

## Judgment Payments & Office of Insurance and Claims Management Petition

### Petition to Amend Home Rule Charter of the City of New Orleans

Pursuant to Article IX, Chapter 2, Section 9-201 paragraph (b) of the City of New Orleans Home Rule Charter, the undersigned duly qualified registered voters of the City of New Orleans hereby petition the Council of the City of New Orleans to schedule the election to add an additional chapter titled "Office of Claims Management" to Article IX (proceeding Chapter 5 or subsequent amendment of this section) of the Home Rule Charter by affirmative vote of a majority of the qualified electors of the City voting thereon, at a special election to be called for this purpose, the date of which shall be held on the first available election date pursuant to Section 9-202 (2), by adding the following language:

1. The Office of Insurance & Claims Management (OICM) for the City of New Orleans is created for the purpose of paying all past, present and future claims and judgments for goods and services and/or damages made or entered against the City of New Orleans and all city Departments (referred to jointly as City) other than for Workers Compensation claims. City shall pay all salaries and expenses of the OICM.
2. The position of Insurance & Claims Manager shall be created within the OICM to manage the affairs of the OICM who is hereby granted the authority to authorize and make payment for all claims and judgments against City and who shall serve at the pleasure of the City Council.
3. The OICM is required to identify all the third-party liability exposures of the city and purchase liability insurance for such with a minimum of \$1,000,000 per occurrence and \$10,000,000 annual aggregate limits. Any deductible or self-insured retention required by said insurance shall be funded in an escrow bank account in accordance with paragraph 4 below or as required by said insurance coverage policy and all claims and losses covered by said self-insured retention shall be identified by acceptable loss reserving practices.
4. The OICM shall establish an OICM Escrow Bank Account (Account) for the purpose of paying all past, present, and future liability claims and judgments, including judgments for goods and services, against City and insurance premiums for liability insurance coverage. City and OICM are prohibited from using funds of Account for paying the salaries and expense of OICM, any other expense of City, or for insurance or damage to property owned by or leased or rented to City.
5. The City of New Orleans dedicates 25% of all monthly sales tax revenue collected to the funding and payment of judgments and insurance and shall deposit those funds into Account at the end of each month. Failure to do so timely shall be deemed malfeasance and referred to the appropriate law enforcement authority for prosecution. The dedication of funds shall be deemed an appropriation of funding and subject to lien.
6. All unpaid final judgments that remain unpaid on the effective date of this provision shall be paid in full including interest and no discount shall be required in exchange for quick payment. However, partial payments may be agreed upon wherein at the discretion of the judgment creditor; the judgment creditor agrees to accept payment by installments.
7. After all claims and judgments entered by any court prior to the effective date of this Section have been paid, the OICM shall maintain Account balance equal to the loss reserve amounts for all outstanding claims as identified in paragraph 3 above and an amount equal to two years of liability insurance premium(s). Any funds in Account in excess of the loss reserves and insurance premiums shall be returned to the general fund of City.

#	Signature <small>Note: Any person unable to write must affix their mark. The person circulating the petition shall affix the name of person in the presence of two witnesses with date affixed.</small>	Printed Name of Voter	Date of Birth	Date of Signature	Wd. / Pct. of voter's registration	Residence Address <small>(Include municipal #, apartment#, rural route, city and zip code)</small>	Witness(s) & Date <small>(Name of the person(s) who witnessed and obtained signature.)</small>
For office use only	<i>Signature</i>	Print Name Very Neat	DOB	Date		Street Address <span style="float: right;">Apt</span> New Orleans, LA <span style="float: right;">Zip Code</span>	
		Office Use Only - Voter ID #				Email Address	
	<i>Signature</i>	Print Name Very Neat	DOB	Date		Street Address <span style="float: right;">Apt</span> New Orleans, LA <span style="float: right;">Zip Code</span>	
		Office Use Only - Voter ID #				Email Address	
	<i>Signature</i>	Print Name Very Neat	DOB	Date		Street Address <span style="float: right;">Apt</span> New Orleans, LA <span style="float: right;">Zip Code</span>	
Office Use Only - Voter ID #		Email Address					
<i>Signature</i>	Print Name Very Neat	DOB	Date		Street Address <span style="float: right;">Apt</span> New Orleans, LA <span style="float: right;">Zip Code</span>		
	Office Use Only - Voter ID #				Email Address		
<i>Signature</i>	Print Name Very Neat	DOB	Date		Street Address <span style="float: right;">Apt</span> New Orleans, LA <span style="float: right;">Zip Code</span>		
	Office Use Only - Voter ID #				Email Address		

**Return all pages to: NOLA Initiative PO Box 231197 New Orleans, LA 70123**

**Download this form at [NOLAinitiative.org](http://NOLAinitiative.org)**

**Email [Mikey@nolainitiative.org](mailto:Mikey@nolainitiative.org) for any questions or concerns.**

<b>Office use only:</b>  Page _____ of _____	<b>Registrar use:</b>
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