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Do You Have a Safety Problem or Complaint?

File a Complaint Now

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File a Vehicle Safety Complaint

NOTE: If you do not have an email address, or cannot fill in a required field, please phone the Vehicle Safety Hotline (Toll-Free: 1-888-327-4236 / Hearing Impaired (TTY): 1-800-424-9153) for assistance.

Form Approved: O.M.B. No. 2127-0008

Please complete each section and then click on the "Verify your entries" button at the bottom.

* = required field

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1. Vehicle Information

Vehicle Identification Number (VIN):

[Test your VIN](#)

* **Vehicle:** Enter your vehicle Make, Model and Model Year separated by spaces (e.g., MakeName ModelName 2003). After three characters possible matches may be shown and can be selected to complete your entry.

Type Make, Model, Model Year

2. Incident Information

* **Approximate Incident Date:**

For multiple incident dates enter the first date of occurrence.

Was there a Crash? Yes No

Was there a Fire? Yes No

Was there an Injury or Fatality? Yes No

Vehicle mileage at time of incident (miles):

For multiple incidents, enter the first failure mileage

Vehicle speed at time of incident (mph):

* **Affected Parts:** Select up to three parts

Select the parts

* **Tell us what happened** Enter up to 1900 characters

WARNING: This description, exactly as you enter it, may appear in a public NHTSA database. **Do not include any personal information** (name, street/email address, phone number, social security/driver license number, Vehicle Identification Number (VIN), etc...).

(1900 characters left)

3. Personal Information

We Value Your Privacy

The information you provide will be used to identify potential safety-related defects or determine the

* **First Name:**

* **Last Name:**

adequacy of existing safety recalls.
We do not share your personal information with the general public. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See [69 FR 53971 \(Sept. 3, 2004\)](#).

* **Email:**

* **Confirm Email:**

* **Daytime Phone:**

Evening Phone:

* **Address 1:**

Address 2:

* **City:**

* **State:**

* **Zip Code:**

[Verify your entries](#) [Reset Form](#)

All the information that you submit to NHTSA will be transmitted using secure mechanism.



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