

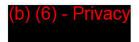
U.S. Department of Justice

Civil Rights Division

Disability Rights Section - NYA 950 Pennsylvania Avenue, NW Washington, DC 20530

Notice of Referral of Complaint for Appropriate Action

To: Mr. Rafael DeLeon,
Director, Office of Civil Rights
U.S. Environmental Protection Agency
Ariel Rios Building
1200 Pennsylvania Avenue, NW
Room 2450
Washington, D.C. 20460



South Lake Tahoe, CA 96150

From: Disability Rights Section, Civil Rights Division, U.S. Department of Justice

Reference:

CTS# regarding City of South Lake Tahoe / TRPA / El Dorado County, South Lake Tahoe, CA; received by DOJ on August 29, 2016

The Disability Rights Section has reviewed the enclosed complaint and determined that it raises issues that are more appropriately addressed by the U.S. Environmental Protection Agency. We, therefore, are referring this complaint to that agency for appropriate action. This letter serves to notify that agency and the complainant of this referral. The Disability Rights Section will take no further action on this matter.

To check the status of the complaint, or to submit additional information, the complainant may contact the referral agency at the address above or at the following telephone number(s):

(202) 564-7272

If the agency has any questions or concerns about this referral or believes that it raises issues outside the agency's jurisdiction, please do not hesitate to contact the Department of Justice at the address and phone number attached hereto

DJ# (b)(6) Privacy

Recid 2/16/17
RDL
Forwarded to OGC-DORKA



Civil Rights Division

Disability Rights Section

Title II of the Americans with Disabilities Act/ Section 504 of the Rehabilitation Act of 1973 Discrimination Complaint Form

Instructions: Please fill out this form completely, in black ink or type. Sign and return to the address on page 3.

Complainant:	b) (6) - Privacy	
Address: (b) (6) - Privacy	_
City. State and	Zip Code: SOUTH LAKE TAHOE, CA 96150	
Telephone:	(In) (C) Private and	_
_	Business:	
Person Discrim	inated Against: (if other than the complainant):	
		_
	Zip Code:	*****
Telephone: H	ome:	
Bı	usiness:	
Name: CTT Address: County:	r organization, or institution which you believe has discriminated: YOF SOUTH LAKE TAHOE, TRPA, EL DOR ADO COU	<u>U</u> TY - -
	Code:	
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City, State and	Zip Code SOUTH LAKE TAHOE, CA 96150
Telephone:	Home: (b) (6) - Privacy
	Business:
Person Discrim	unated Against: (if other than the complainant):
City, State, and	Zip Code:
	ome:
Βι	isiness:
Name: CII	r organization, or institution which you believe has discriminated: YOF SOUTH LAKE TAHOE, TRPA, EL DOR ADO COUNTY
,	
	ode:
Telephone Nun	ber:
When did the d	isorimination occur? Date: CONTINUAU9 SINCE 1964

Describe the acts of discrimination providing the name(s) where possible of the individuals who discriminated (use space on page 3 if necessary): Heaple with emmune system disabilities are much more nulnerable to injuries from airborne toxins than others who have mornal health. There are no provisions in place to protect me and others with immune systems disabilities from airbore toxins known to cause cancer that come from airbore toxins known to cause cancer that come from an "asphalt plant" located in our neighborhood.
Have efforts been made to resolve this complaint through the internal grievance procedure
of the government, organization, or institution?
Yes No
If "yes" what is the status of the grievance? All sources clown 'no furisdiction"
Has the complaint been filed with another bureau of the Department of Justice or any other Federal, State, or local civil rights agency or court?
Yes No
If "yes": Agency or Court: DOJ, Chil Rights Division, Frond Unit Contact Person: William Bittman Address: City, State, and Zip Code: Washington, D.C. Telephone Number: 202-305-8445 Date Filed: 2016
The state of the south an accurate an accust?
Do you intend to file with another agency or court?
Yes_X No

Agency or Court: Levistors, Lovenor, President, EPA, Dept of Housing Address:
Address:
City, State and Zip Code:
Telephone Number:
Additional space for answers: There are no quelic evitities that claim they can help disabled persons like me, who have inique vulneralities and are severly sensative to airlione toxins. My sprine is now disantegrating and my leane graph material in my dental work has bailed to heal. My exophagus is burned out has live been placed into formal poin management for the rest of my life. Lex neighbors management for the rest of my life. Lex neighbors have died from concer with no investigations, untile our local government fails to protect we. I believe our local government is putting the rights of a private business to make profits, wheat of the health and safety of the public.
Signature: (b) (6) - Privacy Date: 8/15/16

Return to:

U.S. Department of Justice Civil Rights Division 950 Pennsylvania Avenue, N.W. Disability Rights Section - NYAV Washington, D.C. 20530

OMB No. 1190-0009 Exp. Date 07/31/2018 Reproduction of this document is encouraged.