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INFORMATION ACT (FOIA), 5 U.S.C . 552(B)(6)

This is a copy of your Report to the U.S. Consumer Product Safety Commission submitted on 9/5/2017

Incident Details

Document Number: I1790070A

Report Number: 20170905-68BEF-2147397646

Report Submitted Date: 9/5/2017

Who You Are: Consumer

Incident Description: I purchased an allen bike rack 2 deluxe two bike trunk carrier. I mounted it on a Ford Fusion 2017 Hybrid that is listed on the fit list as one of the vehicles that the carrier "fits". The carrier does not install solidly. It continually slides off the vehicle. The clamps do not have enough grip to safely hold the carrier and the bikes. The bikes almost fell off on the freeway. It is dangerous and should not be sold.

Incident Date: 9/1/2017

Incident Location: Street or Highway - 91 Freeway, Carona, California, 92880, United States

Victim Details

First Name: [REDACTED]

Last Name: [REDACTED]

Injury Information: Incident, No Injury

Victim is of Hispanic/Latino origin? No

Race: White

Other Race/Ethnicity:

My Relationship to Victim: Self

Gender: Male

Age when incident occurred: [REDACTED] Years

Address: [REDACTED] Cypress, California, [REDACTED], United States

E-mail: [REDACTED]

Phone Number [REDACTED]

Product Details

Product Description: Trunk mounted bicycle rack

Product Category: Bike Rack

Product Type:

Brand Name: Allen Sports

Manufacturer / Importer / Private Labeler Name: Allen Sports

CPSC does not guarantee the accuracy, completeness, or adequacy of the contents of the Publicly Available Consumer Product Safety Information Database on SaferProducts.gov, particularly with respect to information submitted by people outside of CPSC.

Model Name or Number: 102DN

Serial Number:

Date

Manufactured:

Manufacturer

Date Code:

Manufacturer Address: 60 Thoreau St #161, Concord, Massachusetts, 01742, United States

Manufacturer Website URL: www.allensportsusa.com

Website URL:

Manufacturer Phone Number: 800.722.5536

Phone Number:

Retailer: Amazon

Retailer State: Ky

Additional Details

Purchase Date: 8/27/2017

I still have the product in my possession. Yes

The product was damaged before the incident. No

The product was modified before the incident. No

Have you contacted the manufacturer? No

If not, do you plan to contact them? No

Explanation:

Your Contact Information

First Name: [REDACTED]

Last Name: [REDACTED]

Address: [REDACTED] Cypress, California, [REDACTED], United States

E-mail [REDACTED]

Phone Number: [REDACTED]

Consent

May we include your Report, including any Yes, you may include my Report with any attachments on SaferProducts.gov.

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documents or
photographs
that you have
attached to
your Report,
but without
your name and
contact
information, in
CPSC's Public
Database?

May we release your name and contact information to the product manufacturer / importer / private labeler.

contact
information to
the product
manufacturer /
importer /
private labeler
identified in
your Report?

I certify that I have reviewed the Report and that the information provided in this Report is true and accurate to the best of my knowledge, information, and belief.

Yes

OMB Control Number 3041-0146