

# NCCDB Complaint Entry Home Page

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

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**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login

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**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 \(FAQs\)](#)

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

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## 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](#)

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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

# Driver 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.

**Substance Abuse Professional**



Is your complaint about a substance abuse professional (SAP)? This includes complaints about information recorded by a SAP 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

# Driver 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 #)"/> Pickup Date* <input type="text"/> Origin Address <input type="text"/> Origin City* <input type="text"/> <input type="text" value="United States"/> Origin Zip* <input type="text"/> <input type="text" value="United States"/>	Delivery Date <input type="text"/> Destination Address <input type="text"/> Destination City* <input type="text"/> <input type="text" value="United States"/> Destination Zip* <input type="text"/> <input type="text" value="United States"/>
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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

[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

# Driver Moving Complaint Incident Information

## Continued

### Auto Hauler

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

### Coerced to Commit a Violation

- + Coerced to Commit a Violation
- + Coerced to Commit ELD Violation

### Deceptive Business Practice

- + Whistleblower Complaint

### Operating Authority and Financial Responsibility

- + Operating Authority
- + Financial Responsibility

#### IMPORTANT

If this is an emergency, please call 011 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:

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from 8:00 a.m.-8:00 p.m. Eastern Time  
Monday-Friday to file a complaint

# Driver Moving Complaint Incident Information

## Continued

**FMCSA**  
Federal Motor Carrier Safety Administration

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NCCDB | National Consumer Complaint Database

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

### Incident Information

Job Number

Pickup Date\*

Origin Address

Origin City\*  ▼

Origin Zip\*  United States ▼

Delivery Date

Destination Address

Destination City\*  ▼

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

[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.

# Driver Moving Complaint Incident Information

## Continued

### - 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
- 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).

# Driver 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 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
  - The shipper or receiver attempted to coerce or coerced the complainant into loading/unloading (lumping) the shipment

# Driver Moving Complaint Incident Information

## Continued

### Auto Hauler

#### - Pickup and Delivery

Auto Hauler 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: \$

#### - Claim Settlement

Auto Hauler did not offer a claim settlement.

Auto Hauler is not responding to a filed complaint or an inquiry.

Auto Hauler refuses to participate in the arbitration process.

### Coerced to Commit a Violation

#### - Coerced to Commit a Violation

I was coerced to commit a violation related to Hours of Service.

I was coerced to commit a violation related to Cargo Securement.

I was coerced to commit a violation related to Required Equipment.

I was coerced to commit a violation related to Vehicle Condition or Maintenance.

I was coerced to commit a violation related to ill or fatigued operations.

I was coerced to commit a violation related to commercial drivers licensing.

I was coerced to commit a violation related to hazardous materials.

I was coerced to commit a violation related to the commercial regulations.

Other

#### - Coerced to Commit ELD Violation

I was coerced to falsely certify my ELD records.

### 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)

# Driver Moving 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

## Driver Moving Complaint Contact Information

**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" 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"/>

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.

[CANCEL](#)

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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

## Driver Moving Complaint Company Information

### 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:**

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Monday-Friday to file a complaint

## Driver Moving Complaint File Upload

## NCCDB | National Consumer Complaint Database

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### 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:

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Monday-Friday to file a complaint

## Driver Moving Complaint Review and Submit



**FMCSA**  
Federal Motor Carrier Safety Administration

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**NCCDB | National Consumer Complaint Database**

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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		Boston	ME	90210	US
Destination		Atlanta	GA	89034	US

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

Incident Description  
test

**Selected Allegations**

Type	Category	Allegation
Moving Company (Household Goods)	Shipment Documents	Moving company did not inform the customer of the availability of a neutral arbitration process.
Coerced to Commit a Violation	Coerced to Commit a Violation	I was coerced to commit a violation related to Hours of Service.
Coerced to Commit a Violation	Coerced to Commit a Violation	I was coerced to commit a violation related to commercial drivers licensing.

**Contact Information**

Name	Email	Phone	Address	
Steven Test		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 (1-888-388-7238)  
 from 8:00 a.m.-8:00 p.m. Eastern Time  
 Monday-Friday to file a complaint.

# Driver Truck Complaint Type

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.

**Substance Abuse Professional**



Is your complaint about a substance abuse professional (SAP)? This includes complaints about information recorded by a SAP 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.

CANCEL

NEXT


**OTHER RESOURCES:**

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

**CONTACT:**

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# Driver Truck Complaint Incident Information

 **FMCSA**  
Federal Motor Carrier Safety Administration

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**NCCDB | National Consumer Complaint Database**

FAQs-Help ?

COMPLAINT 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**

- + Hours of Service
- + Unsafe Vehicles or Equipment
- + Harassment for Refusal to Commit an Hours of Service Violation
- + Truck and Driver Related Safety Concerns
- + Driver Qualifications

**Drug and Alcohol**

- + Alcohol or Drug Regulations
- + Drug and Alcohol Clearinghouse

**Coerced to Commit a Violation**

- + Coerced to Commit a Violation
- + Coerced to Commit ELD Violation

**Cargo Tank Facility**

- + Cargo Tank Facility

**Hazardous Materials**

- + Markings and documentation
- + Cargo Loading and securement
- + Other

**Termination for Refusal to Commit Violation**

- + Terminated for Refusing to Commit a Violation

# Driver Truck Complaint Incident Information Continued

## 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.

CANCEL

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### OTHER RESOURCES:

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



### CONTACT:

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Monday-Friday to file a complaint



# Driver Truck Complaint Incident Information

## Continued



NCCDB Login |

### NCCDB | National Consumer Complaint Database

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#### 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

###### - Hours of Service

- Company requires that driver falsify log books.
- Company requires that the driver exceed maximum driving time allowed by regulation.
- Company requires driver to drive without taking the proper off-duty period.

###### - Unsafe Vehicles or Equipment

- Commercial truck did not have required equipment.
- Commercial truck did not perform proper inspection, repair and maintenance.
- Carrier placed a commercial truck into operation without one or more parts/accessories necessary for safe operation as defined under Part 393.
- Commercial truck carrying Division 1.1, 1.2 or 1.3 explosives was left unattended by the driver or a qualified representative.
- Carrier failed to correct Out-Of-Service defects listed by driver in a driver/vehicle inspection report before the vehicle is operated again.
- A commercial truck was seen operating outside of the applicable operating rules (improper lane change, speeding...etc.)

###### - Harassment for Refusal to Commit an Hours of Service Violation

- I was harassed by my motor carrier employer based on information that my employer accessed through an Electronic Logging Device (ELD) or related technology that resulted in me violating the hours of service rules of the Federal Motor Carrier Safety Regulations.

# Driver Truck Complaint Incident Information

## Continued

### - Truck and Driver Related Safety Concerns

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

### - Driver Qualifications

- Company is in violation of hiring, investigating, testing, and records maintenance regulations.
- Company is in violation of Commercial Drivers License (CDL) regulations.
- 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.
- Previous motor carriers did not respond to the executed signed release for the required background check for DOT drug & alcohol testing.
- 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.

# Driver Truck Complaint Incident Information

## Continued

### - 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.

### Coerced to Commit a Violation

#### - Coerced to Commit a Violation

- I was coerced to commit a violation related to Hours of Service.
- I was coerced to commit a violation related to Cargo Securement.
- I was coerced to commit a violation related to Required Equipment.
- I was coerced to commit a violation related to Vehicle Condition or Maintenance.
- I was coerced to commit a violation related to ill or fatigued operations.
- I was coerced to commit a violation related to commercial drivers licensing.
- I was coerced to commit a violation related to hazardous materials.
- I was coerced to commit a violation related to the commercial regulations.
- Other

#### - Coerced to Commit ELD Violation

- I was coerced to falsely certify my ELD records.

### Cargo Tank Facility

#### - Cargo Tank Facility

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

### Hazardous Materials

#### - Markings and documentation

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

#### - Cargo Loading and securement

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

#### - Other

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

# Driver Truck Complaint Incident Information

## Continued

### Termination for Refusal to Commit Violation

#### - Terminated for Refusing to Commit a Violation

- I (or another driver) was terminated for refusing to commit a violation related to Hours of Service.
- I (or another driver) was terminated for refusing to commit a violation related to Size and Weight.
- I (or another driver) was terminated for refusing to commit a violation related to Cargo Securement.
- I (or another driver) was terminated for refusing to commit a violation related to Required Equipment.
- I (or another driver) was terminated for refusing to commit a violation related to Vehicle Condition or Maintenance.
- I (or another driver) was terminated for refusing to commit a violation related to Falsification of Log Books.
- I (or another driver) was terminated for refusing to commit a violation related to ill or fatigued operations.

### 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.

# Driver Truck Complaint Incident Information

## Continued

### - 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.
- 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

## Driver Truck Complaint Incident Information Continued

- 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 (1-888-368-7238)  
from 8:00 a.m.-8:00 p.m. Eastern Time  
Monday-Friday to file a complaint

# Driver Truck Complaint Contact Information

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

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**NCCDB | National Consumer Complaint Database**

[FAQs-Help ?](#)

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

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**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.


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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

# Driver 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



# Driver 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

# Driver 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: 1/7/2022  
Incident Location:

Incident Description  
Test

**Selected Allegations**

Type	Category	Allegation
Coerced to Commit a Violation	Coerced to Commit a Violation	I was coerced to commit a violation related to Hours of Service.
Coerced to Commit a Violation	Coerced to Commit a Violation	I was coerced to commit a violation related to Cargo Securement.

**Contact Information**

Name	Email	Phone	Address	
Abraham Lincoln	marianne.barry.ctr@dot.gov	617-555-1212	1600 Pennsylvania Ave, Washington, DC, 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

**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

# Driver Bus Complaint Type

 **FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

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**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.

**Substance Abuse Professional**



Is your complaint about a substance abuse professional (SAP)? This includes complaints about information recorded by a SAP 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

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# Driver Bus 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\*  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**

[Expand All](#)

**Bus Safety**

- + Hours of Service
- + Unsafe Vehicles or Equipment
- + Harassment for Refusal to Commit an Hours of Service Violation
- + Driver Qualifications
- + Unsafe Vehicle Operations
- + Driver Related Safety Concerns

**Drug and Alcohol**

- + Alcohol or Drug Regulations
- + Drug and Alcohol Clearinghouse

**Coerced to Commit a Violation**

- + Coerced to Commit a Violation
- + Coerced to Commit ELD Violation

**Termination for Refusal to Commit Violation**

- + Terminated for Refusing to Commit a Violation

**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.

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**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.-6:00 p.m. Eastern Time Monday-Friday to file a complaint

# Driver 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
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**Incident Information**

Incident Date\*

Origin City

Origin State\*

Route/Job/Invoice #

Destination City

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) \*

**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.
- Harassment for Refusal to Commit an Hours of Service Violation
  - I was harassed by my motor carrier employer based on information that my employer accessed through an Electronic Logging Device (ELD) or related technology that resulted in me violating the hours of service rules of the Federal Motor Carrier Safety Regulations.
- Driver Qualifications
  - Company is in violation of hiring, investigating, testing, and records maintenance regulations.
  - Company is in violation of Commercial Drivers License (CDL) regulations.
  - Company is using a driver with more than one commercial driver license.
  - Company is using a driver that is under the age.
  - Company is using a driver that does not possess a valid commercial driver license or commercial driver license permit.
  - Company is using a driver that cannot read and speak the English language sufficiently to perform transportation duties.
  - Company is using a driver that does not possess a valid commercial driver license endorsement (i.e. hazardous materials, double-triple trailer, etc.).
  - Company is using a driver that does not possess a valid medical card.
- Unsafe Vehicle Operations
  - Vehicle engaged in ongoing operation while permitting passenger(s) forward of standee(s) line.
  - Vehicle engaged in ongoing operation with one or more aisle seat(s) not securely fastened or obstructing aisle when seat is unoccupied.
  - Vehicle engaged in ongoing operation while baggage or freight is unsecured to prevent driver's unrestricted operation or passenger/occupant access to emergency exit(s), or passenger protection from falling/displaced articles.
  - Vehicle being towed/pushed while passenger(s) on board.
  - Vehicle engaged in ongoing operation with one or more occupant(s) within closed body of bus and no exit/operation of exit.
  - Vehicle engaged in ongoing operation with unmarked/malfunctioning emergency exit(s).

# Driver Bus Complaint Incident Information

## Continued

- 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.
- Previous motor carriers did not respond to the executed signed release for the required background check for DOT drug & alcohol testing.
- 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 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.

### Coerced to Commit a Violation

#### - Coerced to Commit a Violation

- I was coerced to commit a violation related to Hours of Service.
- I was coerced to commit a violation related to Cargo Securement.
- I was coerced to commit a violation related to Required Equipment.
- I was coerced to commit a violation related to Vehicle Condition or Maintenance.
- I was coerced to commit a violation related to ill or fatigued operations.
- I was coerced to commit a violation related to commercial drivers licensing.
- I was coerced to commit a violation related to hazardous materials.
- I was coerced to commit a violation related to the commercial regulations.
- Other

#### - Coerced to Commit ELD Violation

- I was coerced to falsely certify my ELD records.

### Termination for Refusal to Commit Violation

#### - Terminated for Refusing to Commit a Violation

- I (or another driver) was terminated for refusing to commit a violation related to Hours of Service.
- I (or another driver) was terminated for refusing to commit a violation related to Size and Weight.
- I (or another driver) was terminated for refusing to commit a violation related to Cargo Securement.
- I (or another driver) was terminated for refusing to commit a violation related to Required Equipment.

# Driver Bus Complaint Incident Information Continued

I (or another driver) was terminated for refusing to commit a violation related to Vehicle Condition or Maintenance.

I (or another driver) was terminated for refusing to commit a violation related to Falsification of Log Data.

I (or another driver) was terminated for refusing to commit a violation related to ill or fatigued operations.

**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 Name
- ▶ Lock 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

# Driver Bus Complaint Contact Information

**FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**

FAQs-Help?

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

**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 (1-888-369-7238) from 8:00 a.m.-8:00 p.m. Eastern Time Monday-Friday to file a complaint



# Driver 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

# Driver 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

# Driver Bus 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	Origin City	Origin State	Destination City	Destination State	Route/Job/Invoice #
1/7/2022		CA		LA	

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.

**Contact Information**

Name	Email	Phone	Address	
Abe Lincoln		888-555-1212		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
Test Bus 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

# Driver Substance Abuse Professional (SAP) Complaint Type

 **FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

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FAQs-Help ?

COMPLAINT TYPE | INCIDENT INFORMATION | CONTACT INFORMATION | SUBSTANCE ABUSE PROFESSIONAL (SAP) 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.

**Substance Abuse Professional**



Is your complaint about a substance abuse professional (SAP)? This includes complaints about information recorded by a SAP 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

# Driver SAP Complaint Incident Information

 **FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

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**NCCDB | National Consumer Complaint Database**

[FAQs-Help ?](#)

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**COMPLAINT TYPE** | **INCIDENT INFORMATION** | CONTACT INFORMATION | SUBSTANCE ABUSE PROFESSIONAL (SAP) 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](#)

**Substance Abuse Professional (SAP)**

Substance Abuse Professional (SAP)

SAP did not report date of initial assessment by the close of the business day following the date the initial assessment was completed.

SAP did not report driver's eligibility for RTD testing by the close of the business day following the determination the driver was eligible for RTD testing.


SAP did not accept request in the Clearinghouse - SAP unable to record required information in the Clearinghouse.

---


**IMPORTANT**

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

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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

# Driver SAP Complaint Contact Information

 **FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

**NCCDB | National Consumer Complaint Database**

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[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [SUBSTANCE ABUSE PROFESSIONAL \(SAP\) 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"/>
Company Name	<input type="text"/>	U.S. DOT#	<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.

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

# Driver SAP Complaint SAP Information

NCCDB Login

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[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | **SUBSTANCE ABUSE PROFESSIONAL (SAP) INFORMATION** | [FILE UPLOAD](#) | [REVIEW AND SUBMIT](#)

### Substance Abuse Professional (SAP) Information

Complaint against SAP

	Company Name	Address	City	State	Zip	Manual Entry
<a href="#">Delete</a>	Test Substance Abuse Professional					Y

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

Enter Substance Abuse Professional 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

# Driver SAP Complaint File Upload

NCCDB Login

## NCCDB | National Consumer Complaint Database

FAQs Help ?

[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [SUBSTANCE ABUSE PROFESSIONAL \(SAP\) 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



# Driver SAP 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 | 
 SUBSTANCE ABUSE PROFESSIONAL (SAP) INFORMATION | 
 FILE UPLOAD | 
 REVIEW AND SUBMIT

### Review and Submit

**Incident Information**

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

**Incident Description**

Test

**Selected Allegations**

Type	Category	Allegation
Substance Abuse Professional (SAP)	Substance Abuse Professional (SAP)	SAP did not report date of initial assessment by the close of the business day following the date the initial assessment was completed.
Substance Abuse Professional (SAP)	Substance Abuse Professional (SAP)	SAP did not report driver's eligibility for RTD testing by the close of the business day following the determination the driver was eligible for RTD testing.
Substance Abuse Professional (SAP)	Substance Abuse Professional (SAP)	SAP did not accept request in the Clearinghouse - SAP unable to record required information in the Clearinghouse.

**Contact Information**

Name	Email	Phone	Address	
Marianne Barry		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

**Substance Abuse Professional (SAP) Information**

Company Name	U. S. DOT#	MC#	Address	City	State	Zip	Manual Entry
Test Substance Abuse Professional	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:**

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

# Driver 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.

**Substance Abuse Professional**



Is your complaint about a substance abuse professional (SAP)? This includes complaints about information recorded by a SAP 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-SAFET (1-888-368-7238) from 8:00 a.m.-8:00 p.m. Eastern Time Monday-Friday to file a complaint

# Driver (ELD) Provider Complaint 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**  
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

# Driver (ELD) Provider Contact Information

 **FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

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**NCCDB | National Consumer Complaint Database**

[FAQs Help?](#)

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

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**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

<b>Complainant Information</b>	
First Name*	<input type="text"/>
Email	<input type="text"/>
Address 1	<input type="text"/>
City	<input type="text"/>
Zip	<input type="text"/>
Company Name	<input type="text" value="Your company name if applicable"/>

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

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

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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

# Driver ELD Provider Complaint ELD Provider 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](#)

### 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

No Match Record Found

#### Enter ELD Provider/Manufacturer 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-SAFET (1-888-368-7238) from 8:00 a.m. - 8:00 p.m. Eastern Time Monday-Friday to file a complaint

# Driver ELD Provider Complaint File Upload

 **FMCSA**  
Federal Motor Carrier Safety Administration

NCCDB Login |

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**NCCDB | National Consumer Complaint Database**

[FAQs Help ?](#)

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[COMPLAINT TYPE](#) | [INCIDENT INFORMATION](#) | [CONTACT INFORMATION](#) | [SUBSTANCE ABUSE PROFESSIONAL \(SAP\) INFORMATION](#) | **FILE UPLOAD** | [REVIEW AND SUBMIT](#)

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**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 50MB)

Description\*

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**Supporting Documents**

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

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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

# Driver ELD Provider Complaint 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

**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	
Abraham Lincoln		617-444-1212	Anywhere Street, Everywhere, ME, 00210, 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

**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.

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:**

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