

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

Industry 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.

Medical Review Officer



Is your complaint about a medical review officer (MRO)? This includes complaints about information recorded by a MRO in the FMCSA Drug and Alcohol Clearinghouse.

Electronic Log Device Provider



Is your complaint about an ELD provider? This can include complaints about devices you believe do not adhere to the minimum requirements of the ELD rule.

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

Industry Moving Complaint Incident 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](#)

Incident Information

Job Number (Bill of Lading No. (Job #))

Pickup Date* Delivery Date

Origin Address Destination Address

Origin City* Destination City*

Origin Zip* United States Destination Zip* 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

[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

Moving 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 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-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 Incident Information

Continued


Federal Motor Carrier Safety Administration
NCCDB Login |

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[FAQs-Help](#)

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

Incident Information

Job Number <input style="width: 100%;" type="text"/> Pickup Date* <input style="width: 100%;" type="text"/> Origin Address <input style="width: 100%;" type="text"/> Origin City* <input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/> Origin Zip* <input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/>	Delivery Date <input style="width: 100%;" type="text"/> Destination Address <input style="width: 100%;" type="text"/> Destination City* <input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/> Destination Zip* <input style="width: 100%;" type="text"/> <input style="width: 100%;" type="text"/>
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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) *

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 the customer 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 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: \$

- Broker provided estimates that are much lower than actual charges from Moving Company.

Industry Moving Complaint Incident Information

Continued

- 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:

- 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

Moving Broker (Arranges Transportation)

- Shipment Documents

- Broker or Moving company did not provide the customer 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 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: \$

Industry Moving Complaint Incident Information

Continued

- Broker provided estimates that are much lower than actual charges from Moving Company.
- 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:
- 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

Industry Moving Complaint Incident Information Continued

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 Financial Responsibility

- Operating Authority

- Carrier is operating without required interstate operating authority or registration.
- Carrier is operating without a valid process agent

- Financial Responsibility

- Carrier is operating without required insurance
- Carrier is operating without required trust fund or bond
- Trust fund or bond company is not solvent (49 CFR Part 387 Subpart C)
- Process agent is not responsive

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

Industry 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

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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

Industry 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".

Search Moving Companies Search All Companies

If you could not find the company you were looking for

No Match Record Found

Enter Company Information

Name*

Address

City State

Zip Country

Email Phone


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

Industry 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

Industry Moving 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](#)

Review and Submit

Complaint ID:

Incident Information

Address Type	Address	City	State	Zip	Country
Origin		Qnywhere	AK	90210	US
Destination		Everywhere	CT	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
Moving Company (Household Goods)	Weighing	Moving company did not provide an opportunity for the customer to observe the weighing.
Moving Company (Household Goods)	Weighing	The customer asked the mover to re-weigh the shipment and they refused.
Moving Company (Household Goods)	Weighing	Moving company would not adjust charges based on re-weighing of the shipment.

Contact Information

Name	Email	Phone	Address
Ben Franklin		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 Trucking							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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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.-3:00 p.m. Eastern Time Monday-Friday to file a complaint.

Industry Truck 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.

<p><input checked="" type="radio"/> Moving Company</p>  <p>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.</p>	<p><input checked="" type="radio"/> Truck Company</p>  <p>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.</p>	<p><input type="radio"/> Bus Company</p>  <p>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.</p>
<p><input type="radio"/> Medical Review Officer</p>  <p>Is your complaint about a medical review officer (MRO)? This includes complaints about information recorded by a MRO in the FMCSA Drug and Alcohol Clearinghouse.</p>	<p><input type="radio"/> Electronic Log Device Provider</p>  <p>Is your complaint about an ELD provider? This can include complaints about devices you believe do not adhere to the minimum requirements of the ELD rule.</p>	

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

Industry Truck Complaint Incident 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

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**
 - Hours of Service
 - Unsafe Vehicles or Equipment
 - Truck and Driver Related Safety Concerns
 - Driver Qualifications
- Drug and Alcohol**
 - Alcohol or Drug Regulations
 - Drug and Alcohol Clearinghouse
- 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 Financial Responsibility**
 - Operating Authority
 - Financial Responsibility
- Property 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

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-SAFT (1-888-385-7238) from 9:00 a.m. - 4:00 p.m. Eastern Time Monday-Friday to file a complaint.

Industry 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) *

Test

Select All Allegations that Apply

[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 303.
 - 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

Industry Truck Complaint Incident Information Continued

- 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.
- 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.

- Drug and Alcohol Clearinghouse

- Employer did not receive limited consent from the driver before conducting a limited query in the Clearinghouse.
- Employer did not report negative RTD test result to the Clearinghouse.
- Employer did not report the completion of follow-up testing plan to the Clearinghouse.

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.

Industry Truck Complaint Incident Information

Continued

- 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
- 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

- 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

Operating Authority and Financial Responsibility

- Operating Authority

- Carrier is operating without required interstate operating authority or registration.
- Carrier is operating without a valid process agent

- Financial Responsibility

- Carrier is operating without required insurance
- Carrier is operating without required trust fund or bond
- Trust fund or bond company is not solvent (49 CFR Part 387 Subpart C)
- Process agent is not responsive

Property Broker (Arranges Transportation)

- Shipment Documents

- Broker or Moving company did not provide the customer 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 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: \$

- Broker provided estimates that are much lower than actual charges from Moving Company.

- 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.

Incident Truck Complaint Incident Information Continued

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:

- 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

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 (1-888-388-7238)
from 8:00 a.m.-8:00 p.m. Eastern Time
Monday-Friday to file a complaint

Industry Truck Complaint Contact Information

NCCDB Login |

NCCDB | National Consumer Complaint DatabaseFAQs-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"/>
Email	<input type="text"/>
Address 1	<input type="text"/>
City	<input type="text"/>
Zip	<input type="text"/>
Last Name*	<input type="text"/>
Phone*	<input type="text"/>
Address 2	<input type="text"/>
State	<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.

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

Industry Truck 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".

Search Moving Companies Search All Companies

If you could not find the company you were looking for

No Match Record Found

Enter Company Information

Name*

Address

City State

Zip Country

Email Phone


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

Industry Truck 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

Industry Truck 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

Review and Submit

Complaint ID:

Incident Information

Incident Date: 1/10/2022
 Incident Location: Boston

Incident Description
 Test

Selected Allegations

Type	Category	Allegation
Drug and Alcohol	Alcohol or Drug Regulations	Company is in violation of Drug/Alcohol usage regulations.
Drug and Alcohol	Alcohol or Drug Regulations	Company is in violation of Drug/Alcohol testing regulations.
Drug and Alcohol	Alcohol or Drug Regulations	Company is not conducting follow-up tests in accordance with the substance abuse professional's follow-up testing requirements.
Drug and Alcohol	Alcohol or Drug Regulations	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.
Drug and Alcohol	Alcohol or Drug Regulations	Previous motor carriers did not respond to the executed signed release for the required background check for DOT drug & alcohol testing.

Contact Information

Name	Email	Phone	Address	
Andrew Jackson		617-555-1212		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 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-DOOT-SAFT (1-888-368-7238) from 8:00 a.m.-8:00 p.m. Eastern Time Monday-Friday to file a complaint

Industry 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.

Medical Review Officer



Is your complaint about a medical review officer (MRO)? This includes complaints about information recorded by a MRO in the FMCSA Drug and Alcohol Clearinghouse.

Electronic Log Device Provider



Is your complaint about an ELD provider? This can include complaints about devices you believe do not adhere to the minimum requirements of the ELD rule.

IMPORTANT
If this is an emergency, please call 011 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

Industry Bus Complaint Incident Information

Federal Motor Carrier Safety AdministrationNCCDB Login

NCCDB | National Consumer Complaint DatabaseFAQs-Help ?

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

Incident Information

Incident Date*	<input type="text"/>	Route/Job/Invoice #	<input type="text"/>
Origin City	<input type="text"/>	Destination City	<input type="text"/>
Origin State*	<input type="text"/>	Destination State*	<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](#)

- 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
 - + Drug and Alcohol Clearinghouse
- 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-DOT-SAFET (1-888-368-7238) from 8:00 a.m.-8:00 p.m. Eastern Time Monday-Friday to file a complaint.

Industry 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.

Select All Allegations that Apply

[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.

Industry Bus Complaint Incident Information

Continued

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:

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.

Drug and Alcohol Clearinghouse

- Employer did not receive limited consent from the driver before conducting a limited query in the Clearinghouse.
- Employer did not report negative RTD test result to the Clearinghouse.
- Employer did not report the completion of follow-up testing plan to the Clearinghouse.

Industry Bus Complaint Incident Information

Continued

Operating Authority and Financial Responsibility

- Operating Authority

- Carrier is operating without required interstate operating authority or registration.
- Carrier is operating without a valid process agent

- Financial Responsibility

- Carrier is operating without required insurance
- Carrier is operating without required trust fund or bond
- Trust fund or bond company is not solvent (49 CFR Part 387 Subpart C)
- Process agent is not responsive

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

Industry 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*	<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.

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

Industry Bus 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".

Search Bus Companies Search All Companies

If you could not find the company you were looking for

No Match Record Found

Enter Company Information

Name*

Address

City State

Zip Country

Email Phone


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

Industry Bus 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

Industry 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

Review and Submit

Complaint ID:

Incident Information

Incident Date	Origin City	Origin State	Destination City	Destination State	Route/Job/Invoice #
1/10/2022		AR		DC	

Incident Description
Test

Selected Allegations

Type	Category	Allegation
Bus Safety	Driver Qualifications	Company is in violation of hiring, investigating, testing, and records maintenance regulations.

Contact Information

Name	Email	Phone	Address	
Abraham Lincoln		617-555-1212	1600 Pennsylvania Ave, Washington, DC, 90201, US	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
Test Bus Company			123 Elm Street	Boston	MA	90210	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 (1-888-388-7238) from 8:00 a.m.-8:00 p.m. Eastern Time Monday-Friday to file a complaint

Industry Medical Review Officer (MRO) Complaint Type

 **FMCSA**
Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB | National Consumer Complaint Database


FAQs-Help ?

COMPLAINT TYPE | INCIDENT INFORMATION | CONTACT INFORMATION | MEDICAL REVIEW OFFICER (MRO) 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.

Medical Review Officer



Is your complaint about a medical review officer (MRO)? This includes complaints about information recorded by a MRO in the FMCSA Drug and Alcohol Clearinghouse.

Electronic Log Device Provider



Is your complaint about an ELD provider? This can include complaints about devices you believe do not adhere to the minimum requirements of the ELD rule.

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

Industry MRO Complaint Incident Information



Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB | National Consumer Complaint Database

[FAQs-Help?](#)

[COMPLAINT TYPE](#) | **INCIDENT INFORMATION** | [CONTACT INFORMATION](#) | [MEDICAL REVIEW OFFICER \(MRO\) 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

[Collapse All](#)

Medical Review Officer (MRO)

- Medical Review Officer (MRO)

MRO did not report the drug and/or alcohol violation within 2 business days after making the determination or verification.

MRO did not report a change to the results report within 1 business day after making the change.

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

Industry MRO Complaint Contact Information

**FMCSA**
Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB | National Consumer Complaint Database

FAQs-Help?

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [MEDICAL REVIEW OFFICER \(MRO\) 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"/>
Zip	<input type="text"/>	Country	<input type="text"/>
Company Name	<input type="text" value="Your company name if applicable"/>	U.S. DOT#	<input type="text" value="Your company U.S. DOT# if available"/>

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.

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

Industry MRO Complaint Company Information

NCCDB Login |

NCCDB | National Consumer Complaint DatabaseFAQs-Help?

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

Medical Review Officer (MRO) Information

Complaint against MRO

	Company Name	Address	City	State	Zip	Manual Entry
Delete	Test Medical Review Officer					Y

If your complaint has multiple MROs, continue to add them.

Enter Medical Review Officer Information

Name*

Address

City

State

Zip

Country

Email

Phone

Website

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

Industry MRO Complaint File Upload

**FMCSA**
Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB | National Consumer Complaint Database

[FAQs-Help?](#)

COMPLAINT TYPE | INCIDENT INFORMATION | CONTACT INFORMATION | MEDICAL REVIEW OFFICER (MRO) 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
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OTHER RESOURCES:

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- [Protect Your Move](#)
- [Look Before You Book](#)

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Industry MRO Complaint Review and Submit



FMCSA
Federal Motor Carrier Safety Administration

NCCDB Login

NCCDB | National Consumer Complaint Database

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COMPLAINT TYPE |
 INCIDENT INFORMATION |
 CONTACT INFORMATION |
 MEDICAL REVIEW OFFICER (MRO) INFORMATION |
 FILE UPLOAD |
 REVIEW AND SUBMIT

Review and Submit

Incident Information
 Incident Date: 1/7/2022
 Incident Location: Maryland

Incident Description
 Test

Selected Allegations

Type	Category	Allegation
Medical Review Officer (MRO)	Medical Review Officer (MRO)	MRO did not report the drug and/or alcohol violation within 2 business days after making the determination or verification.
Medical Review Officer (MRO)	Medical Review Officer (MRO)	MRO did not report a change to the results report within 1 business day after making the change.

Contact Information

Name	Email	Phone	Address	
Thomas Jefferson	marianne.barry.ctr@dot.gov	617-424-4242	One Oak Street, Columbus, OH, 90210, US	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

Medical Review Officer (MRO) Information

Company Name	U.S. DOT#	MCE	Address	City	State	Zip	Manual Entry
Test Medical Review Officer	N/A	N/A					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.

Complaint ID:

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:

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Industry Electronic Log Device (ELD) Provider Complaint Type

 **FMCSA**
Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB | National Consumer Complaint Database


FAQs-Help ?

COMPLAINT TYPE | INCIDENT INFORMATION | CONTACT INFORMATION | ELD PROVIDER 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.

Medical Review Officer



Is your complaint about a medical review officer (MRO)? This includes complaints about information recorded by a MRO in the FMCSA Drug and Alcohol Clearinghouse.

Electronic Log Device Provider



Is your complaint about an ELD provider? This can include complaints about devices you believe do not adhere to the minimum requirements of the ELD rule.


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

Industry Electronic Log Device (ELD) Provider Incident Information

 **FMCSA**
Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB | National Consumer Complaint Database

[FAQs-Help?](#)

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

Incident Information

Date of ELD Malfunction

Incident Description (Maximum 4000 Characters) *

Please provide a concise statement describing actions you (or the motor carrier) have taken to make a good faith effort to coordinate with this ELD provider to repair, replace, or service the ELD unit(s).

Note: A motor carrier seeking to extend the period of time permitted for repair, replacement, or service of one or more ELDS may request an extension per 49 CFR PART 395.34.

Select All Allegations that Apply

[Collapse All](#)

Non-Compliant ELD

- Non-compliant Electronic Log Device (ELD)
 - The company failed to respond to my service request in a timely manner.
 - The company was unable or unwilling to resolve the identified issue with my device.

IMPORTANT

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OTHER RESOURCES:

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

CONTACT:

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Industry Electronic Log Device (ELD) Provider Contact Information

 **FMCSA**
Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB | National Consumer Complaint Database

[FAQs-Help?](#)

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [ELD PROVIDER 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

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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

Industry Electronic Log Device (ELD) Provider Information


FMCSA
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NCCDB | National Consumer Complaint Database
FAQs-Help?

COMPLAINT TYPE |
 INCIDENT INFORMATION |
 CONTACT INFORMATION |
 ELD PROVIDER INFORMATION |
 FILE UPLOAD |
 REVIEW AND SUBMIT

ELD Provider Information

Click on the **Select** link in the grid, or use **Search** function to narrow down the list. If your company does not show up on the list, add it in 'Enter Company Information' below.

If you could not find the company you were looking for

Search Result: 111

	Company	Device Name	Model Number	Eld Identifier	Company Address	City/State/Zip	Country
Select	Acordex, LLC	Mobile Dispatch	VNA2-ELD	VNA2-ELD	37 Walker Rd	N Andover, MA 01845	United States
Select	Alert Gps Inc	Alert Gps Inc. ELD	Alert ELD	ALERT001	3740 W 25th Ave	schiller park	United States
Select	Assured Tracking Inc	at.eDash	Apollo	APOLLO	8100 W Flagler Street Suite 200	Miami FL 33144	United States
Select	ATS Fleet Management Solutions	e-Track Certified	ATS001	ATS001	3345 Silverstone	Plano	United States
Select	Auto Security & Monitoring Inc	ASMebook	AGE001	ASMGPS	9322 Klingerman Street, Suite A	South El Monte, CA 91733	United States
Select	BigRoad Inc	BigRoad DashLink ELD	DL-200	BGRD20	180 Columbia St. W.	Waterloo, Ontario, N2L 3L3	Canada
Select	Blue Ink Tech	BIT ELD	BIT17001	BITELD	1235 6th Ave	Huntington, WV 25701	United States
Select	CAMS Software Corporation	Prospero Mobi	PM1000	PM1000	Unit 200 - 8651 Eastlake Drive	Burnaby	Canada
Select	Carrus Mobile, Inc.	BreakerLog ELD	BLELD-5 and higher	ELDMCB	54 W 40 St	New York, NY 10018	United States
Select	Cartasite	driveTIME	DT0001	DT0001	1123 Auraria Pkwy, Suite 200	Denver, CO 80204	United States
Select	Cartasite	driveTIME	DT0001	DT0001	1123 Auraria Pkwy, Suite 200	Denver, CO 80204	United States

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:

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Industry Electronic Log Device (ELD) Provider File Upload

**FMCSA**
Federal Motor Carrier Safety Administration

NCCDB Login |

NCCDB | National Consumer Complaint Database

[FAQs-Help?](#)

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [ELD PROVIDER 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

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- [Protect Your Move](#)
- [Look Before You Book](#)

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Industry Electronic Log Device (ELD) Provider Review and Submit

NCCDB Login |

NCCDB | National Consumer Complaint Database

[FAQs-Help ?](#)

COMPLAINT TYPE |
 INCIDENT INFORMATION |
 CONTACT INFORMATION |
 ELD PROVIDER INFORMATION |
 FILE UPLOAD |
 REVIEW AND SUBMIT

Review and Submit

Complaint ID:

Incident Information

Incident Date: 1/10/2022

Incident Description
Test

Selected Allegations

Type	Category	Allegation
Non-Compliant ELD	Non-compliant Electronic Log Device (ELD)	The company failed to respond to my service request in a timely manner.
Non-Compliant ELD	Non-compliant Electronic Log Device (ELD)	The company was unable or unwilling to resolve the identified issue with my device.

Contact Information

Name	Email	Phone	Address	
Teddy Roosevelt		617-898-2345		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

ELD Provider Information

Company Name	U. S. DOT#	MC#	Address	City	State	Zip	Manual Entry
Test ELD Company	N/A	N/A					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
BACK
SUBMIT

OTHER RESOURCES:

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- [➤ Protect Your Move](#)
- [➤ Look Before You Book](#)

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