

CIVIL DISTRICT COURT FOR THE PARISH OF ORLEANS

FILED

STATE OF LOUISIANA

2015 AUG 18 P 2:27

NO: \_\_\_\_\_

DIVISION: \_\_\_\_\_

STATE OF LOUISIANA-DIVISION OF ADMINISTRATION,  
OFFICE OF COMMUNITY DEVELOPMENT,  
DISASTER RECOVERY UNIT -  
HAZARD MITIGATION GRANT PROGRAM

CIVIL DISTRICT COURT

VS.

TRACEY LYNN GREEN

**PETITION FOR DECLARATORY JUDGMENT AND FOR  
JUDGMENT TO RECOVER HAZARD MITIGATION  
GRANT PROGRAM FUNDS**

NOW INTO COURT, through undersigned counsel, comes Petitioner, the State of Louisiana, Office of Community Development, Disaster Recovery Unit - Hazard Mitigation Grant Program (hereinafter "HMGP"), which respectfully files this Petition for Declaratory Judgment and for Judgment to Recover Hazard Mitigation Grant Program Funds. In support, HMGP respectfully represents:

1.

The Defendant in this case is Tracey Lynn Green, a major domiciliary of Orleans Parish, who voluntarily participated in HMGP to mitigate her home after Hurricane Katrina.

2.

HMGP is a mitigation program funded by FEMA and is administered by the State of Louisiana, the grantee. HMGP assists homeowners whose homes were damaged as a result of Hurricanes Katrina and Rita. It also helps homeowners in coastal Louisiana protect their homes from damage, which may occur in future natural disasters, by elevating their homes, reconstructing safer structures, or installing individual mitigation measures. The State of Louisiana serves as the funding vehicle by which FEMA funds are awarded to eligible homeowners.

3.

Defendant submitted a Voluntary Participation Agreement (hereinafter "VPA") on November 22, 2009 to participate in HMGP and to receive an HMGP grant. Defendant also agreed to comply with all HMGP guidelines, which includes using HMGP funds for their intended purpose. *Exhibit A.*

4.

FEMA grant funds in the amount of \$50,000 (hereinafter “FEMA grant funds”) were paid to Defendant by HMGP on or about June 4, 2010 for the specific purpose of Elevation Measures (hereinafter “Elevation”) at her home located at 4543 Bundy Road, New Orleans, Louisiana, 70127. *Exhibit B.*

5.

Photographs dated April 22, 2015 show that although the FEMA grant funds were received, Defendant’s home was not mitigated. *Exhibit C (in globo).*

6.

Four (4) separate collection letters were mailed to Defendant at 4543 Bundy Road, New Orleans, Louisiana, 70127, which was the address submitted by her when she applied for the HMGP grant. The first letter dated July 9, 2013 was sent by Certified Mail 7012 3460 0000 1290 2081 and informed Defendant that the FEMA grant funds had to be returned to the State of Louisiana. Said letter was marked “Unclaimed” and returned to HMGP. *Exhibit D (in globo).*

7.

The second letter dated August 14, 2013 was sent Certified Mail 7012 3460 0000 1289 9534. Said letter was marked “Unclaimed” and returned to HMGP. *Exhibit E (in globo).*

8.

The third letter dated February 26, 2015 was sent Certified Mail 7014 2120 0004 5100 8210. Said letter was delivered and the Return Receipt was signed on March 3, 2015. *Exhibit F (in globo).*

9.

The fourth letter was sent by Certified Mail 7014 0510 0001 1416 8621. Said letter was delivered on April 18, 2015. *Exhibit G (in globo).*

10.

Defendant has failed to respond to the letters and has failed to return the funds to the State.

11.

Defendant’s failure to return the FEMA grant funds has resulted in Defendant owing to HMGP the FEMA grant funds, which must be recovered by HMGP, the State program charged with distributing FEMA funds for mitigation projects.

12.

HMGP must account to FEMA for all funds issued to homeowners. Failure of HMGP to recover the FEMA grant funds from Defendant will result in reimbursement to FEMA by the State of Louisiana.

13.

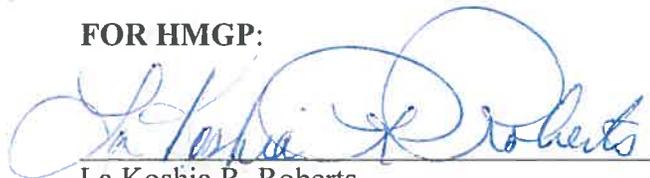
HMGP requests that the debt of \$50,000, owed by Tracey Lynn Green to HMGP, be recognized and that judgment in favor of HMGP be granted, directing Defendant to return and pay the FEMA grant funds to the State, in full.

**ALL PREMISES CONSIDERED, WHEREFORE, HMGP PRAYS:**

- a. That this Honorable Court declare that Defendant, Tracey Lynn Green, is non-compliant with the Voluntary Participation Agreement submitted by her;
- b. That this Honorable Court declare that Defendant, Tracey Lynn Green, is indebted to HMGP in the amount of \$50,000 because of her failure to mitigate her home according to her agreement to abide by HMGP guidelines, including using HMGP funds for their intended purpose;
- c. That Defendant, Tracey Lynn Green, be ordered to return the \$50,000 HMGP grant to HMGP, in full;
- d. That there be judgment rendered herein in favor of HMGP and against Defendant, Tracey Lynn Green, in the full sum of \$50,000;
- e. That Defendant, Tracey Lynn Green, be assessed all costs and fees associated with this matter; and
- f. That the Court grant such other relief as is just and proper.

Respectfully submitted:

**FOR HMGP:**



La Koshia R. Roberts  
Bar Roll No. 26715  
State of Louisiana, through  
its Division of Administration  
2021 Lakeshore Drive, Suite 100  
New Orleans, Louisiana 70122  
Telephone: 504-284-4022  
Facsimile: 504-284-4091  
LaKoshia.Roberts@la.gov

**PUBLIC ENTITY/FEE EXEMPT  
(La.R.S. 13:4521 and 13:5112)**

T. Randolph Richardson (Special Counsel)  
Bar Roll No. 11245  
Law Office of T. Randolph Richardson  
1010 Common Street, Suite 3000  
New Orleans, Louisiana 70112  
Telephone: 504-212-4163  
Facsimile: 504-581-7083  
trichar994@aol.com

CIVIL DISTRICT COURT FOR THE PARISH OF ORLEANS

STATE OF LOUISIANA

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NO: \_\_\_\_\_

DIVISION: P 2:27

STATE OF LOUISIANA-DIVISION OF ADMINISTRATION,  
OFFICE OF COMMUNITY DEVELOPMENT,  
DISASTER RECOVERY UNIT -  
HAZARD MITIGATION GRANT PROGRAM

VS.

TRACEY LYNN GREEN

VERIFICATION

CONSIDERING THE FOREGOING PETITION FOR RECOVERY OF HAZARD  
MITIGATION GRANT PROGRAM FUNDS:

I, CRAIG P. TAFFARO, JR., Director of the State of Louisiana's Hazard Mitigation  
Grant Program, declare under penalty of perjury that the representations made in the foregoing  
Petition are true and correct to the best of my knowledge, belief and understanding.

THUS DONE ON THIS 17<sup>th</sup> DAY OF August 2015 IN NEW ORLEANS,  
LOUISIANA.

  
\_\_\_\_\_  
Craig P. Taffaro, Jr.

  
\_\_\_\_\_  
La Koshia Reconda Roberts  
Notary Public  
Bar Roll No. 26715  
My Commission expires at death.

PLEASE SERVE:

TRACEY LYNN GREEN  
4543 BUNDY ROAD  
NEW ORLEANS, LOUISIANA 70127

OCD-DRU  
HAZARD MITIGATION PROGRAM  
VOLUNTARY PARTICIPATION AGREEMENT (VPA)

FILED

Complete and return this form by mail to:  
OCD-DRU HMGP Program  
P. O. Box 1089  
Hammond, LA 70404-1089

2015 AUG 18 P 2:27

2

Road Home # 06HH 064599

CIVIL  
DISTRICT COURT

SECTION 1: Mitigation ELECTION (check one)

I/We have sold the home that was damaged during the storm and therefore will not be participating in the OCD-DRU HMGP Award Program.

I/We am not interested in receiving an OCD-DRU HMGP Award

IF YOU CHECKED EITHER OF THE ABOVE: SIGN BELOW AND RETURN THIS FORM, OTHERWISE CONTINUE.

Applicant or Co-Applicant NAME Applicant or Co-Applicant SIGNATURE Date

Applicant or Co-Applicant NAME Applicant or Co-applicant SIGNATURE Date

Home Phone: ( )

Cell Phone: ( )

Are you signing as an agent with Power of Attorney (POA) for an applicant? YES NO If signing as agent with Power of Attorney:

Agent NAME (person with POA) Agent SIGNATURE Date

I/WE AM/ARE INTERESTED IN RECEIVING AN OCD-DRU HMGP AWARD. IF YOU CHECK THIS BOX, YOU NEED TO MEET ALL CRITERIA IN SECTION 2.

SECTION 2: PROGRAM ELIGIBILITY

A homeowner must meet ALL of the following criteria to be considered for the OCD-DRU HMGP Award:

- a. Applicant is eligible for Road Home Program benefits as part of the Homeowner Assistance Program. (NOTE: Even if a homeowner received a zero award letter from Road Home, that homeowner may still be eligible for money through the OCD-DRU HMGP.
- b. Homeowner selected *Road Home* Option 1 – “Keep Our Home”.
- c. Homeowner still owns the home that was eligible for *Road Home* benefits.
- d. The structure is located in a FEMA designated ABFE area or the mitigation activity is deemed cost beneficial according to FEMA guidelines. (IMMs are not required to undergo a cost benefit analysis since FEMA has determined all IMMs to be globally cost beneficial for this grant.
- e. Homeowner agrees to comply with all OCD-DRU HMGP guidelines.

EXHIBIT

tabbles

A



Office of Statewide Reporting and Accounting Policy **NEOLouisiana**

Vendor Search Home | **Logoff** | Payee Locations | **Payee Search** | Payments | Help

### Payee Detail

Sort the information below by clicking on the column headers. Click on the agency number below for contact information.

**Payee Remittance Address:**  
4543 BUNDY RD  
NEW ORLEANS, LA 70127

**Check/EFT Number:** AD 00003831398  
**Check/EFT Date:** 06/04/2010  
**Status Change Date:** //  
**Status:** Outstanding

**Check/EFT Line Details:**  
(click on agency for contact information) **Check/EFT Total:** 50,000.00

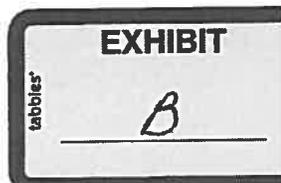
Total Number of Lines : 1

Agency	Document ID	Ref Doc ID	Invoice #	Comments	Line Amount
107	PVQ00037914		HM0309001207	09HH004599	50,000.00

ISIS Calendar (CY) | Help Desk | GASB 34 end 35 | Search OSRAP | Contacts

https://www.prd.doa.louisiana.gov/vendsearch/detail.cfm?check\_number=00003831398

6/4/2010



Time of Observation: 9:12 AM  
Weather Conditions: \_\_\_\_\_

Check-In Observation  
Project Name: OGHA OBJECTS  
Address: 4543 Bundy Rd. No. 70127  
Date: \_\_\_\_\_  
Elevation: 12.15 Slab Slab Separation

- Check List for Check-In Milestone:
- General Site Condition
  - Type of Slab
  - Which MIO Project is Closest to
  - Contractor Activity
  - Take Photographs

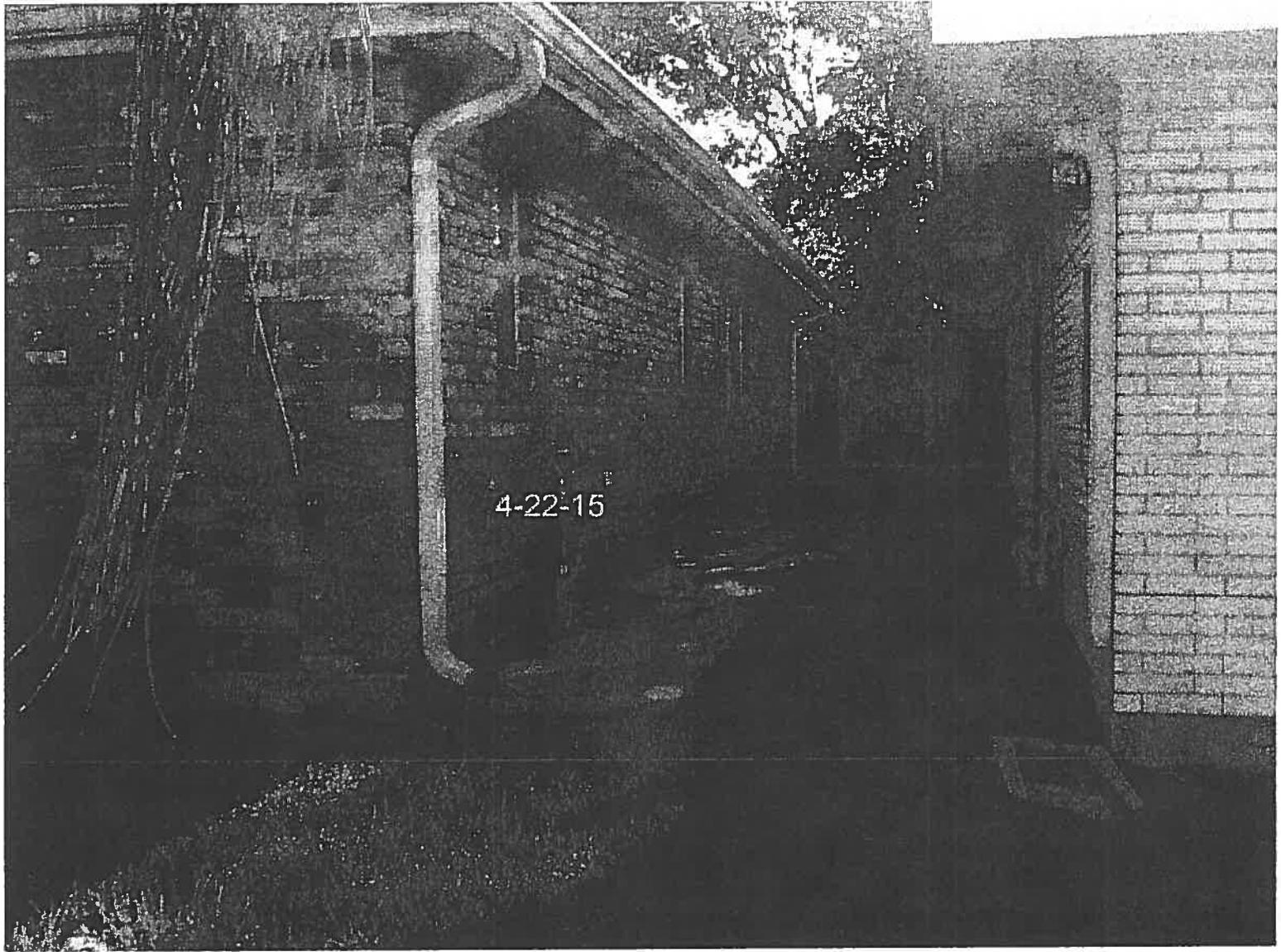
Observation: NO WORK SPOTTED House NOT elevated

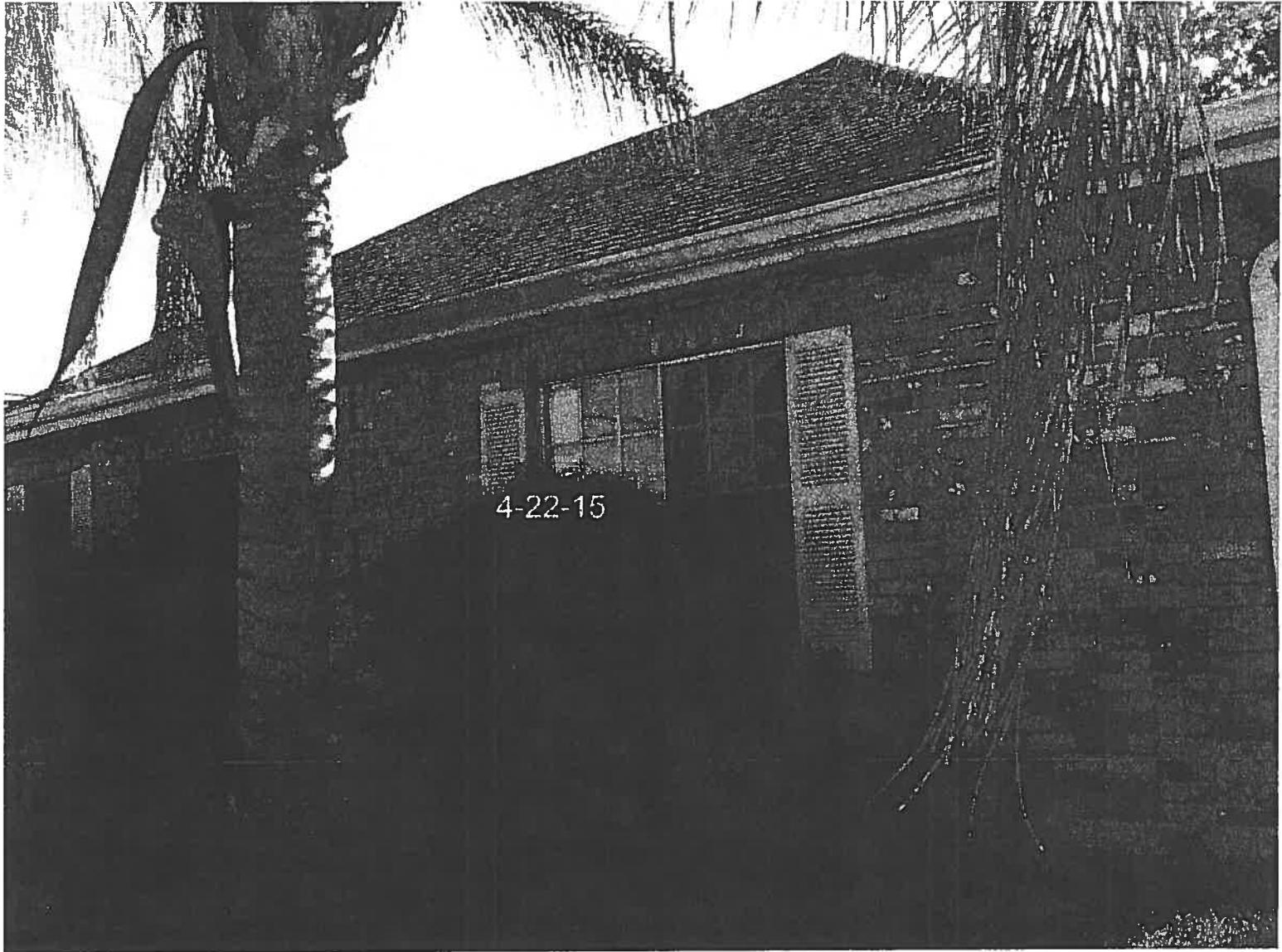
Determine which Milestone Observation the Project is closest to:

EXHIBIT  
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C

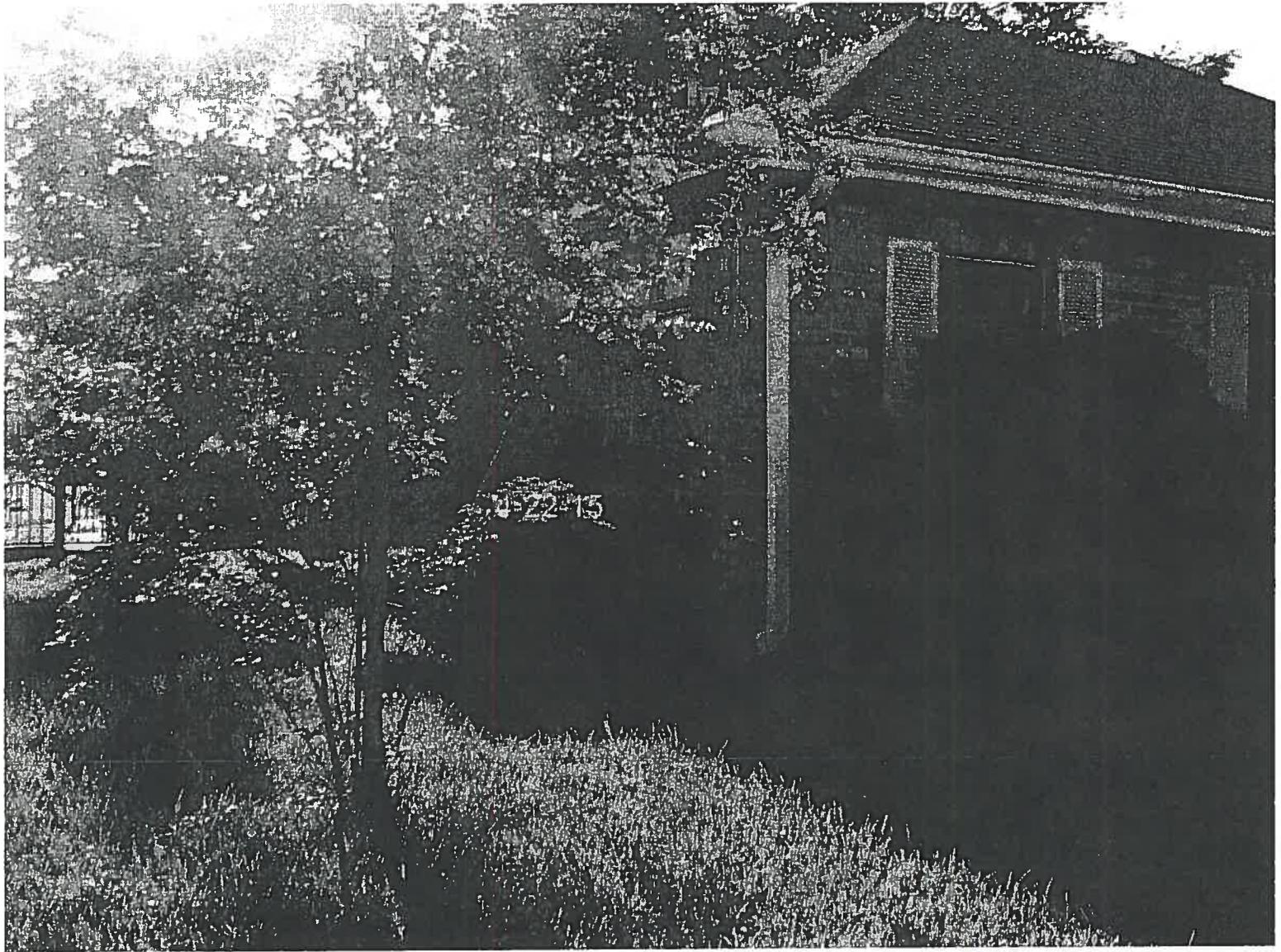


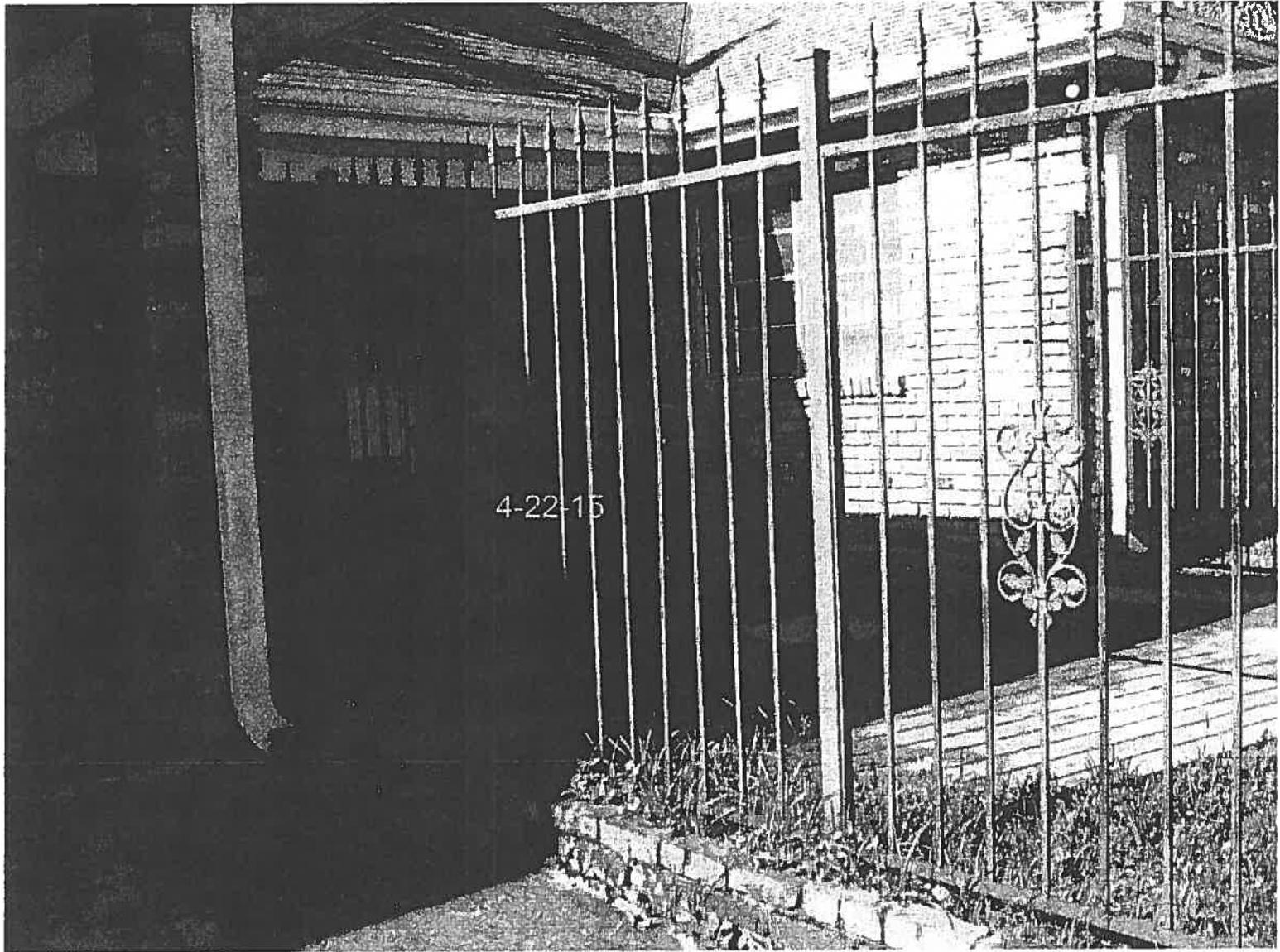
4-22-15

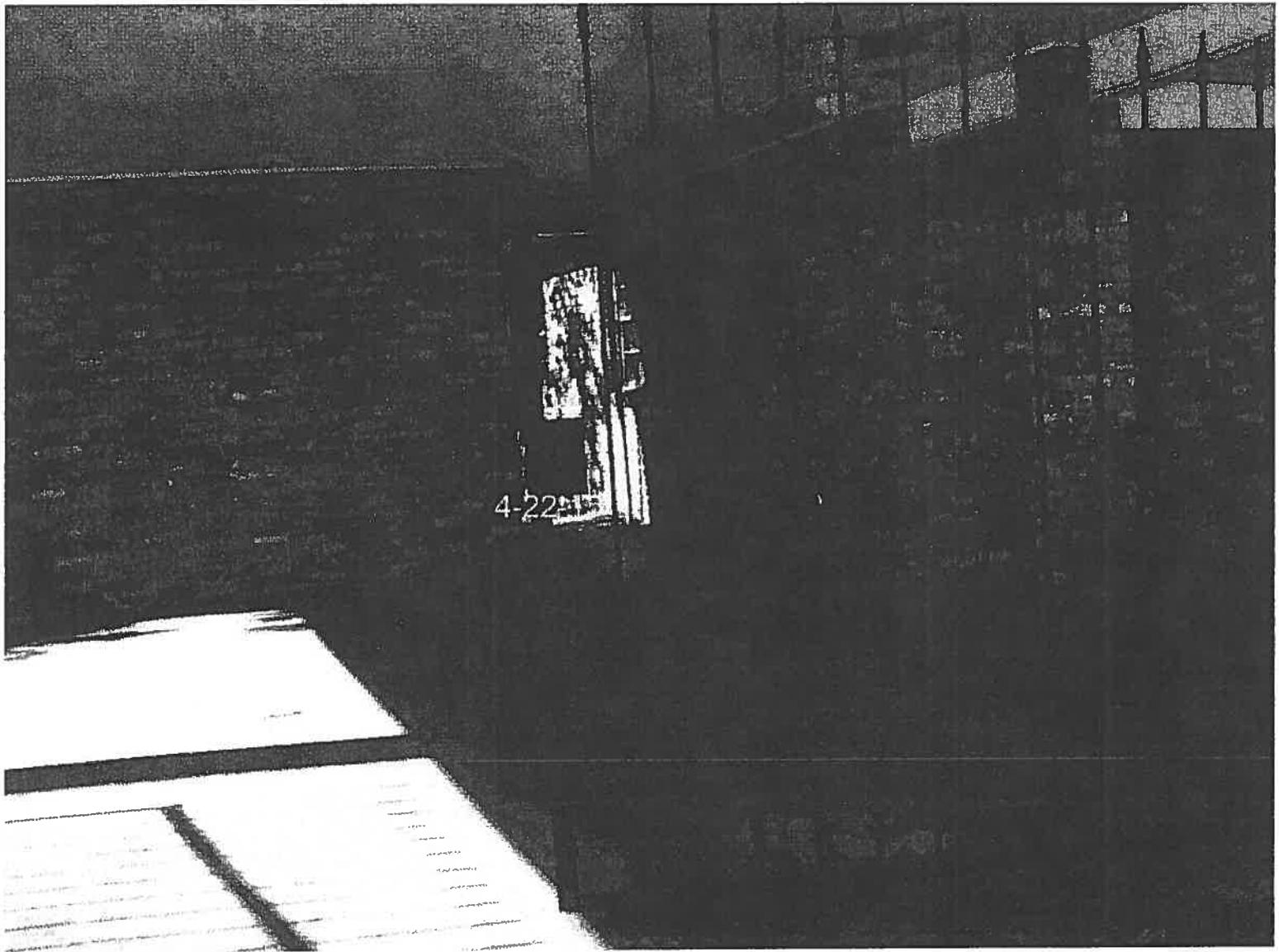




4-22-15







4-22-15



State of Louisiana

HAZARD MITIGATION GRANT PROGRAM

P.O. Box 5098 • BATON ROUGE, LA 70821-5098 • TOLL FREE (877) 824-8312 • FAX 225-330-0846 • hazardmitigation@mitigatela.org

July 9, 2013

Road Home ID: 06HH064599

MS TRACEY LYNN GREEN
4543 BUNDY RD
NEW ORLEANS, LA 70127

SUBJECT: Verification of Mitigation Grant Funds

Dear MS TRACEY LYNN GREEN:

A review has been completed on your Hazard Mitigation grant file in order to confirm you received the correct amount of grant funds. The grant requires that the homeowner meet specific requirements listed in the Alternative Payment Option Affidavit and Agreement. Failure to satisfy the conditions listed in the Alternative Payment Option Affidavit and Agreement and the OCD-DRU HMGP Covenant will place you in default of this agreement. In hopes that your input may prevent the need to seek a return of grant funds, please review the information below for accuracy and provide additional documentation as necessary.

Our review has determined that the following apply to your grant(s).

- Required documents to process your grant were not supplied to the Hazard Mitigation Grant Program.

Due to the determination noted above, your grant values have been adjusted:

Table with 4 columns: Grant Type, Original Value, Adjusted Grant Type, Adjusted Value. Rows include Elevation Grant, Individual Mitigation Measures (IMM), Reconstruction Grant, and Total HMGP Funds Received.

Based on the calculations above, our records indicate that the overpayment of your Hazard Mitigation Grant 06HH064599 is \$50,000.00.

EXHIBIT D tabbler

7012 3460 0000 1290 2081

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL™**



7012 3460 0000 1290 2081

Please understand that the State of Louisiana remains committed to ensuring that your application was processed in an accurate and fair manner, and in accordance with all governing laws, rules, and policies. We have assigned Deidra Davis, a case manager in our office, to work with you in connection with this request for input.

If you believe that the reason(s) stated above for the change of your grant amount is wrong, we need you to provide information for our consideration that shows the above finding is incorrect. Please return ATTACHMENT 1 (page 3 of this letter) with all supporting documentation to OCD for a final review.

**Your response must be postmarked within thirty (30) days of the date at the top of this notification letter. If you have additional questions regarding this letter, please call 225-330-0719 or send email to [deidra.davis@mitigatela.org](mailto:deidra.davis@mitigatela.org) for assistance.**

If you agree with the finding that an overpayment has occurred, you can return the funds as provided in Attachment 1. If you are unable to provide a full payment at this time, please contact your case manager for further instructions.

We appreciate your assistance in connection with this request. Failure to respond will be interpreted as your confirmation of this calculation and determination, and may result in additional collection activities.

Sincerely,

Office of Community Development - HMGP

OCD-DRU HMGP is a federally-funded program. Providing false or misleading information in an attempt to fraudulently obtain HMGP funds is a federal violation and will be prosecuted to the full extent of the law. Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. Because the HMGP program is a federally funded program, applicants are subject to Title 18, Section 1001 of the U.S. Code.

The Office of Community Development Disaster Recovery Unit does not discriminate on the basis of race, color, national origin, sex, age, religion or disability, and provides, upon request, reasonable accommodation, including auxiliary aids and services, to afford an individual with a disability an equal opportunity to participate in all services, programs and activities. Any persons requiring special needs assistance should contact a Call Center Specialist, at (877) 824-8312 at least five business days prior to any scheduled meeting. The TDD number for the hearing impaired is 1-800-846-5277. Additional information regarding the use of the Louisiana Relay service can be found at the following link: [http://www.hamiltonrelay.com/states/la\\_howto.html](http://www.hamiltonrelay.com/states/la_howto.html).

Attachment 1

THIS FORM MUST BE SIGNED BY THE BELOW NAMED APPLICANT AND RETURNED BY MAIL TO THE OFFICE OF COMMUNITY DEVELOPMENT ON OR BEFORE August 13, 2013.

Road Home ID: 06HH064599

MS TRACEY LYNN GREEN  
4543 BUNDY RD  
NEW ORLEANS, LA 70127

Case Manager: Deidra Davis

Please select one (1) option below. This form must be returned within thirty (30) days of the date on this letter.

I have elected to return the overpayment to the Office of Community Development, Disaster Recovery Unit. I have enclosed my certified check, made payable to "Louisiana Division of Administration - DRU", in the amount of \$50,000.00 mailed to:

Division of Administration  
Office of Community Development  
Hazard Mitigation Grant Program  
Finance Department  
P.O. Box 706  
Baton Rouge, Louisiana 70821

I agree with the finding that an overpayment has occurred but cannot make full payment at this time. Please have my case manager contact me. My proposed repayment plan is attached.

I disagree with the finding of an overpayment of my Hazard Mitigation grant and have enclosed supporting documents. The following factors used to calculate my award are incorrect:

\_\_\_\_\_  
\_\_\_\_\_

PRINTED NAME: \_\_\_\_\_ Date \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

I am not the primary applicant for this case. If checked, please state your relationship:

\_\_\_\_\_



State of Louisiana

HAZARD MITIGATION GRANT PROGRAM

P.O. Box 5098 • BATON ROUGE, LA 70821-5098 • TOLL FREE (877) 824-8312 • FAX 225-330-0846 • hazardmitigation@mitigatela.org

August 14, 2013

Road Home ID: 06HH064599

MS TRACEY LYNN GREEN
4543 BUNDY RD
NEW ORLEANS, LA 70127

SECOND NOTICE

SUBJECT: Verification of Mitigation Grant Funds

Dear MS TRACEY LYNN GREEN:

A review has been completed on your Hazard Mitigation grant file in order to confirm you received the correct amount of grant funds. The grant requires that the homeowner meet specific requirements listed in the Alternative Payment Option Affidavit and Agreement. Failure to satisfy the conditions listed in the Alternative Payment Option Affidavit and Agreement and the OCD-DRU HMGP Covenant will place you in default of this agreement. In hopes that your input may prevent the need to seek a return of grant funds, please review the information below for accuracy and provide additional documentation as necessary.

Our review has determined that the following apply to your grant(s).

- Required documents to process your grant were not supplied to the Hazard Mitigation Grant Program.

Due to the determination noted above, your grant values have been adjusted:

Table with 4 columns: Category, Amount, Category, Amount. Rows include Elevation Grant (\$50,000.00 / \$0.00), Individual Mitigation Measures (IMM) (\$0.00 / \$0.00), Reconstruction Grant (\$0.00 / \$0.00), and Total HMGP Funds Received (\$50,000.00 / Total Hazard Mitigation Benefit \$0.00).

Based on the calculations above, our records indicate that the overpayment of your Hazard Mitigation Grant 06HH064599 is \$50,000.00.

EXHIBIT
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Please understand that the State of Louisiana remains committed to ensuring that your application was processed in an accurate and fair manner, and in accordance with all governing laws, rules, and policies. We have assigned Deidra Davis, a case manager in our office, to work with you in connection with this request for input.

If you believe that the reason(s) stated above for the change of your grant amount is wrong, we need you to provide information for our consideration that shows the above finding is incorrect. Please return ATTACHMENT 1 (page 3 of this letter) with all supporting documentation to OCD for a final review.

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We appreciate your assistance in connection with this request. Failure to respond will be interpreted as your confirmation of this calculation and determination, and may result in additional collection activities.

Sincerely,

Office of Community Development - HMGP

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The Office of Community Development Disaster Recovery Unit does not discriminate on the basis of race, color, national origin, sex, age, religion or disability, and provides, upon request, reasonable accommodation, including auxiliary aids and services, to afford an individual with a disability an equal opportunity to participate in all services, programs and activities. Any persons requiring special needs assistance should contact a Call Center Specialist, at (877) 824-8312 at least five business days prior to any scheduled meeting. The TDD number for the hearing impaired is 1-800-846-5277. Additional information regarding the use of the Louisiana Relay service can be found at the following link: [http://www.hamiltonrelay.com/states/la\\_howto.htm](http://www.hamiltonrelay.com/states/la_howto.htm).

Attachment 1

THIS FORM MUST BE SIGNED BY THE BELOW NAMED APPLICANT AND RETURNED BY MAIL TO THE OFFICE OF COMMUNITY DEVELOPMENT ON OR BEFORE September 3, 2013.

Road Home ID: 06HH064599

MS TRACEY LYNN GREEN  
4543 BUNDY RD  
NEW ORLEANS, LA 70127

Case Manager: Deidra Davis

Please select one (1) option below. This form must be returned within fifteen (15) days of the date on this letter.

I have elected to return the overpayment to the Office of Community Development, Disaster Recovery Unit. I have enclosed my certified check, made payable to "Louisiana Division of Administration - DRU", in the amount of \$50,000.00 mailed to:

Division of Administration  
Office of Community Development  
Hazard Mitigation Grant Program  
Finance Department  
P.O. Box 706  
Baton Rouge, Louisiana 70821

I agree with the finding that an overpayment has occurred but cannot make full payment at this time. Please have my case manager contact me. My proposed repayment plan is attached.

I disagree with the finding of an overpayment of my Hazard Mitigation grant and have enclosed supporting documents. The following factors used to calculate my award are incorrect:

\_\_\_\_\_  
\_\_\_\_\_

PRINTED NAME: \_\_\_\_\_ Date \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

I am not the primary applicant for this case. If checked, please state your relationship:

\_\_\_\_\_

7012 3460 0000 1289 9534

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL**<sup>TM</sup>



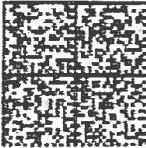
7012 3460 0000 1289 9534

LA Office of Community Development  
Disaster Recovery Unit  
Hazard Mitigation Grant Program  
P.O. Box 5098  
Baton Rouge, LA 70821-5098

**CERTIFIED MAIL™**



7022 3460 0000 1289 9534



U.S. POSTAGE ▶ PITNEY BOWES  
ZIP 70802 \$ 006.11<sup>0</sup>  
02 1W  
0001382559AUG 15 2013

 UNCLAIMED **FINAL NOTICE**

*Handwritten:* NIXIE  
8/21  
9/11/13

NIXIE 708 SE 1009 0009/22/13

RETURN TO SENDER  
UNCLAIMED  
UNABLE TO FORWARD

BC: 70821509898 \*2965-07567+15-39  
7 0821509898



State of Louisiana

**HAZARD MITIGATION GRANT PROGRAM**

P.O. Box 5098 • BATON ROUGE, LA 70821-5098 • TOLL FREE (877) 824-8312 • FAX 225-330-0846 •  
hazardmitigation@mitigatcla.org

2/26/2015

TRACEY GREEN  
4543 BUNDY ROAD  
NEW ORLEANS, LA 70127

Road Home ID: 06HH064599

**SUBJECT: Final HMGP Collection Attempt**

Dear TRACEY GREEN,

The Hazard Mitigation Grant Program has previously informed you of the need to reconcile the grant funds that were disbursed to you for your specific mitigation activity. The Program has previously sent you correspondence regarding the need to reconcile these funds. Because you have not responded, either through the return of grant funds or by providing satisfactory proof of completion of the funded mitigation activity, you are hereby notified that the Hazard Mitigation Grant Program is required to pursue collection of all funds.

You should be aware that the Hazard Mitigation Grant Program will use all available resources to recoup the grant funds disbursed to you including, but not limited to, collection agency services, wage garnishments, civil action, and income tax return liens.

This is the last correspondence you will receive from the Program in an attempt to collect these funds. **If you fail to return the \$50,000.00 owed to the State within five (5) calendar days your file will then be referred to the appropriate agencies for collection efforts as well as review for potential criminal violations.** All future correspondence will be directly from the appropriate collection agency. A table has been attached describing the grant funds received and the related activity for those funds.

You may stop the above actions by immediately contacting the Hazard Mitigation Grant Program at (504) 284-4067 to make acceptable repayment arrangements. Once your file has been referred for collection, your ability to reconcile the funds directly with the Program will end.

Respectfully,

Craig P. Taffaro, Jr.  
Director, Hazard Mitigation Grant Program  
and Recovery Coordination

**Enclosure**

OCD-DRU HMGP is a federally-funded program. Providing false or misleading information in an attempt to fraudulently obtain HMGP funds is a federal violation and will be prosecuted to the full extent of the law. Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. Because the HMGP program is a federally funded program, applicants are subject to Title 18, Section 1001 of the U.S. Code.

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AN EQUAL OPPORTUNITY EMPLOYER





# State of Louisiana

## HAZARD MITIGATION GRANT PROGRAM

P.O. Box 5098 • BATON ROUGE, LA 70821-5098 • TOLL FREE: (877) 824-8312 • FAX 225-330-0846 •  
hazardmitigation@mitigatela.org

Our review has determined that the following apply to your Elevation grant(s) because the applicant provided no proof of payment and performed no mitigation activity:

HMGP Grant Funds Received		Adjusted HMGP Values	
Elevation Grant	\$ 50,000.00	Elevation Grant	\$ 50,000.00
Individual Mitigation Measures (IMM)	\$ 0.00	Individual Mitigation Measures (IMM)	\$ 0.00
Reconstruction Grant	\$ 0.00	Reconstruction Grant	\$ 0.00
<b>Total HMGP Funds Received</b>	<b>\$ 50,000.00</b>	<b>Total Hazard Mitigation Benefit</b>	<b>\$ 50,000.00</b>

**Based on the calculations above, our records indicate that the overpayment of your Hazard Mitigation Grant 06HH064599 is \$50,000.00.**

Payment should be delivered to the following address:

State of Louisiana  
Hazard Mitigation Grant Program  
2021 Lakeshore Drive, Suite 100  
New Orleans, La. 70122

AN EQUAL OPPORTUNITY EMPLOYER

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)™.

**OFFICIAL USE**

7014 2120 0004 5100 6210  
0000 0000 0000 0000 0000 0000  
0000 0000 0000 0000 0000 0000

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark  
Here

Sent to  
*T. Green*

Street & Apt. No.  
or PO Box No. *4543 Bundy Rd.*

City, State, ZIP+4  
*MOIA 70127*

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*J. Green  
4543 Bundy Rd,  
NOIA 70177*

*D64599*

2. Article Number  
(Transfer from service label)

7014 2120 0004 5100 8210

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*X [Signature]*  Agent  Addressee

B. Received by (Printed Name)

C. Date of Delivery

*T. Green 08-3-10*

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Certified Mail®  Priority Mail Express™
- Registered  Return Receipt for Merchandise
- Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)  Yes



State of Louisiana  
**HAZARD MITIGATION GRANT PROGRAM**

2021 LAKESHORE DRIVE, SUITE 100, NEW ORLEANS, LA 70122 • PHONE: 504-284-4020

April 13, 2015

06HH064599  
TRACEY GREEN  
4543 BUNDY ROAD  
NEW ORLEANS LA 70127

Re: Collection of Outstanding Debt in the Amount of **\$50,000.00**

Dear TRACEY GREEN:

This letter is pursuant to your agreement to voluntarily participate in the State of Louisiana's Hazard Mitigation Grant Program ("HMGP") and to comply with all HMGP and Federal Emergency Management Agency ("FEMA") rules and guidelines, which includes the proper use of Federal grant funds for the mitigation of your home located at 4543 BUNDY ROAD NEW ORLEANS.

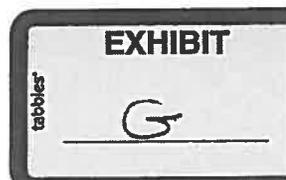
You have been notified on multiple occasions via demand letters about your debt owed to HMGP in the amount of **\$50,000.00**. However, you have continuously disregarded these notices. You have also been given the opportunity to execute a re-payment agreement which would allow you to satisfy your debt within an agreed upon timeframe and at an agreed monthly amount. However, as of this date, you have failed to and/or refused to execute a re-payment agreement.

If payments have been paid pursuant to a payment agreement, then you should immediately contact the Program to verify the amount currently owed to the Program.

Please know that litigation and/or prosecution will be instituted against you for the collection of your unresolved debt.

Sincerely,

La Koshia R. Roberts  
Attorney for HMGP



U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

7014 0510 0001 1416 8621

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	064549

Postmark  
Here

Date: \_\_\_\_\_  
To: Tracey Green  
Street, Apt. No. or PO Box No.: 1543 Bundy Rd  
City, State, ZIP+4: NO. LA 70127



# USPS Tracking™



Tracking Number: 70140510000114168621

## Product & Tracking Information

Avz

Postal Product:

Features:  
Certified Mail™

DATE & TIME	STATUS OF ITEM	LOCATION
April 18, 2015 , 10:38 am	Delivered	NEW ORLEANS, LA 70131
Your item was delivered at 10:38 am on April 18, 2015 in NEW ORLEANS, LA 70131.		
April 18, 2015 , 10:36 am	Notice Left (No Authorized Recipient Available)	NEW ORLEANS, LA 70131
April 17, 2015 , 10:31 pm	Departed USPS Facility	NEW ORLEANS, LA 70113
April 17, 2015 , 4:19 pm	Arrived at USPS Facility	NEW ORLEANS, LA 70113
April 16, 2015 , 10:43 pm	Departed USPS Facility	BATON ROUGE, LA 70826
April 16, 2015 , 9:26 pm	Arrived at USPS Facility	BATON ROUGE, LA 70826
April 13, 2015 , 8:43 pm	Departed USPS Facility	NEW ORLEANS, LA 70113
April 13, 2015 , 7:55 pm	Arrived at USPS Facility	NEW ORLEANS, LA 70113