

safercar.gov

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

HOMEOWNERS SHoppers VEHICLE OWNERS INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) VEHICLE MANUFACTURERS PARENTS CENTRAL

You are here: Home / Vehicle Owners / File a Complaint / File a Vehicle Complaint

Do You Have a Safety Problem or Complaint?

File a Complaint Now

Search for all Recalls, Complaints & Investigations

Recalls Look-up by VIN (Vehicle Identification Number)

Recalls FAQ

Receive Updates for Latest Recalls

Sign-up for Email Alerts

Subscribe to RSS Feeds

Resources

Databases (Flat Files)

Passenger Van Safety

Emergency Response Vehicles

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: OMB No. 2127-0008, Expires 05/31/2018

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

* = required field

[Help](#)

1. Vehicle Information

Vehicle Identification Number (VIN):

1HGEG864XSL

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 Honda Civic 1995

2. Incident Information

* Approximate incident Date: 9/25/2012

For multiple incident dates enter the first date of occurrence.

Was there a Crash? ☐ Yes ☒ NoWas there a Fire? ☐ Yes ☒ NoWas there an Injury or Fatality? ☐ Yes ☒ No

Vehicle mileage at time of incident (miles): 160542

For multiple incidents, enter the first failure mileage

Vehicle speed at time of incident (mph): 0

* Affected Parts:

Select up to three parts

Select the parts

Auto Repair does not know

They lie with different answers every visit

* 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)

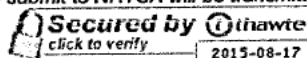
When describing what happened with your vehicle, please provide details about the complaint (part & condition). This is a government murder and I should be paid for loss and damage NOW.

3. Personal Information**We Value Your Privacy**

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

* First Name: * Last Name: * Email: * Confirm Email: * Daytime Phone: Evening Phone: * Address 1: Address 2: Miami Fl * City: * State: Please select 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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1200 New Jersey Avenue, SE, West Building Washington DC 20590 USA 1.888.327.4236 TTY 1.800.424.9153[USA.gov](#)

Code City:
State:

Motor Vehicle Services (County Tax Collector)

Registration, tag and title services for cars, trucks, trailers, vessels & mobile homes
Specialty tags and disability parking permits

Tax Collector: The Honorable Mr. Fernando Casamayor
140 W. Flagler St. 1407 14th Floor Miami 33130
(305) 375-5678

www.miamidade.gov/taxcollector/

City	Street Address	Phone Number
Hialeah		*
Hialeah		*
Miami		*
Miami		*
Miami		*
Miami		*
Miami		*
Miami Beach		*
Miami Gardens		*
Miami Lakes		*
North Miami		*
North Miami		*
North Miami		*

* Private license plate agencies may charge additional fees.

9/20/2013 50 pages
National Consumers League
1701 K Street NW Suite 1200
Washington DC 20006

Dear Sir,
Enclosed are my complain files.
I look forward to hearing from you in resolving all disputes as soon as possible.
Please kindly give a note about results of my complains and any forthcoming problems.

Sincerely,

██████████
██████████
MIAMI FL ██████████

8-12AM
Jun 1st 2016
Reserved



Protecting the American consumer
for more than 200 years by ensuring
the integrity of the U.S. Mail

MIAMI FL

U/MCA/401/SO/C1792884

TX Result Report

P 1
05/10/2013 08:59
Serial No. A02E010001159
TC: 70060

Destination	Start Time	Time	Prints	Result	Note
12023661975	05-10 08:50	00:08:14	013/013	OK	CALL

Note TMR: Timer TX, POL: Polling, ORG: Original Size Setting, FME: Frame Erase TX,
MIX: Mixed Original TX, CALL: Manual TX, CSRC: CSRC, FWD: Forward, PC: PC-Fax,
BND: Double-Sided Binding Direction, SD: Special original, FCODE: F-code, RTX: Re-TX,
RLY: Relay, MEX: Confidential, BUL: Bulletin, SIP: SIP Fax, IPADR: IP Address Fax,
I-FAX: Internet Fax

Result OK: Communication OK, S-OK: Stop Communication, PW-OFF: Power Switch OFF,
TEL: RX from TEL, NG: Other Error, Cont: Continue, No Ans: No Answer,
Refuse: Receipt Refused, Busy: Busy, M-Full: Memory Full,
LOVR: Receiving length Over, POVER: Receiving page Over, FIL: File Error,
DC: Decode Error, MDN: MDN Response Error, DSN: DSN Response Error.

TRAPPIST CASKETS

New Melleray Abbey | Est. 1849

16632 Monastery Road
Peosta, IA 52068

4/28/2014 Received

\$2.68 0
US POSTAGE
FIRST-CLASS
062S0007222549
52068

062S0007222549



miami FL

062S0007222549