

# NCCDB Complaint Entry Home Page

United States Department of Transportation About DOT | Our Activities | Areas of Focus

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login

## NCCDB | National Consumer Complaint Database

**Use the links below to start filing a complaint against a:**

- Moving company
- Bus company
- Truck company or cargo tank facility
- ELD Provider
- Medical review officer
- Substance abuse professional

Am I in the right place?

Learn about the complaint process

View All Frequently Asked Questions (FAQs)

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

## I am a...

**CONSUMER**

**This includes people who have:**

- Used interstate movers, brokers, or auto haulers
- Ridden a bus, limousine, or motor coach as a passenger
- Witnessed a safety problem on the road
- Received shipment of hazardous materials

[File a Complaint](#)

**DRIVER**

**This includes people who:**

- Operate trucks and buses
- Work for a truck or bus company in another role (e.g., safety manager)

[File a Complaint](#)

**INDUSTRY PROFESSIONAL**

**This includes people who have:**

- Bus and truck companies
- Shippers
- Insurers
- Brokers
- Owner-operators
- Consortia/third-party administrators
- Purchasers and users of cargo tanks

[File a Complaint](#)

**OTHER RESOURCES:**

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

**CONTACT:**

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

# Consumer Moving Complaint Type

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**


FAQs-Help ?

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

### Who is your complaint against?


Select the entity below against which you would like to file a complaint. Once you select the entity, you can select the type of complaint.

**Moving Company**




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.

**Truck Company**



Is your complaint about witnessing truck or driver safety concerns? This could include a truck speeding or driving recklessly, or a cargo tank leaking or not properly secured.

**Bus Company**



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 (ADA) during the trip or ticketing process.

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


**OTHER RESOURCES:**

- FMCSA Resources for Consumers
- Protect Your Move
- Look Before You Book

**CONTACT:**

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

# Consumer Moving Complaint Incident Information

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**

[FAQs-Help](#)

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

### Incident Information

Job Number <input type="text" value="Bill of Lading No. (Job #)"/>	Delivery Date <input type="text"/>
Pickup Date* <input type="text"/>	Destination Address <input type="text"/>
Origin Address <input type="text"/>	Destination City* <input type="text"/>
Origin City* <input type="text"/>	Destination Zip* <input type="text"/>
Origin Zip* <input type="text"/>	

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) \*

Please provide a concise statement describing the incident.

### Select All Allegations that Apply

[Expand All](#)

**Moving Company (Household Goods)**

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

**Moving Broker (Arranges Transportation)**

- + Shipment Documents
- + Estimates/Final Charges
- + Weighing
- + Hostage
- + Pickup and Delivery
- + Loss and Damage
- + Claim Settlement

# Consumer Moving Complaint Incident Information Continued

**Auto Hauler**

- + Pickup and Delivery
- + Loss and Damage
- + Claim Settlement

**Deceptive Business Practice**

- + Consumer Complaint

**Operating Authority and Financial Responsibility**


- + Operating Authority
- + 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](#) [NEXT](#)


 **OTHER RESOURCES:**

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

 **CONTACT:**

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

# Consumer Moving Complaint Incident Information Continued

Federal Motor Carrier Safety AdministrationNCCDB Login

**NCCDB | National Consumer Complaint Database**

[FAQs-Help?](#)

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [COMPANY INFORMATION](#) | [FILE UPLOAD](#) | [REVIEW AND SUBMIT](#)

**Incident Information**

Job Number	<input type="text"/>	Bill of Lading No. (Job #)	<input type="text"/>	Delivery Date	<input type="text"/>
Pickup Date*	<input type="text"/>	Origin Address	<input type="text"/>	Destination Address	<input type="text"/>
Origin City*	<input type="text"/>	Origin City*	<input type="text"/>	Destination City*	<input type="text"/>
Origin Zip*	<input type="text"/>	Origin Zip*	<input type="text"/>	Destination Zip*	<input type="text"/>
			<input type="text" value="United States"/>		<input type="text" value="United States"/>

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) \***

Please provide a concise statement describing the incident.

**Select All Allegations that Apply**

[Collapse All](#)

**Moving Company (Household Goods)**

- Shipment Documents

- Broker or Moving company did not provide me with a copy of the "Your Rights And Responsibilities When You Move" pamphlet and the "Ready to Move" brochure.
- 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 me 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.

# Consumer Moving Complaint Incident Information

## Continued

- 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: \$
  - Broker provided estimates that are much lower than actual charges from Moving Company.
  - Weighing
    - Moving company did not provide an opportunity for me to observe the weighing
    - I 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 my 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 me of a delay in picking up my goods.  
Scheduled pickup date:   
Actual pickup date:
    - I was not notified of a delay in the delivery of my goods  
Scheduled delivery date:   
Actual delivery date:
  - Loss and Damage
    - There were significant loss and/or damage to the contents of the shipment.  
Estimated amount of loss and damage: \$
  - Claim Settlement
    - Moving Company did not offer me 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 complaint involved improper insurance coverage for transportation of personal automobile, motorcycle, or machinery with combustible engines
- Moving Broker (Arranges Transportation)**
- Shipment Documents
    - Broker or Moving company did not provide me with a copy of the "Your Rights And Responsibilities When You Move" pamphlet and the "Ready to Move" brochure.
    - 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 me 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.

# Consumer Moving Complaint Incident Information

## Continued

- 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: \$
- Broker provided estimates that are much lower than actual charges from Moving Company.
- Weighing
  - Moving company did not provide an opportunity for me to observe the weighing
  - I 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 my 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 me of a delay in picking up my goods.  
Scheduled pickup date:   
Actual pickup date:
  - I was not notified of a delay in the delivery of my goods  
Scheduled delivery date:   
Actual delivery date:
- Loss and Damage
  - There were significant loss and/or damage to the contents of the shipment.  
Estimated amount of loss and damage: \$
- Claim Settlement
  - Moving Company did not offer me a claim settlement.
  - Moving Company is not responding to a filed complaint or an inquiry.
  - Moving Company refuses to participate in the arbitration process.

### Auto Hauler

- Pickup and Delivery
  - Auto Hauler did not notify me of a delay in picking up my goods.  
Scheduled pickup date:   
Actual pickup date:
  - I was not notified of a delay in the delivery of my goods  
Scheduled delivery date:   
Actual delivery date:
- Loss and Damage
  - There were significant loss and/or damage to the contents of the shipment.  
Estimated amount of loss and damage: \$
- Claim Settlement
  - Auto Hauler did not offer me a claim settlement.
  - Auto Hauler is not responding to a filed complaint or an inquiry.
  - Auto Hauler refuses to participate in the arbitration process.

# Consumer Moving Complaint Incident Information

## Continued

### Deceptive Business Practice

- Consumer Complaint

- False Advertising by a Mover (motor carrier)
- Household Goods Broker misrepresenting itself as a Mover. Website didn't indicate Broker status nor did Broker mention it when arranging the move
- Auto Hauler Broker misrepresenting itself as a Mover. Website didn't indicate Broker status nor did Broker mention it when arranging the transport
- Mover, in addition to valuation, sold or procured an insurance policy that was not genuine
- Mover demanded payment for services not provided
- Auto Hauler demanded payment for services not provided
- Broker failed to return the deposit when a move was cancelled within timeframe specified in their policy.
- Broker failed to provide a list of carriers (Moving Companies) they use on their website/advertisements.

### Operating Authority and Financial Responsibility

- Operating Authority

- Carrier is operating without required interstate operating authority or registration.
- Broker using carriers (Moving Companies) that don't have operating authority.

- Financial Responsibility

- Carrier is operating without required insurance

**IMPORTANT**

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

CANCEL

BACK

NEXT



**OTHER RESOURCES:**

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




**CONTACT:**

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



# Consumer Moving Complaint Contact Information

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**

[FAQs-Help?](#)

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

---

### Contact Information

Providing us with your email or mailing address in addition to your name and phone numbers helps us effectively investigate your complaint.

I am filing this complaint on behalf of someone else

#### Complainant Information

Copy Pickup Address    Copy Delivery Address

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"/>

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

Company Type  Company Name

US DOT #

---

#### 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 Incident Information 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

---

**IMPORTANT**

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


#### OTHER RESOURCES:

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

#### CONTACT:

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

# Consumer Moving Complaint Company Information

 **FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login

**NCCDB | National Consumer Complaint Database**

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

FAQs-Help

### Company Information

The **Search** function below will search for the company(s) for your complaint. If your company does not show up on the list, it will presents you the function to "Enter Company Information".

#### Complaint against Company

	Company Name	U. S. DOT#	MC#	Address	City	State	Zip	Manual Entry
<a href="#">Delete</a>	Test Company							Y

Search Moving Companies     Search All Companies

Test Company

If you could not find the company, you can add a new company.

#### Enter Company Information

Name\*

Address

City  State

Zip  Country

Email  Phone

**No Match Record Found**

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


**OTHER RESOURCES:**

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

**CONTACT:**

You can also call 1-888-DOT-SAFT (1-888-368-7238) from 8:00 a.m.-9:00 p.m. Eastern Time Monday-Friday to file a complaint

# Consumer Moving Complaint File Upload

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**

FAQs-Help ?

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [COMPANY INFORMATION](#) | **FILE UPLOAD** | [REVIEW AND SUBMIT](#)

**File Upload**

If desired, please upload any supporting documents. Acceptable Document Types:  
DOC, DOCX, XLS, XLSX, GIF, JPEG, JPG, PDF, TIF, TIFF, TXT, WPD, ZIP, HTML, HTM, MSG, MP4, RTF, PNG, MPG, WMV and MOV (size limit 20MB)

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.


**OTHER RESOURCES:**

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

**CONTACT:**

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

# Consumer Moving Complaints Review and Submit


FMCSA  
Federal Motor Carrier Safety Administration
NCCDB Login |

NCCDB | National Consumer Complaint Database
FAQs-Help ?

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

**Review and Submit** Complaint ID: \_\_\_\_\_

---

**Incident Information**

Address Type	Address	City	State	Zip	Country
Origin	78 B street	anywherer	ME	90201	US
Destination		Everywhere	OH	90210	US

Bill of Lading Number (Job #): 123456 Pickup Date: 1/7/2022 Delivery Date: 1/10/2022

Incident Description  
test

**Selected Allegations**

Type	Category	Allegation
Operating Authority and Financial Responsibility	Operating Authority	Carrier is operating without required interstate operating authority or registration.

**Contact Information**

Name	Email	Phone	Address	
Test Record		617-555-1212		Complainant

Your company information  
Company Type: \_\_\_\_\_ Company Name: \_\_\_\_\_  
US DOT #: \_\_\_\_\_

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 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**

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

CANCEL
BACK
SUBMIT

**OTHER RESOURCES:**

- FMCSA Resources for Consumers
- Protect Your Move
- Look Before You Book

**CONTACT:**

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

# Consumer Truck Complaint Type

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**


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

FAQs-Help ?

### Who is your complaint against?


Select the entity below against which you would like to file a complaint. Once you select the entity, you can select the type of complaint.

Moving Company




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.

Truck Company



Is your complaint about witnessing truck or driver safety concerns? This could include a truck speeding or driving recklessly, or a cargo tank leaking or not properly secured.

Bus Company



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 (ADA) during the trip or ticketing process.

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

**OTHER RESOURCES:**

- FMCSA Resources for Consumers
- Protect Your Move
- Look Before You Book

**CONTACT:**

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

## Consumer Truck Complaint Incident Information

**NCCDB | National Consumer Complaint Database**

[FAQs-Help](#)

- COMPLAIN TYPE**
- INCIDENT INFORMATION**
- CONTACT INFORMATION
- COMPANY INFORMATION
- FILE UPLOAD
- REVIEW AND SUBMIT

**Incident Information**

Incident Date

Incident Location

Incident Description (Maximum 4000 Characters) \*

Please provide a concise statement describing the incident.

**Select All Allegations that Apply**

[Expand All](#)

- Truck Safety**
  - + Truck and Driver Related Safety Concerns
- Cargo Tank Facility**
  - + Cargo Tank Facility
- Hazardous Materials**
  - + Markings and documentation
  - + Cargo Loading and securement
  - + Other
- Operating Authority and Financial Responsibility**
  - + Operating Authority
  - + Financial Responsibility
- Property Broker (Arranges Transportation)**
  - + Shipment Documents
  - + Estimates/Final Charges
  - + Weighing
  - + Hostage
  - + Pickup and Delivery
  - + Loss and Damage
  - + Claim Settlement

**IMPORTANT**

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

- 
- 
- 

**OTHER RESOURCES:**

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




**CONTACT:**

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

# Consumer Truck Complaint Incident Information

## Continued

 **FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [COMPANY INFORMATION](#) | [FILE UPLOAD](#) | [REVIEW AND SUBMIT](#) [FAQs/Help](#)

---

**Incident Information**

Incident Date

Incident Location

Incident Description (Maximum 4000 Characters) \*

Please provide a concise statement describing the incident.

**Select All Allegations that Apply**

[Collapse All](#)

**Truck Safety**

- 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
  - General truck driver safety concern:

**Cargo Tank Facility**

- Cargo Tank Facility
  - Cargo tank facility has an expired registration.
  - Leaking cargo tank.
  - Incomplete data in cargo tanks records.

**Hazardous Materials**

- Markings and documentation
  - Shipper failed to provide proper shipping papers.
  - Carrier/Shipper improperly marked and or labeled hazardous materials.
- 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.

# Consumer Truck Complaint Incident Information

## Continued

Other  
 I witnessed Hazardous Material leaking from the vehicle

**Operating Authority and Financial Responsibility**

**Operating Authority**

Carrier is operating without required interstate operating authority or registration.  
 Broker using carriers (Moving Companies) that don't have operating authority.

**Financial Responsibility**

Carrier is operating without required insurance

**Property Broker (Arranges Transportation)**

**Shipment Documents**

Broker or Moving company did not provide me with a copy of the "Your Rights And Responsibilities When You Move" pamphlet and the "Ready to Move" brochure.  
 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 me 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: \$   
 Broker provided estimates that are much lower than actual charges from Moving Company.

**Weighing**

Moving company did not provide an opportunity for me to observe the weighing  
 I 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 my 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 me of a delay in picking up my goods.  
Scheduled pickup date:   
Actual pickup date:   
 I was not notified of a delay in the delivery of my goods.  
Scheduled delivery date:   
Actual delivery date:

**Loss and Damage**

There were significant loss and/or damage to the contents of the shipment.  
Estimated amount of loss and damage: \$

**Claim Settlement**

Moving Company did not offer me a claim settlement.  
 Moving Company is not responding to a filed complaint or an inquiry.  
 Moving Company refuses to participate in the arbitration process.

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


**OTHER RESOURCES:**

- ▶ FMCSA Resources for Consumers
- ▶ Protect Your Move
- ▶ Look Before You Book

**CONTACT:**  
You can also call 1-888-DOY-SMFT (1-888-365-7266)  
Hours: 9:00 a.m. - 5:00 p.m. Eastern Time  
Monday-Friday to file a complaint



# Consumer Truck Complaint Contact Information

NCCDB Login

**NCCDB | National Consumer Complaint Database**

[FAQs-Help](#)

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | **[CONTACT INFORMATION](#)** | [COMPANY INFORMATION](#) | [FILE UPLOAD](#) | [REVIEW AND SUBMIT](#)

**Contact Information**

Providing us with your email or mailing address in addition to your name and phone numbers helps us effectively investigate your complaint.

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" value="v"/>
Zip	<input type="text"/>	Country	<input type="text" value="v"/>

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.

**IMPORTANT**

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


**OTHER RESOURCES:**

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

**CONTACT:**

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

# Consumer Truck Complaint Company Information

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

---

**NCCDB | National Consumer Complaint Database**

[FAQs-Help?](#)

---

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | **[COMPANY INFORMATION](#)** | [FILE UPLOAD](#) | [REVIEW AND SUBMIT](#)

---

**Company Information**

The Search function below will search for the company(s) for your complaint. If your company does not show up on the list, it will presents you the function to "Enter Company Information".

If you could not find the company you were looking for

**No Match Record Found**

**Enter Company Information**

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

---

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

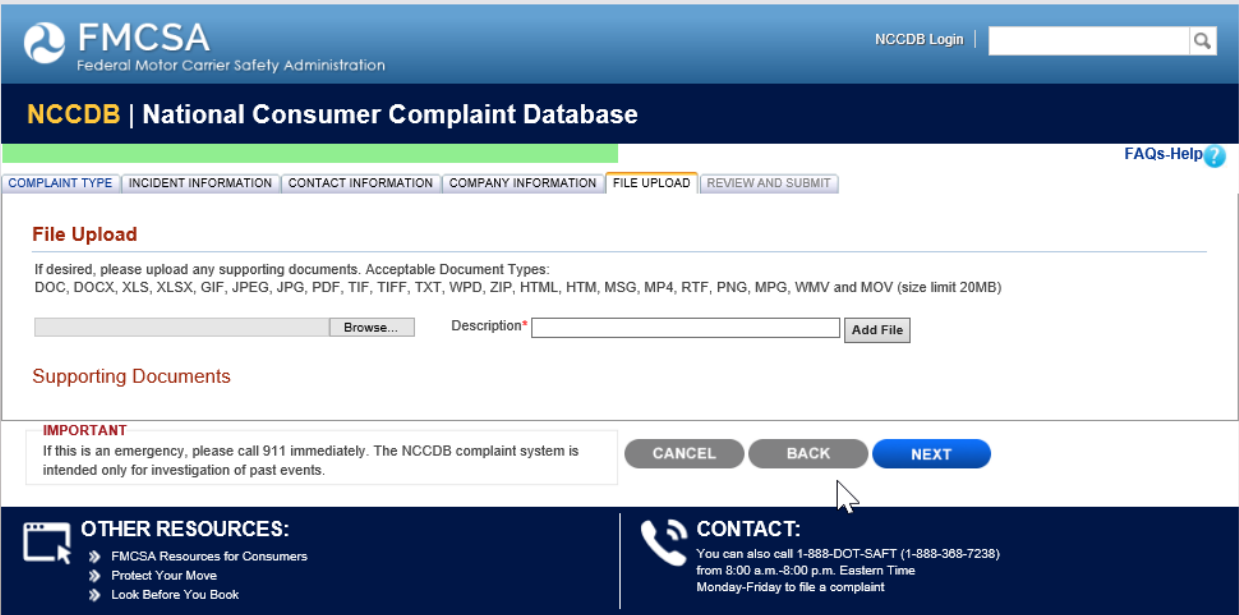
---

**OTHER RESOURCES:**

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


**CONTACT:**  
You can also call 1-888-DOT-SAFT (1-888-388-7238) from 8:00 a.m.-8:00 p.m. Eastern Time Monday-Friday to file a complaint


# Consumer Truck Complaint File Upload



The screenshot shows the NCCDB (National Consumer Complaint Database) interface. At the top left is the FMCSA logo (Federal Motor Carrier Safety Administration). At the top right is the 'NCCDB Login' field with a search icon. Below the header is a navigation bar with 'NCCDB | National Consumer Complaint Database' and a 'FAQs-Help' link. A breadcrumb trail includes 'COMPLAINT TYPE', 'INCIDENT INFORMATION', 'CONTACT INFORMATION', 'COMPANY INFORMATION', 'FILE UPLOAD', and 'REVIEW AND SUBMIT'. The 'FILE UPLOAD' step is active. The 'File Upload' section contains instructions on acceptable document types (DOC, DOCX, XLS, XLSX, GIF, JPEG, JPG, PDF, TIF, TIFF, TXT, WPD, ZIP, HTML, HTM, MSG, MP4, RTF, PNG, MPG, WMV, and MOV) with a 20MB size limit. It features a file selection area with a 'Browse...' button, a 'Description\*' text input, and an 'Add File' button. Below this is a 'Supporting Documents' section. An 'IMPORTANT' notice states: 'If this is an emergency, please call 911 immediately. The NCCDB complaint system is intended only for investigation of past events.' At the bottom of the main content area are three buttons: 'CANCEL', 'BACK', and 'NEXT'. The footer is split into two sections: 'OTHER RESOURCES' with links to 'FMCSA Resources for Consumers', 'Protect Your Move', and 'Look Before You Book'; and 'CONTACT' with the phone number 1-888-DOT-SAFT (1-888-368-7238) and operating hours from 8:00 a.m. to 8:00 p.m. Eastern Time, Monday-Friday.

# Consumer Truck Complaint Review and Submit


NCCDB Login

**NCCDB | National Consumer Complaint Database**
FAQs-Help 

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

**Review and Submit**
Complaint ID: \_\_\_\_\_

---

**Incident Information**

Incident Date: 1/7/2022  
 Incident Location: anywhere

Incident Description  
 Test

**Selected Allegations**

Type	Category	Allegation
Truck Safety	Truck and Driver Related Safety Concerns	I witnessed a commercial truck driving recklessly

**Contact Information**

Name	Email	Phone	Address	
Test Person		017-555-2244		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 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**  
 If this is an emergency, please call 011 immediately. The NCCDB complaint system is intended only for investigation of past events.

CANCEL
BACK
SUBMIT

**OTHER RESOURCES:**

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

**CONTACT:**

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

# Consumer Bus Complaint Type

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**


FAQs-Help ?

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

### Who is your complaint against?


Select the entity below against which you would like to file a complaint. Once you select the entity, you can select the type of complaint.

Moving Company




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.

Truck Company



Is your complaint about witnessing truck or driver safety concerns? This could include a truck speeding or driving recklessly, or a cargo tank leaking or not properly secured.

Bus Company



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 (ADA) during the trip or ticketing process.

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


**OTHER RESOURCES:**

- FMCSA Resources for Consumers
- Protect Your Move
- Look Before You Book

**CONTACT:**

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

# Consumer Bus Complaint Incident Information

 **Federal Motor Carrier Safety Administration**

NCCDB Login |

---

**NCCDB | National Consumer Complaint Database**

[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) \*

Please provide a concise statement describing the incident.

Additional Information (please answer the following questions) \*

Was at least 48 hours advanced notice provided to the carrier about the need for accessible transportation?  Yes  No  N/A

Did the bus have an elevated passenger deck above a baggage compartment?  Yes  No

Please indicate the type of mobility device being used:  Wheelchair  Other type of mobility device  N/A

**Select All Allegations that Apply**

[Expand All](#)

**Americans with Disabilities Act (ADA)**

- + Complaint Against Carrier
- + Complaint About Driver / Employee
- + Complaint About Vehicle
- + Complaint Involving Service Animal

**Bus Safety**

- + Unsafe Vehicle Operations
- + Driver Related Safety Concerns

**Bus Service**

- + Discrimination
- + Ticket / Route
- + Terminal
- + Vehicle
- + Baggage Handling
- + Lost Baggage

**Operating Authority and Financial Responsibility**

- + Operating Authority
- + Financial Responsibility

---

**IMPORTANT**

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

---

**OTHER RESOURCES:**

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

**CONTACT:**

You can also call 1-888-DOY-SAPT (1-888-365-7238) from 8:00 a.m.-8:00 p.m. Eastern Time Monday-Friday to file a complaint

# Consumer Bus Complaint Incident Information

## Continued

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB | National Consumer Complaint Database

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) \*

Please provide a concise statement describing the incident.

**Additional Information** (please answer the following questions) \*

Was at least 48 hours advanced notice provided to the carrier about the need for accessible transportation?  Yes  No  N/A

Did the bus have an elevated passenger deck above a baggage compartment?  Yes  No

Please indicate the type of mobility device being used:  Wheelchair  Other type of mobility device  N/A

**Select All Allegations that Apply**

[Collapse All](#)

**Americans with Disabilities Act (ADA)**

- Complaint Against Carrier
  - Denial of OTRB transportation due to a disability, no reasonable effort to provide accessible OTRB transportation or equivalent service.
  - Non-employees were required to provide assistance to an individual with a disability.
  - Individual with a disability was required to reschedule the trip at a different time than requested.
  - Failure to provide equivalent reservation services to an individual with a disability.
  - Failure to provide the required accessible service during any portion of a trip when more than one OTRB company provided transportation during the trip and the entire trip was included in a single ticket purchase.
- Complaint About Driver / Employee
  - Driver or employee denied accessible transportation to individual with a disability.
  - Driver or employee failed to provide boarding or other necessary assistance to individual with a disability.
  - Driver or employee was unable to operate lift and mobility device securement equipment, or mishandled or improperly stored mobility device.
  - Driver or employee failed to provide reasonable accommodation and assistance to an individual with a disability during a rest stop or an intermediate stop.
- Complaint About Vehicle
  - Lift or mobility device securement equipment was broken, malfunctioning, or could not accommodate the mobility device.
- Complaint Involving Service Animal
  - Denial of transportation due to use of service animal.
  - Other service animal complaint

# Consumer Bus Complaint Incident Information

## Continued

### Bus Safety

#### - 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
- General vehicle safety concern:

#### - 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 who operated a bus beyond the allowable hours of service
- I witnessed a driver's inability to communicate proficiently in English reasonably demonstrates difficulty interpreting road signs
- General driver safety concern:

### Bus Service

#### - Discrimination

- Denial of seating based upon race, color, creed, or national origin.
- Ticket does not contain printed notice that seating is without regard to race, color, creed, or national origin.
- Facility is, operated, arranged or maintained in a way that denies or separates services based upon race, color, creed, or national origin.
- Terminal facility does not post a Public Notice of the full text of non-discriminatory regulations.

#### - Ticket / Route

- During normal business hours at terminal or station, carrier did not provide information as to schedules, tickets, fares, baggage, and other carrier services.
- Carrier's ticket facility did not provide automated, over-the-phone information of current bus schedules and fares.
- Carrier does not provide refund of unused ticket(s) where they were sold, within 30 days.
- Scheduled bus (other than commuter service) departed from terminal/station prior to public announcement.
- Carrier changed existing regular-route schedule without prominent and sufficient advanced notice.
- Carrier (except in commuter service) does not provide sufficient bus service to meet increased passenger loads on weekends, or during seasonal or holiday demand.

#### - Terminal

- Terminal / Station was not adequately / regularly patrolled.
- Closed Terminal / Station had no public telephone, outside lighting, posted schedule information, overhead shelter, information on local accommodations or telephone numbers for local taxi service and police.



# Consumer Bus Complaint Incident Information

## Continued

### - Vehicle

- Bus temperature unreasonable, bus and/or bus restroom unclean.
- Bus and/or driver not visibly identifiable by name or number.
- Carrier did not ensure that one or more passengers, the driver or other employee was prohibited from smoking while on a vehicle transporting passengers during scheduled or special service in interstate commerce.

### - Baggage Handling

- Carrier offered no provision for passenger to pay additional charge to declare checked baggage value in excess of the limited amount.
- Carrier does not provide clear/adequate notice of opportunity to declare excess value beyond free baggage allowance limitation.
- Carrier does not provide opportunity to declare excess value at baggage checking counter or at side of bus, up to 15 minutes prior to scheduled boarding time.
- Carrier did not issue baggage receipt for checked baggage.
- Carrier did not transport bags on same schedule, although bags were checked at least 30 minutes before departure.
- Carrier did not make checked baggage available within 30 minutes after arrival and refused delivery of such baggage to a local address at carrier's expense.
- Carrier did not provide secured, attended area for checked baggage.
- Carrier did not post articles exempted by Secretary of Transportation, near baggage check-in area.
- Carrier refused all liability for checked baggage containing only non-exempt items.
- Carrier refused to designate checked baggage, which could not be located after one hour of arrival at destination, and refused to furnish passenger with appropriate tracing form.
- Carrier made no form available to trace lost/misplaced checked baggage at ticket or baggage check window.
- Carrier offered no duplicate of lost/misplaced luggage tracing form.

### - Lost Baggage

- Carrier published tariff provisions limiting their liability for loss or damage to checked baggage at less than \$250.00.
- Carrier published a maximum liability value of less than \$1,000.
- Carrier refused to process baggage which was lost for 15 days, as a claim.
- Tracing form was provided to carrier 60 days earlier, but carrier refused to resolve by way of either a firm offer of settlement, or a written explanation of denial of claim.
- Carrier refused to accept passenger's tracing form regarding lost/misplaced unchecked baggage.
- Carrier refused to forward unchecked baggage to terminal/station nearest address on tracing form.
- Carrier refused to notify passenger that lost/misplaced unchecked baggage will be held on a will-call basis.

### Operating Authority and Financial Responsibility

#### - Operating Authority

- Carrier is operating without required interstate operating authority or registration.
- Broker using carriers (Moving Companies) that don't have operating authority.

#### - Financial Responsibility

- Carrier is operating without required insurance

#### IMPORTANT

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

CANCEL

BACK

NEXT



#### OTHER RESOURCES:


- FMCSA Resources for Consumers
- Protect Your Move
- Look Before You Book



#### CONTACT:

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

# Consumer Bus Complaint Contact Information

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**

[FAQs-Help?](#)

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [COMPANY INFORMATION](#) | [FILE UPLOAD](#) | [REVIEW AND SUBMIT](#)

### Contact Information

Providing us with your email or mailing address in addition to your name and phone numbers helps us effectively investigate your complaint.

I am filing this complaint on behalf of someone else

Complainant Information	
First Name*	Last Name*
Email	Phone*
Address 1	Address 2 <small>Enter Suite #, Dept/Mail Stop #</small>
City	State <small>▼</small>
Zip	Country <small>▼</small>

**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.


**OTHER RESOURCES:**


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

**CONTACT:**

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

# Consumer Bus Complaint Company Information


NCCDB Login

**NCCDB | National Consumer Complaint Database**
FAQs-Help 

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

### Company Information

The Search function below will search for the company(s) for your complaint. If your company does not show up on the list, it will presents you the function to "Enter Company Information".

#### Complaint against Company

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

If your complaint has multiple companies [Add Another Company](#)

#### Search Result

	Company Name	U. S. DOT#	MC#	Address	City	State	Zip
<a href="#">Select</a>	Greyhound Canada Transportation Ulc	14186	304128	610 BAY STREET	Toronto	ON	M5G 1M5
<a href="#">Select</a>	Greyhound Lines Inc	44110	1515	350 N ST PAUL ST	Dallas	TX	75201-4201
<a href="#">Select</a>	Greyhound Lines Mexico S De RI De Cv	2512737		CARRETERA A COLOMBIA 171	Escobedo	NL	68054

**IMPORTANT**  
If this is an emergency, please call 611 immediately. The NCCDB complaint system is intended only for investigation of past events.

CANCEL
BACK
NEXT

**OTHER RESOURCES:**

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

**CONTACT:**

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

# Consumer Bus Complaint File Upload

## NCCDB | National Consumer Complaint Database

[FAQs-Help?](#)

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [COMPANY INFORMATION](#) | **[FILE UPLOAD](#)** | [REVIEW AND SUBMIT](#)

### File Upload

If desired, please upload any supporting documents. Acceptable Document Types:  
DOC, DOCX, XLS, XLSX, GIF, JPEG, JPG, PDF, TIF, TIFF, TXT, WPD, ZIP, HTML, HTM, MSG, MP4, RTF, PNG, MPG, WMV and MOV (size limit 20MB)

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.



#### OTHER RESOURCES:


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



#### CONTACT:

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

# Consumer Bus Complaint Review and Submit


FMCSA  
Federal Motor Carrier Safety Administration
NCCDB Login |

**NCCDB | National Consumer Complaint Database**
FAQs-Help?

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

Complaint ID: \_\_\_\_\_

---

**Review and Submit**

**Incident Information**

Incident Date	Origin City	Origin State	Destination City	Destination State	Route/Job/Invoice #
1/7/2022		CT		AZ	

Incident Description  
Test

**Selected Allegations**

Type	Category	Allegation
Operating Authority and Financial Responsibility	Operating Authority	Carrier is operating without required interstate operating authority or registration.
Operating Authority and Financial Responsibility	Operating Authority	Broker using carriers (Moving Companies) that don't have operating authority.

**Contact Information**

Name	Email	Phone	Address
Andrew Jackson		817-555-1212	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

**OTHER RESOURCES:**

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

**CONTACT:**

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.