

NCCDB Complaint Entry Home Page

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**FMCSA**
Federal Motor Carrier Safety Administration

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NCCDB National Consumer Complaint Database



Welcome to the National Consumer Complaint Database, where you can file a complaint against a moving, bus, truck company, or cargo tank facility.

IMPORTANT: If this is a safety emergency, please call 911 immediately.

FMCSA is committed to ensuring safety on our Nation's roads. File a complaint here if you have experienced safety, service, or discrimination issues with a moving, bus, truck company, or cargo tank facility.

» Learn about the complaint process.

» Am I in the right place?

CONSUMER

- People using interstate movers, brokers or auto haulers
- Passengers on a bus, limousine or motor coach
- Motorists witnessing safety problems
- People experiencing problems with hazardous materials shipments

[File a Complaint >](#)



DRIVER

- Bus and truck drivers
- Other employees of bus and truck companies (i.e., safety managers)

[File a Complaint >](#)



INDUSTRY

- Bus and truck companies
- Shippers
- Insurers
- Brokers
- Owner/Operators
- Purchasers and users of cargo tanks

[File a Complaint >](#)





OTHER RESOURCES:

- [FMCSA Resources for Consumers](#)
- [Protect Your Move](#)
- [Look Before You Book](#)

You can also call 1-888-DOT-SAFT (1-888-368-7238) from 8:00 a.m.-8:00 p.m. Eastern Time Monday-Friday to file a complaint

Industry Moving Complaint Type

FMCSA
Federal Motor Carrier Safety Administration

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COMPLAINT TYPE | INCIDENT INFORMATION | CONTACT INFORMATION | COMPANY INFORMATION | FILE UPLOAD | REVIEW AND SUBMIT

FAQs-Help ?

INDUSTRY


Moving Complaint



Is your complaint about a moving company or broker that you hired for a personal household move across state lines? This may also involve the transportation of a personal automobile.

- Moving Company (Household Goods)**
- Broker (Arranges Transportation)**
- Deceptive Business Practice**
- Operating Authority and Insurance**


Truck Complaint



Is your complaint about some other violation of Federal Motor Carrier Safety Regulations, such as a truck being operated in an unsafe manner, or without the proper authority?

- Truck Safety**
- Drug and Alcohol**
- Cargo Tank Facility**
- Hazardous Materials**
- Deceptive Business Practice**
- Operating Authority and Insurance**

Bus Complaint



Is your complaint about a bus trip? For example, did you experience inadequate service, unsafe conditions, or a violation of the Americans with Disabilities Act during the ticketing process or trip itself?

- Bus Safety**
- Drug and Alcohol**
- Operating Authority and Insurance**

IMPORTANT

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Industry Moving Complaint Incident Information

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Incident Information

Job Number

*Pickup Date

Origin Address

*Origin City *

*Origin Zip

Delivery Date

Destination Address

*Destination City *

*Destination Zip

If your complaint does not involve a specific move or route, check here to bypass the above section. E.g. This would apply if you are reporting a company who does not have authority to operate from FMCSA.

*Incident Description (Maximum 4000 Characters)

Complaint Detail

[Expand All](#)

Moving Company (Household Goods)

- + Shipment Documents
- + Estimates/Final Charges
- + Weighing
- + Hostage
- + Pickup and Delivery
- + Loss and Damage
- + Owner Operator - Leasing Violations
- + Claim Settlement
- + Other Commercial Complaints

Broker (Arranges Transportation)

- + Shipment Documents
- + Estimates/Final Charges
- + Weighing
- + Hostage
- + Pickup and Delivery
- + Loss and Damage
- + Owner Operator - Leasing Violations
- + Claim Settlement
- + Other Commercial Complaints

Deceptive Business Practice


- + Whistleblower Complaint

Operating Authority and Insurance

- + Operating Authority
- + Insurance

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Industry Moving Complaint Incident Information Continued



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Incident Information

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*Pickup Date

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Destination Address

*Destination City

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If your complaint does not involve a specific move or route, check here to bypass the above section. E.g. This would apply if you are reporting a company who does not have authority to operate from FMCSA.

*Incident Description (Maximum 4000 Characters)

Complaint Detail

[Collapse All](#)

Moving Company (Household Goods)

- Shipment Documents
 - Moving company did not provide the customer with a copy of the "Your Rights And Responsibilities When You Move" pamphlet.
 - Moving company did not provide a written description of their complaint or inquiry process.
 - Moving company did not prepare or provide an [order for service](#).
 - Moving company did not inform the customer of the availability of a neutral arbitration process.
 - Moving company did not prepare or provide an itemized inventory of every box and unboxed item included in the shipment.
 - Moving company did not prepare or provide a bill of lading.
- Estimates/Final Charges
 - Moving company did not provide a concise, easy-to-read written ([binding](#) or [non-binding](#)) estimate of the charges.
 - Moving company did not honor the form of payment specified in the estimate. (Example: the company agreed to payment by personal check in the estimate, but upon delivery they insisted on cash).
 - Moving Company did not honor a binding estimate.
 - Moving company requested more than 110% of a [non-binding](#) estimate at the time of delivery of the shipment.
 - Estimated freight charges: \$
 - Total deposit paid prior to pickup: \$
 - Total freight charges requested at delivery: \$
- Weighing
 - Moving company did not provide an opportunity for the customer to observe the weighing.
 - The customer asked the mover to re-weigh the shipment and they refused.
 - Moving company would not adjust charges based on re-weighing of the shipment.
- Hostage
 - Moving company did not deliver goods or will not provide their location
 - Number of days the shipment was held beyond delivery (enter Number or 'Unknown'):
 - Amount requested from carrier in order to deliver shipment (enter Amount or 'Unknown'): \$
 - Value of the shipment** (enter Value or 'Unknown'): \$
- Pickup and Delivery
 - Moving company did not notify the customer of a delay in picking up their goods.
 - Scheduled pickup date:
 - Actual pickup date:
 - The customer was not notified of a delay in the delivery of their goods.
 - Scheduled delivery date:
 - Actual delivery date:

Industry Moving Complaint Incident Information

Continued

- Loss and Damage
 - There were significant loss and/or damage to the contents of the shipment.
Estimated amount of loss and damage: \$
- Owner Operator – Leasing Violations
 - Payment Period – Failure to remit payment to Owner Operator within 15 days after submission of delivery documents and other paperwork concerning a trip in the service of the authorized carrier
 - Escrow Funds – Failure to remit payment to Owner Operator within 45 days after termination
 - Copy of Rated Freight Bill – Failure to give the owner operator a copy of the rated freight bill
 - Tariff or Other Document – Failure to permit the owner operator to view tariff or other document which rates and charges are computed
 - Charge Back Items – Failure to permit owner operator to view documents which are necessary to determine validity of charges
- Claim Settlement
 - Moving Company did not offer a claim settlement.
 - Moving Company is not responding to a filed complaint or an inquiry.
 - Moving Company refuses to participate in the arbitration process.
- Other Commercial Complaints
 - The company that contracted with me for this job has refused to pay for the services that we agreed to, and that I/my company performed
 - The complaint involved improper insurance coverage for transportation of personal automobile, motorcycle, or machinery with combustible engines
 - A laborer was needed to load or unload the shipment; the company did not provide this service or compensate me for it
 - The shipper or receiver attempted to coerce or coerced the complainant into loading/unloading (lumping) the shipment

Broker (Arranges Transportation)

- Shipment Documents
 - Moving company did not provide the customer with a copy of the "Your Rights And Responsibilities When You Move" pamphlet.
 - Moving company did not provide a written description of their complaint or inquiry process.
 - Moving company did not prepare or provide an [order for service](#).
 - Moving company did not inform the customer of the availability of a neutral arbitration process.
 - Moving company did not prepare or provide an itemized inventory of every box and unboxed item included in the shipment.
 - Moving company did not prepare or provide a bill of lading.
- Estimates/Final Charges
 - Moving company did not provide a concise, easy-to-read written ([binding](#) or [non-binding](#)) estimate of the charges.
 - Moving company did not honor the form of payment specified in the estimate. (Example: the company agreed to payment by personal check in the estimate, but upon delivery they insisted on cash).
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Estimated freight charges: \$
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Scheduled pickup date:
Actual pickup date:
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Scheduled delivery date:
Actual delivery date:
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 - There were significant loss and/or damage to the contents of the shipment.
Estimated amount of loss and damage: \$

Industry Moving Complaint Incident Information

Continued

- Owner Operator – Leasing Violations
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 - Moving Company did not offer a claim settlement.
 - Moving Company is not responding to a filed complaint or an inquiry.
 - Moving Company refuses to participate in the arbitration process.
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 - The company that contracted with me for this job has refused to pay for the services that we agreed to, and that I/my company performed
 - The complaint involved improper insurance coverage for transportation of personal automobile, motorcycle, or machinery with combustible engines
 - A laborer was needed to load or unload the shipment; the company did not provide this service or compensate me for it
 - The shipper or receiver attempted to coerce or coerced the complainant into loading/unloading (lumping) the shipment

Deceptive Business Practice

- Whistleblower Complaint
 - Theft from the Household Goods shipments
 - Charging for services not provided
 - False advertising
 - Broker and Motor Carrier comingling finances
 - Fraud involving credit cards
 - Other fraudulent activity (explain)

Operating Authority and Insurance

- Operating Authority
 - Carrier is operating without required interstate operating authority or registration.
 - Carrier is operating without process agent / process service information on file.
- Insurance
 - Carrier is operating without required insurance / financial responsibility.

IMPORTANT

If this is an emergency, please call 911 immediately. The NCCDB complaint system is intended only for investigation of past events.


CANCEL

BACK

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Contact Information

I am filing this complaint on behalf of someone else

Complainant Information
 Copy Pickup Address Copy Delivery Address
*First Name *Last Name
Email *Phone
Address 1 Address 2
City State
Zip Country

If you represent a company, please enter your company information below

Company Type Company Name
US DOT # Docket #

Privacy Option

Do you authorize FMCSA to disclose the contents of your complaint to the moving company in a notification letter? This notification letter will provide the company with the following information:


- Your Name
- Shipment Bill of Lading Number (Move Identification Number)
- Origin City and State of the Move
- Destination City and State of the Move
- Type of Complaint Cited in the Complaint Detail Tab

If you chose "No", then FMCSA will not notify the company of this complaint and the complaint will not be included in the reports made available to the public for each company on the [Protect Your Move](#) website.

Yes No

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COMPLAINT TYPE | INCIDENT INFORMATION | CONTACT INFORMATION | **COMPANY INFORMATION** | FILE UPLOAD | REVIEW AND SUBMIT

Company Information

Complaint on Carrier(s)

	Company Name	U.S. DOT#	MC#	Address	City	State	Zip	Manual Entry
Delete	Test Trucking Moving company							Y

Enter Company Information

* Name
Address
City State
Zip Country
Email Phone

IMPORTANT
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File Upload

If desired, please upload any supporting documents (DOC, DOCX, WPD, GIF, JPEG, JPG, PNG, PDF, TIF, TIFF, TXT, MPG, MOV, WMV, XLS, XLSX with size limit 10MB)


No file chosen *Description

Supporting Documents

IMPORTANT
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Industry Moving Complaint Review and Submit

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COMPLAINT TYPE | INCIDENT INFORMATION | CONTACT INFORMATION | COMPANY INFORMATION | FILE UPLOAD | REVIEW AND SUBMIT

Review and Submit

Complaint ID: [Print](#)

Incident Information

Address Type	Address	City	State	Zip	Country
Origin		boston	MA	02170	US
Destination		austin	TX	90210	US

Bill of Lading Number (Job #): **Pickup Date:** 5/29/2016 **Delivery Date:**

Incident Description
This is a test complaint

Complaint Detail

Type	Category	Allegation
Deceptive Business Practice	Whistleblower Complaint	False advertising

Contact Information

Name	Email	Phone	Address	
Test Record		617-494-2236	boston, MA, 02170, US	Complainant

Your company information
 Company Type: Company Name:
 US DOT #: Docket #:

Privacy Option
 Do you authorize FMCSA to disclose the contents of your complaint to the moving company in a notification letter? Yes

Company Information

Company Name	U.S. DOT#	MC#	Address	City	State	Zip	Manual Entry
Test Trucking Moving company							Y

Supporting Documents

None

Certification Statement

* By checking this box, I certify/understand that the statements and information I am submitting in support of this complaint (allegation) are, to the best of my knowledge, true, accurate and complete.

IMPORTANT
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CANCEL
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INDUSTRY


Moving Complaint



Is your complaint about a moving company or broker that you hired for a personal household move across state lines? This may also involve the transportation of a personal automobile.

- Moving Company (Household Goods)
- Broker (Arranges Transportation)
- Deceptive Business Practice
- Operating Authority and Insurance


Truck Complaint



Is your complaint about some other violation of Federal Motor Carrier Safety Regulations, such as a truck being operated in an unsafe manner, or without the proper authority?

- Truck Safety
- Drug and Alcohol
- Cargo Tank Facility
- Hazardous Materials
- Deceptive Business Practice
- Operating Authority and Insurance

Bus Complaint




Is your complaint about a bus trip? For example, did you experience inadequate service, unsafe conditions, or a violation of the Americans with Disabilities Act during the ticketing process or trip itself?

- Bus Safety
- Drug and Alcohol
- Operating Authority and Insurance

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Industry Truck Complaint Incident Information



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COMPLAINT TYPE | **INCIDENT INFORMATION** | CONTACT INFORMATION | COMPANY INFORMATION | FILE UPLOAD | REVIEW AND SUBMIT

Incident Information

Incident Date

Incident Location

*Incident Description (Maximum 4000 Characters)

Complaint Detail

[Expand All](#)

- Truck Safety**
 - + Hours of Service
 - + Unsafe Vehicles or Equipment
 - + Truck and Driver Related Safety Concerns
 - + Driver Qualifications
- Drug and Alcohol**
 - + Alcohol or Drug Regulations
- Cargo Tank Facility**
 - + Cargo Tank Facility
- Hazardous Materials**
 - + Markings and documentation
 - + Cargo Loading and securement
 - + Other
- Deceptive Business Practice**
 - + Owner Operator - Leasing Violations
 - + Other Commercial Complaints
- Operating Authority and Insurance**
 - + Operating Authority
 - + Insurance

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Incident Information

Incident Date

Incident Location

*Incident Description (Maximum 4000 Characters)

Complaint Detail

[Collapse All](#)

Truck Safety

- Hours of Service
 - Company requires that driver falsify log books.
 - Company requires that the driver exceed maximum driving time allowed by regulation.
 - Company requires driver to drive without taking the proper off-duty period.
- Unsafe Vehicles or Equipment
 - Commercial truck did not have required equipment.
 - Commercial truck did not perform proper inspection, repair and maintenance.
 - Carrier placed a commercial truck into operation without one or more parts/accessories necessary for safe operation as defined under Part 393.
 - Commercial truck carrying Division 1.1, 1.2 or 1.3 explosives was left unattended by the driver or a qualified representative.
 - Carrier failed to correct Out-Of-Service defects listed by driver in a driver/vehicle inspection report before the vehicle is operated again.
 - A commercial truck was seen operating outside of the applicable operating rules (improper lane change, speeding...etc.)
- Truck and Driver Related Safety Concerns
 - I witnessed a commercial driver who appeared to be under influence of alcohol or controlled substances
 - I witnessed a commercial driver who appears to be noticeably ill or fatigued
 - I witnessed a commercial truck following too close
 - I witnessed a commercial truck changing lanes improperly
 - I witnessed a commercial truck driving recklessly
 - I witnessed a commercial truck speeding
 - I witnessed a commercial truck failing to obey traffic control device
 - I witnessed a commercial truck passing improperly
 - I witnessed a commercial truck turning improperly
 - I witnessed a commercial truck failing to yield right of way
 - I witnessed a commercial driver using a hand held device (i.e. mobile phone or tablet)
 - I witnessed a commercial truck with unsafe or dangerous equipment
 - I witnessed Hazardous Material leaking from the vehicle
 - I witnessed a commercial driver's inability to communicate proficiently in English reasonably demonstrates difficulty interpreting road signs
 - General truck driver safety concern:
- Driver Qualifications
 - Company is in violation of hiring, investigating, testing, and records maintenance regulations.
 - Company is in violation of Commercial Drivers License (CDL) regulations.

Industry Truck Complaint Incident Information

Continued

- Company is using a driver with more than one commercial driver license.
- Company is using a driver that is under the age.
- Company is using a driver that does not possess a valid commercial driver license or commercial driver license permit.
- Company is using a driver that cannot read and speak the English language sufficiently to perform transportation duties.
- Company is using a driver that does not possess a valid commercial driver license endorsement (i.e. hazardous materials, double-triple trailer, etc.).
- Company is using a driver that does not possess a valid medical card.

Drug and Alcohol

- Alcohol or Drug Regulations

- Company is in violation of Drug/Alcohol usage regulations.
- Company is in violation of Drug/Alcohol testing regulations.
- Company is not conducting follow-up tests in accordance with the substance abuse professional's follow-up testing requirements.
- Driver failed or refused a drug or alcohol test or committed any other violation of the prohibition on the use of drugs or alcohol and is now driving for another motor carrier, but did not complete the DOT substance abuse professional's return-to-duty process.
- Previous motor carriers did not respond to the executed signed release for the required background check for DOT drug & alcohol testing.

Cargo Tank Facility

- Cargo Tank Facility

- Cargo tank facility has an expired registration.
- Cargo tank facility has an expired U or R stamp.
- The cargo tank or cargo tank motor vehicle design is not certified to conform to specifications requirements.
- Inspectors and/or testers not meeting the requirements of 49 CFR 180.409 are conducting hazardous materials inspections and tests.
- Cargo tank facility is doing work that requires a U or R stamp without a U or R stamp.
- A carrier is moving a leaking non-bulk package in violation of 49 CFR 174.50.
- Incomplete data in cargo tanks records.
- No or limited hazardous materials training program.

Hazardous Materials

- Markings and documentation

- Carrier/Shipper improperly marked and or labeled hazardous materials.
- Missing shipping papers, in compliance with 49 CFR 172.201
- Carrier does not have a valid motor carrier identification report and/ or hazardous materials permit application.

- Cargo Loading and securement

- Carrier/ Shipper improperly secured hazardous materials load.
- Carrier/ Shipper improperly segregated hazardous materials.
- Carrier/ Shipper is improperly loading and /or unloading hazardous materials.

- Other

- A hazardous material employee does not have sufficient training.
- Carrier has an outdated registration.
- I witnessed Hazardous Material leaking from the vehicle

Deceptive Business Practice

- Owner Operator – Leasing Violations

- Payment Period – Failure to remit payment to Owner Operator within 15 days after submission of delivery documents and other paperwork concerning a trip in the service of the authorized carrier
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- Copy of Rated Freight Bill – Failure to give the owner operator a copy of the rated freight bill
- Tariff or Other Document – Failure to permit the owner operator to view tariff or other document which rates and charges are computed
- Charge Back Items – Failure to permit owner operator to view documents which are necessary to determine validity of charges

- Other Commercial Complaints

- The company that contracted with me for this job has refused to pay for the services that we agreed to, and that I/my company performed

Incident Truck Complaint Incident Information Continued

Operating Authority and Insurance

- Operating Authority
 - Carrier is operating without required interstate operating authority or registration.
 - Carrier is operating without process agent / process service information on file.
- Insurance
 - Carrier is operating without required insurance / financial responsibility.

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Contact Information

I am filing this complaint on behalf of someone else

Complainant Information

*First Name <input type="text"/>	*Last Name <input type="text"/>
Email <input type="text"/>	*Phone <input type="text"/>
Address 1 <input type="text"/>	Address 2 <input type="text" value="Enter Suite #, Dept/Mail Stop #"/>
City <input type="text"/>	State <input type="text"/>
Zip <input type="text"/>	Country <input type="text"/>

I am an employee of the reported company


Privacy Option
Share the following portions of my complaint with the reported company:

Allegations only; or
 Allegations and my name, address, phone number, etc.

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Company Information

Complaint on Carrier(s)

	Company Name	U.S. DOT#	MC#	Address	City	State	Zip	Manual Entry
Delete	Test Trucking company							Y

Enter Company Information

* Name

Address

City State

Zip Country

Email Phone

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Industry Truck Complaint File Upload

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File Upload

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No file chosen *Description

Supporting Documents

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Industry Truck Complaint Review and Submit

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Review and Submit

Complaint ID:[Print](#)

Incident Information

Incident Date:
Incident Location:

Incident Description
This is a test complaint

Complaint Detail

Type	Category	Allegation
Truck Safety	Hours of Service	Company requires that the driver exceed maximum driving time allowed by regulation.
Operating Authority and Insurance	Insurance	Carrier is operating without required insurance / financial responsibility.

Contact Information

Name	Email	Phone	Address	
Test Record		617-494-2236		Complainant

I am an employee of the reported company: No

Privacy Option
Share the following portions of my complaint with the reported company:
Allegations only: Yes
Allegations and my name, address, phone number, etc.: No

Company Information

Company Name	U.S. DOT#	MC#	Address	City	State	Zip	Manual Entry
Test Trucking company							Y

Supporting Documents

None


Certification Statement

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CANCEL BACK SUBMIT

Industry Bus Complaint Type



Federal Motor Carrier Safety Administration

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INDUSTRY


Moving Complaint



Is your complaint about a moving company or broker that you hired for a personal household move across state lines? This may also involve the transportation of a personal automobile.

- Moving Company (Household Goods)
- Broker (Arranges Transportation)
- Deceptive Business Practice
- Operating Authority and Insurance


Truck Complaint



Is your complaint about some other violation of Federal Motor Carrier Safety Regulations, such as a truck being operated in an unsafe manner, or without the proper authority?

- Truck Safety
- Drug and Alcohol
- Cargo Tank Facility
- Hazardous Materials
- Deceptive Business Practice
- Operating Authority and Insurance

Bus Complaint



Is your complaint about a bus trip? For example, did you experience inadequate service, unsafe conditions, or a violation of the Americans with Disabilities Act during the ticketing process or trip itself?


- Bus Safety
- Drug and Alcohol
- Operating Authority and Insurance

IMPORTANT

If this is an emergency, please call 911 immediately. The NCCDB complaint system is intended only for investigation of past events.

CANCEL **NEXT**

Industry Bus Complaint Incident Information

**FMCSA**
Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB National Consumer Complaint Database

INDUSTRY->BUS FAQs-Help?

COMPLAINT TYPE | **INCIDENT INFORMATION** | CONTACT INFORMATION | COMPANY INFORMATION | FILE UPLOAD | REVIEW AND SUBMIT

Incident Information

*Incident Date Route/Job/Invoice #
Origin City Destination City
*Origin State *Destination State

If your complaint does not involve a specific move or route, check here to bypass the above section. E.g. This would apply if you are reporting a company who does not have authority to operate from FMCSA.

*Incident Description (Maximum 4000 Characters)

Complaint Detail

[Expand All](#)

Bus Safety

- + Hours of Service
- + Unsafe Vehicles or Equipment
- + Driver Qualifications
- + Unsafe Vehicle Operations
- + Driver Related Safety Concerns

Drug and Alcohol

- + Alcohol or Drug Regulations

Operating Authority and Insurance

- + Operating Authority
- + Insurance

IMPORTANT
If this is an emergency, please call 911 immediately. The NCCDB complaint system is intended only for investigation of past events.

Industry Bus Complaint Incident Information

Continued

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COMPLAINT TYPE | **INCIDENT INFORMATION** | CONTACT INFORMATION | COMPANY INFORMATION | FILE UPLOAD | REVIEW AND SUBMIT

Incident Information

*Incident Date: Route/Job/Invoice #:
Origin City: Destination City:
*Origin State: *Destination State:

If your complaint does not involve a specific move or route, check here to bypass the above section. E.g. This would apply if you are reporting a company who does not have authority to operate from FMCSA.

*Incident Description (Maximum 4000 Characters)

Complaint Detail

[Collapse All](#)

Bus Safety

- Hours of Service
 - Company requires that driver falsify log books.
 - Company requires that the driver exceed maximum driving time allowed by regulation.
 - Company requires driver to drive without taking the proper off-duty period.
- Unsafe Vehicles or Equipment
 - Commercial bus did not have required equipment.
 - Commercial bus did not perform proper inspection, repair and maintenance.
 - Carrier placed a commercial truck into operation without one or more parts/accessories necessary for safe operation as defined under Part 393.
 - Carrier failed to correct Out-Of-Service defects listed by driver in a driver/vehicle inspection report before the vehicle is operated again.
- Driver Qualifications
 - Company is in violation of hiring, investigating, testing, and records maintenance regulations.
 - Company is in violation of Commercial Drivers License (CDL) regulations.
 - Company is using a driver with more than one commercial driver license.
 - Company is using a driver that is under the age.
 - Company is using a driver that does not possess a valid commercial driver license or commercial driver license permit.
 - Company is using a driver that cannot read and speak the English language sufficiently to perform transportation duties.
 - Company is using a driver that does not possess a valid commercial driver license endorsement (i.e. hazardous materials, double-triple trailer, etc.).
 - Company is using a driver that does not possess a valid medical card.
- Unsafe Vehicle Operations
 - Vehicle engaged in ongoing operation while permitting passenger(s) forward of standee(s) line.
 - Vehicle engaged in ongoing operation with one or more aisle seat(s) not securely fastened or obstructing aisle when seat is unoccupied.
 - Vehicle engaged in ongoing operation while baggage or freight is unsecured to prevent driver's unrestricted operation or passenger/occupant access to emergency exit(s), or passenger protection from falling/displaced articles.
 - Vehicle being towed/pushed while passenger(s) on board.
 - Vehicle engaged in ongoing operation with one or more occupant(s) within closed body of bus and no exit/operation of exit.
 - Vehicle engaged in ongoing operation with unmarked/malfunctioning emergency exit(s).
 - Vehicle engaged in ongoing operation with exhaust fumes entering passenger compartment.
 - Vehicle engaged in ongoing operation with unsafe or dangerous equipment

Industry Bus Complaint Incident Information

Continued

General Vehicle Safety:

- Driver Related Safety Concerns

- I witnessed a commercial driver who appeared to be under influence of alcohol or controlled substances
- I witnessed a commercial driver who appears to be noticeably ill or fatigued
- I witnessed a commercial bus following too close
- I witnessed a commercial bus changing lanes improperly
- I witnessed a commercial bus driving recklessly
- I witnessed a commercial bus speeding
- I witnessed a commercial bus failing to obey traffic control device
- I witnessed a commercial bus passing improperly
- I witnessed a commercial bus turning improperly
- I witnessed a commercial bus failing to yield right of way
- I witnessed a commercial driver using a hand held device (i.e. mobile phone or tablet)
- I witnessed a driver's inability to communicate proficiently in English reasonably demonstrates difficulty interpreting road signs
- General driver safety concern:

Drug and Alcohol

- Alcohol or Drug Regulations

- Company is in violation of Drug/Alcohol usage regulations.
- Company is in violation of Drug/Alcohol testing regulations.
- Company is not conducting follow-up tests in accordance with the substance abuse professional's follow-up testing requirements.
- Driver failed or refused a drug or alcohol test or committed any other violation of the prohibition on the use of drugs or alcohol and is now driving for another motor carrier, but did not complete the DOT substance abuse professional's return-to-duty process.
- Previous motor carriers did not respond to the executed signed release for the required background check for DOT drug & alcohol testing.

Operating Authority and Insurance

- Operating Authority

- Carrier is operating without required interstate operating authority or registration.
- Carrier is operating without process agent / process service information on file.

- Insurance

- Carrier is operating without required insurance / financial responsibility.

IMPORTANT

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CANCEL

BACK

NEXT

Industry Bus Complaint Contact Information

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COMPLAINT TYPE | **INCIDENT INFORMATION** | **CONTACT INFORMATION** | **COMPANY INFORMATION** | **FILE UPLOAD** | **REVIEW AND SUBMIT**

Contact Information

I am filing this complaint on behalf of someone else


Complainant Information

*First Name	<input type="text"/>	*Last Name	<input type="text"/>
Email	<input type="text"/>	*Phone	<input type="text"/>
Address 1	<input type="text"/>	Address 2	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>
Zip	<input type="text"/>	Country	<input type="text"/>

Privacy Option
Share my complaint [allegations only] with the bus, limousine or motor coach company Yes No
Include my contact information [name, address, etc.] with the complaint, to the bus, limousine or motorcoach company Yes No


IMPORTANT
If this is an emergency, please call 911 immediately. The NCCDB complaint system is intended only for investigation of past events.

Industry Bus Complaint Company Information



FMCSA
Federal Motor Carrier Safety Administration

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National Consumer
Complaint Database

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COMPLAINT TYPE
INCIDENT INFORMATION
CONTACT INFORMATION
COMPANY INFORMATION
FILE UPLOAD
REVIEW AND SUBMIT

Company Information

Search Bus Companies
 Search All Companies

If you could not find the company you were looking for

Complaint on Carrier(s)

	Company Name	U.S. DOT#	MC#	Address	City	State	Zip	Manual Entry
Delete	Greyhound Lines Inc	44110	1515	350 N ST PAUL ST	Dallas	TX	75201-4201	

Search Result

	Company Name	U.S. DOT#	MC#	Address	City	State	Zip
Select	Greyhound Canada Transportation Ulc	14166	304126	877 GREYHOUND WAY SW	Calgary	AB	T3C 3V8
Select	Greyhound Lines Inc	44110	1515	350 N ST PAUL ST	Dallas	TX	75201-4201
Select	Greyhound Lines Mexico S De RI De Cv	2512737		JUAN ALDAMA SUR 924	Monterrey	NL	64000

IMPORTANT

If this is an emergency, please call 911 immediately. The NCCDB complaint system is intended only for investigation of past events.

Industry Bus Complaint File Upload

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COMPLAINT TYPE | INCIDENT INFORMATION | CONTACT INFORMATION | COMPANY INFORMATION | **FILE UPLOAD** | REVIEW AND SUBMIT

File Upload

If desired, please upload any supporting documents (DOC, DOCX, WPD, GIF, JPEG, JPG, PNG, PDF, TIF, TIFF, TXT, MPG, MOV, WMV, XLS, XLSX with size limit 10MB)


No file chosen *Description

Supporting Documents

IMPORTANT
If this is an emergency, please call 911 immediately. The NCCDB complaint system is intended only for investigation of past events.

Industry Bus Complaint Review and Submit

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COMPLAINT TYPE |
 INCIDENT INFORMATION |
 CONTACT INFORMATION |
 COMPANY INFORMATION |
 FILE UPLOAD |
 REVIEW AND SUBMIT

Review and Submit

Complaint ID: [Print](#)

Incident Information

Incident Date	Origin City	Origin State	Destination City	Destination State	Route/Job/Invoice #
5/29/2016		DC		CA	

Incident Description
This is a test complaint

Complaint Detail

Type	Category	Allegation
Bus Safety	Driver Qualifications	Company is using a driver that is under the age.

Contact Information

Name	Email	Phone	Address
Test Record		617-494-2236	Complainant

Privacy Option
 Share my complaint [allegations only] with the bus, limousine or motor coach company Yes
 Include my contact information [name, address, etc.] with the complaint, to the bus, limousine or motorcoach company Yes

Company Information

Company Name	U.S. DOT#	MC#	Address	City	State	Zip	Manual Entry
Greyhound Lines Inc	44110	1515	350 N ST PAUL ST	Dallas	TX	75201-4201	

Supporting Documents

None

Certification Statement

* By checking this box, I certify/understand that the statements and information I am submitting in support of this complaint (allegation) are, to the best of my knowledge, true, accurate and complete.

IMPORTANT
If this is an emergency, please call 911 immediately. The NCCDB complaint system is intended only for investigation of past events.

CANCEL
BACK
SUBMIT