Registration: **MJM4046** State: **Pennsylvania** VIN: **1GNERGKW1MJ140426**
Year: **2021** Make: **CHEVROLET** Model: **TRAVERSE**
Body Type: **Sport Utility Vehicle**
Insured: **Yes** Insurer: **PROGRESSIVE** Policy #: **968121078**

Towing Trailer: **No** Type of Trailer:
Emergency Vehicle: **Not applicable** Special Function: **No Special Function**

Trafficway

Roadway Type: **Two-Way** Road Alignment: **Curve Right** Road Grade: **Downhill**
Divided: **Divided, Depressed Median** Barrier Type: **Guardrail** Speed Limit: **70 MPH**
Through Lanes: **2** Auxiliary Lanes: **1** Lane: **Lane 1** Direction: **Westbound**
Traffic Control Device / Present and Functional **No Controls /**

Impact/Damage

First Impact: **Twelve O'Clock** Area(s) Damaged: **Eleven O'Clock, Twelve O'Clock**
Damage Extent: **Disabling** Fire Damage: **No**
Most Harmful Event: **Motor Vehicle In Transport**

Circumstances

Contrib. Circumstances Person:
Contrib. Circumstances Vehicle:
Vehicle Movement: **Moving Constant Speed** Speed Limit: **70 MPH** Left Scene: **No**
Sequence Of Events: **Motor Vehicle in Transport**

Towing

Towed: **Towed Due To Disabling Damage**
Removed By: **ROLANDS TOWING** Removed To: **TOW LOT**

Vehicle Owner

Name: **PA FETTERMAN F**
Address: [redacted]
Phone Number:

Driver: FETTERMAN JOHN K

License Number: [redacted] Class: [redacted] State: [redacted] ☐ CDL
Address: [redacted]
Phone Number: [redacted] Age: **54** Sex: **Male**
Seat Location: **Left** Seat Row: **1**
Citation Issued: **NO** At Fault: **YES**

Condition: **Apparently Normal** Ejection: **Not Ejected/Not Trapped**
Airbags: **Front**
Injury Severity: **Possible Injury** EMS Unit: **B** EMS Run: **2415742**

Alcohol Use **Test Not Given** Test Type: BAC:
Substance Use **Test Not Given** Test Type: Result:

Distracted By: **Unknown - Unknown**
Restraint Systems: **Shoulder And Lap Belt Used** Improper Usage: **No**

Passenger: FETTERMAN GISELE B

Address: [redacted]
Phone Number:

Seat Location: **Right** Seat Row: **1**
Airbags: **Front**
Injury Severity: **Possible Injury** EMS Unit: **B** EMS Run: **2415742**

Restraint Systems: **Shoulder And Lap Belt Used** Improper Usage: **No**

END - Vehicle 1 (MJM4046)

Vehicle 2 (91918PD)

Registration: **91918PD** State: **Pennsylvania** VIN: **2G1WG5E31D1243518**
Year: **2013** Make: **CHEVROLET** Model: **IMPALA**
Body Type: **Passenger Car**
Insured: **Yes** Insurer: **BRISTOL WEST INS CO 19658** Policy #: **G01332561300**

Towing Trailer: **No** Type of Trailer:
Emergency Vehicle: **Not applicable** Special Function: **No Special Function**

Trafficway

Roadway Type: **Two-Way** Road Alignment: **Curve Right** Road Grade: **Downhill**
Divided: **Divided, Depressed Median** Barrier Type: **Guardrail** Speed Limit: **70 MPH**
Through Lanes: **2** Auxiliary Lanes: **1** Lane: **Lane 1** Direction: **Westbound**
Traffic Control Device / Present and Functional **No Controls /**

Impact/Damage

First Impact: **Six O'Clock** Area(s) Damaged: **Six O'Clock**
Damage Extent: **Disabling** Fire Damage: **No**
Most Harmful Event: **Motor Vehicle In Transport**

Circumstances

Contrib. Circumstances Person:
Contrib. Circumstances Vehicle:
Vehicle Movement: **Moving Constant Speed** Speed Limit: **70 MPH** Left Scene: **No**
Sequence Of Events: **Motor Vehicle in Transport**

Towing

Towed: **Towed Due To Disabling Damage**
Removed By: **ROLANDS GARAGE** Removed To: **TOW LOT**

Vehicle Owner

Name: **CAMPBELL JENNIFER L**
Address: [redacted]
Phone Number: [redacted]

Driver: CAMPBELL JENNIFER L

License Number: [redacted] Class: [redacted] State: [redacted] ☐ CDL
Address: [redacted]
Phone Number: [redacted] Age: **62** Sex: **Female**
Seat Location: **Left** Seat Row: **1**
Citation Issued: **NO**

Condition: **Apparently Normal** Ejection: **Not Ejected/Not Trapped**
Airbags: **Not Deployed**
Injury Severity: **Suspected Minor Injury** EMS Unit: **A** EMS Run: **2415742**

Alcohol Use **Test Not Given** Test Type: BAC:
Substance Use **Test Not Given** Test Type: Result:

Distracted By: **Not Distracted**
Restraint Systems: **Shoulder And Lap Belt Used** Improper Usage: **No**

END - Vehicle 2 (91918PD)

Witness: BLANFORD PAMELA D

Address: [redacted]

Phone Number: [redacted]

Emergency Medical Service Unit A: WCFD M591	
Type: **EMS Ground**	Destination: **WAR MEMORIAL HOSPITAL**

Emergency Medical Service Unit B: MORGAN COUNTY EMS 7-9	
Type: **EMS Ground**	Destination: **WAR MEMORIAL HOSPITAL**