

**Before the  
United States Department of Housing and Urban Development  
Washington, D.C.**

In the Matter of:	)	
Advanced Notice of Proposed Rule-Making -	)	
Public Comment on Changes to Requiring	)	Docket No. FR-6257-A-01
Accessibility and Prohibiting Discrimination	)	
on the Basis of Disability in HUD-Assisted	)	
Programs	)	

**COMMENTS OF ADVOCATES FOR THE EMS DISABLED  
IN RESPONSE TO NOTICE FOR PUBLIC COMMENTS**

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Minneapolis, MN; 5G Free Rhode Island, Sheila Resseger, M.A., Cranston, RI; Steve Romine, Woodstock, NY; Kathleen Watson, EMS Disabled, Forestville, CA; Mary Lin, Longmont, CO; Pennsylvania for Safe Technology, Elizabeth Feudale-Bowes, EMS Disabled; Coloradans for Safe Technology, Andrea Mercier (mother of child with environmental sensitivity including but not limited to EMS), Colorado Springs, CO; EMF Safety Network, Sidnee Cox, Director, Windsor, CA; Nick Curto, New York, NY; and La Plata for Safe Technology, Deborah Shisler, EMS Disabled, La Plata, CO (collectively, hereinafter, “Advocates for the EMS Disabled”) submit these comments in response to the notice for public comments<sup>1</sup> relating to the above-captioned matters.

As the U.S. Department of Housing and Urban Development (HUD) noted in the Federal Register, “[t]he Department’s Section 504 regulations, as a whole, have not been significantly updated since their initial publication in 1988 . . . HUD-initiated Section 504 compliance reviews . . . underscore ongoing discrimination faced by individuals with disabilities.”<sup>2</sup>

There are many environmental, societal and technological changes that have occurred since 1988, including the proliferation of a cascade of wireless radiation from facilities and devices being released into the atmosphere which has largely gone unacknowledged and undetected largely because it cannot be seen.

These comments relate to Questions 1 through 4, 9 through 11 and 13.

### **Question 1**

The definition for “disabilities” should be expanded to include those disabilities and handicaps arising from recurring exposure and injuries (“sensitivity”) from microwave (MW) radiation, electro-magnetic frequency (EMF) radiation or radio frequency (RF) radiation (collectively, “radiation”). This is also referred to as “radiation sickness,” “radiation poisoning” or “electro-magnetic sensitivity” (EMS). Those disabled by this radiation are herein referred to as “EMS Disabled.”

- **Involuntary Exposure**

Exposure comes from involuntary exposure to cell towers, “small” cells, wireless antennas, “smart” meters, cell phones, Wi-Fi. Radiation can emanate from within the premises of a home, structure or facility, or from outside that, if close enough, will affect the livability and safety of the premises (e.g., an adjacent apartment using Wi-Fi, near an elevator shaft where people are using their cell phones with radiation penetrating through adjacent apartments,

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<sup>1</sup> Notice of virtual public meeting and request for public comments, Docket ID No. EPA-HQ-OA-2022-0050, <https://www.federalregister.gov/documents/2022/04/13/2022-07867/white-house-environmental-justice-advisory-council-notification-of-virtual-public-meeting>.

<sup>2</sup> <https://www.federalregister.gov/documents/2023/04/25/2023-08464/nondiscrimination-on-the-basis-of-disability-updates-to-huds-section-504-regulations>.

facing a cell tower or “small” cell or a top floor apartment with a rooftop antenna directly overhead).

Exposure is usually 24/7 with no “off” switch, and where individuals are uninformed of the exposure or the intensity of exposure. Even when becoming aware and objecting to such exposure, individuals are nonetheless forced to be exposed in what otherwise should be the privacy and safety of their homes or in anchor institutions where they require services.

- **HUD Recognizes Environmental Illness in 1992**

Involuntary exposure to MW/EMF radiation can lead to Environmental Illness. Environmental Illness has long been recognized by HUD. See, e.g., the March 5, 1992 legal memorandum from Carole Wilson, Associate General Counsel for Equal Opportunity and Administrative Law to Frank Keating, General Counsel of HUD on the subject of “Multiple Chemical Sensitivity Disorder [MCS] and Environmental Illness [EI] as Handicaps.”<sup>3</sup>

In recognizing EI as a handicap, Wilson states:

[W]e conclude that MCS and EI can constitute handicaps under the Act. Our conclusion is consistent with the weight of both federal and state judicial authority construing the [Fair Housing] Act and comparable legislation, the Act's legislative history, as well as the interpretation of other Federal agencies, such as the Social Security Administration and the Department of Education, construing legislation within their respective domains. The Civil Rights Division of the Department of Justice has also informed us that it believes MCS and EI can be handicaps under the Act. In addition, HUD has consistently articulated this position, and FHEO [Fair Housing/Equal Opportunity] agrees with our conclusion.

Section 802(h) of the Fair Housing Act defines handicap:

(h) "Handicap" means, with respect to a person--

(1) a physical or mental impairment which substantially limits one or more of such person's major life activities ...<sup>4</sup>

As defined by HUD’s implementing regulation in 24 C.F.R 100.201 (1991):<sup>5</sup>

***Physical ... impairment*** includes:

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<sup>3</sup> <https://www.hud.gov/sites/documents/GME-0009LOPS.PDF>.

<sup>4</sup> Fair Housing Act (Title VIII of the Civil Rights Act), <https://www.corada.com/documents/fhaa/sec-802-h-42-u-s-c-3602-h-handicap>.

<sup>5</sup> <https://www.law.cornell.edu/cfr/text/24/100.201>.

- (1) Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: Neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular;

**Major life activities** means functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working.

[Emphasis added]

The memo further itemizes the kinds of physical impairments that can be experienced by exposure, e.g. neurological (ear ringing, seizures), musculoskeletal (fatigue), special sense organs (ear ringing), respiratory (shortness of breath).

- **Environmental Illness Includes injuries from MW/EMF/RF Radiation**

**Similar physical impairments and many more are experienced by those exposed to MW/EMF/RF radiation, and the time has come for HUD to finally recognize them and place the full weight of the Fair Housing Act, the Americans with Disabilities Act and HUD regulations on accommodations for those who are EMS Disabled.**

Common EMS symptoms include sleep disturbances, chronic fatigue, chronic pain, poor short-term memory, difficulty concentrating (e.g., “brain fog”), skin problems, dizziness, loss of appetite, heart palpitations, tremors, vision problems, tinnitus, nose bleeds, asthma, reproductive problems and headaches, to name a few.<sup>6</sup> There are other sources showing the proliferation of EMF sensitivities and disabilities.<sup>7</sup> The symptoms are from the physiological injuries that individuals have sustained.<sup>8</sup>

- **The nature of MW/EMF/RF radiation**

It is the pulsations of RF radiation that cause adverse health outcomes.<sup>9</sup>

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<sup>6</sup> “Electrohypersensitivity as a Newly Identified and Characterized Neurologic Pathological Disorder” Int’l Journal of Molecular Sciences, <https://www.mdpi.com/1422-0067/21/6/1915>.

<sup>7</sup> Electrohypersensitivity (EHS) Is An Environmentally-Induced Disorder That Requires Immediate Attention, Dr. Magda Havas, J. Sci Discov (2019), <http://www.e-discoverypublication.com/wp-content/uploads/2019/03/JSD18020-final.pdf>; Presentation by Karl Maret, M.D., M.Eng., Presentation, 1-17-20, <https://www.youtube.com/watch?v=XiIsy3mcjcY>; “The Bioinitiative Report,” <https://bioinitiative.org/>.

<sup>8</sup> Letter by Dr. Beatrice Golomb, Professor of Medicine, UC San Diego School of Medicine, Aug. 22, 2017, <https://mdsafetech.org/wp-content/uploads/2017/09/golomb-sb649-5g-letter-8-22-20171.pdf>.

<sup>9</sup> See, Brief of Children’s Health Defense, and Building Biology Institute, et al as Amici Curiae in Support of Appellees/Cross-Appellants “Customers,” Sept 14, 2021, <https://childrenshealthdefense.org/wp-content/uploads/Brief-and-Addendum-Submitted-9-14.pdf>.

Wireless emissions are typically measured by the FCC by averaging the peaks and lowest points of RF radiation emissions and exposure levels over a period of 30 minutes. There are two problems with this methodology. First, it completely obscures the effects of the pulsating nature of RF radiation emissions and does not account for constant 24/7 exposure by the population to RF emissions.

Second, the pulsating peaks are higher than the recorded average.<sup>10</sup> Third, the health outcomes occur with the persistent pulsations of RF radiation emissions. It is the pulsed high peak power emissions that, e.g., increase the potential for traumatic brain injury.<sup>11</sup> To obtain a more accurate reading of RF radiation emissions, the maximum power density and peak power density levels per millisecond should be recorded, as adverse health outcomes arise from the peaking and pulsating nature of wireless emissions.<sup>12</sup>

To get an idea of the range of MW/EMF/RF radiation, see the heat map in Appendix D which illustrates the wide arc of radiation.<sup>13</sup> Although the map exemplifies a pole top antenna, there would be a similar arc of radiation (depending on intensity, position and other factors) for rooftop antennas, smart meters, Wi-Fi and other facilities and devices.

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<sup>10</sup> Dr. Magda Havas: WiFi in Schools is Safe. True or False? at 7:15, <https://www.youtube.com/watch?v=6v75sKAUFdc>.

<sup>11</sup> Computational modeling investigation of pulsed high peak power microwaves and the potential for traumatic brain injury. *Sci Adv.* 2021 Oct; 7(44). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8555891/>.

<sup>12</sup> Human-made electromagnetic fields: Ion forced-oscillation and voltage-gated ion channel dysfunction, oxidative stress and DNA damage (Review) (2021) Pangopolous DJ, et al. *International Journal of Oncology.* August 23, 2021. <https://pubmed.ncbi.nlm.nih.gov/34617575/>.

Computational modeling investigation of pulsed high peak power microwaves and the potential for traumatic brain injury. *Sci Adv.* 2021 Oct; 7(44). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8555891/>. ("These studies reveal that the MAE threshold depends on the energy in a single pulse (not the average power density) for sufficiently short pulses [e.g., 32  $\mu$ s in (46)], and peak power densities of 102 to 105 mW/cm<sup>2</sup> have been known to cause auditory effects in human participants (45).")

Diplomats' Mystery Illness and Pulsed Radiofrequency/Microwave Radiation. Dr. Beatrice Golomb. *Neural Comput.* 2018 Nov; 30(11):2882-2985. <https://pubmed.ncbi.nlm.nih.gov/30183509/>; "Reported facts appear consistent with pulsed RF/MW as the source of injury in affected diplomats."

"5G: Great risk for EU, U.S. and International Health! Compelling Evidence for Eight Distinct Types of Great Harm Caused by Electromagnetic Field (EMF) Exposures and the Mechanism that Causes Them," Martin L. Pall, PhD, <https://peaceinspace.blogs.com/files/5g-emf-hazards--dr-martin-l.-pall--eu-emf2018-6-11us3.pdf>.

Belyaev, I., Dean, A., Eger, H. et al. "EUROPAEM EMF Guideline 2016 for the prevention, diagnosis, and treatment of EMF-related health problems and illnesses." *Rev environ Health.* 2016;31(3):363-397. Doi:10.1515/reveh-2016-0011.

B. W. G. (2012). "Bioinitiative Report 2012: A Rationale for Biologically-based Exposure Standards for Low-Intensity Electromagnetic Radiation."

<sup>13</sup> <https://ehtrust.org/wp-content/uploads/5G-Health-and-Policy-New-York-City-March-15-2023-.pdf> at p.6.

Electrosmog refers to the erratic pulsating RF radiation emanating from wireless and the production of dirty electricity. Regarding intensity, and to put this in perspective, Martin L. Pall, PhD, Professor Emeritus of Biochemistry and Basic Medical Sciences, Washington State University, provided evidence in the FCC's docket that the FCC's existing RF exposure limits "are approximately 7.2 million times too high."<sup>14</sup>

This is noteworthy as this was in connection with a federal case decided in 2021 by the D.C. Circuit, Court of Appeals. The Court rebuked the FCC and remanded the FCC's emission limits for further consideration in light of scientific evidence which the FCC ignored that had been presented into the FCC's docket of health hazards below those limits.<sup>15</sup> To date, the FCC has failed to update its limits dating back to 1996, and **can no longer be viewed as safety limits.**

Therefore, wireless exposure limits set by the FCC are not safety limits to protect the public, but are a **safe harbor for industry to provide immunity** from liability for personal injury, no matter how badly people are injured.<sup>16</sup> Moreover, **the FCC has declined to set regulations with respect to RF impacts on individuals disabled by RF radiation.**<sup>17</sup> **Therefore, It should not be used as a safe harbor for HUD not to acknowledge or provide accommodation for such injuries.**

- **A Court Rules No Federal Preemption for Challenges for Accommodation under the Americans with Disabilities Act**

In declining to set regulations with respect to RF impact on individuals disabled by RF radiation, **the FCC has opened the door to allow legal challenges on the subject and claims for accommodation under the Americans with Disabilities Act (ADA).**<sup>18</sup> It was clarified in the Second Circuit in 2000, and reiterated in a district court in the First Circuit, that:

[T]he FCC found it "impracticable" to "evaluate the significance of studies purporting to show biological effects," and that this was 'especially true for

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<sup>14</sup> Appeals Court Tells FCC to Address Non-Thermal Health Impacts of Radiation from Wireless Technology on Children, the Public, and the Environment, Aug. 25, 2021, <https://ehtrust.org/appeals-court-tells-fcc-to-address-non-thermal-health-impacts-of-radiation-from-wireless-technology-on-children-the-public-and-the-environment/>.

<sup>15</sup> Environmental Health Trust, et al v FCC, Aug 13, 2021; [https://www.cadc.uscourts.gov/internet/opinions.nsf/FB976465BF00F8BD85258730004EFDF7/\\$file/20-1025-1910111.pdf](https://www.cadc.uscourts.gov/internet/opinions.nsf/FB976465BF00F8BD85258730004EFDF7/$file/20-1025-1910111.pdf); see also, <https://ehtrust.org/in-historic-decision-federal-court-finds-fcc-failed-to-explain-why-it-ignored-scientific-evidence-showing-harm-from-wireless-radiation/>; Factsheet: FCC's Lack of Review for Wireless Radiation Exposure Limits, <https://ehtrust.org/wp-content/uploads/EHT-et-al.-v.-FCC-Factsheet-EHTRUST.org-1-1.pdf>.

<sup>16</sup> See also these two comprehensive briefings MW/EMF/RF risk, <https://ehtrust.org/wp-content/uploads/Setbacks-Ordinances-Health-Liability-for-Wireless-Facilitites-.pdf> and <https://ehtrust.org/wp-content/uploads/5G-Health-and-Policy-New-York-City-March-15-2023-.pdf>.

<sup>17</sup> *G v. Fay Sch., Inc.*, 282 F. Supp. 3d 381, 394-95 (D. Mass. 2017).

<sup>18</sup> *Id.*

such controversial issues as non-thermal effects and whether certain individuals might be ‘hypersensitive’ or ‘electrosensitive.’<sup>19</sup>

The district court also clarified that:

Rather than precluding the possibility that a few individuals might be particularly sensitive to RF emissions below the established threshold, **the FCC actually leaves the door open on this issue.**<sup>20</sup> [Emphasis added]

That means that, under this court’s ruling, there is no federal preemption under the FCC guidelines or the Telecommunications Act of 1996 to bring challenges for accommodation under the ADA. This is consistent with the guidelines of federal agencies as explained further in this submission, including the United States Access Board, the U.S. Social Security Administration and the Department of Labor, all of which recognize EMS as a disability. **It’s time for HUD to do the same.**

- **The Nature of Dirty Electricity**

In addition, RF radiation from cell towers can produce dirty electricity. Samuel Milham, MD, MPH, and former senior epidemiologist at Washington State Department of Health, explains how transient voltages can be generated by cell towers:

[E]very cell tower has an inverter or switching power supply to change the grid AC to DC to run the microwave transmitter and to charge the backup batteries. These generate dirty electricity [kilohertz pollution] which flows back into the grid.<sup>21</sup>

Alasdair Philips, an E.U. electrical and electronics engineering expert, cautions that

[C]ell tower antennas sited close to electrical generation stations and power lines can couple with and flow through the transmission lines, even in some cases **creating dangerous standing RF waves** along those transmission lines” which can “resonate with house wiring, causing high fields inside houses, often from lights which hang from the ceilings, the radio frequencies running down the electric flex.” He further explains that microwave antennas mounted on power or utility poles are a “dangerous technology” and will “further degrade the public health.”<sup>22</sup>

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<sup>19</sup> *Id.* quoting *Cellular Phone Taskforce v. F.C.C.*, [205 F.3d 82, 90](#) (2d Cir. 2000) (quoting *Procedures for Reviewing Requests for Relief from State and Local Regulations Pursuant to Section 332(c)(7)(B)(v) of the Communications Act of 1934*, 12 F.C.C. Rcd. 13494, at 31, 1997 WL 522796 (1997).

<sup>20</sup> *G v. Fay Sch., Inc.*

<sup>21</sup> [http://www.wi-cancer.info/antenna\\_sickness.aspx](http://www.wi-cancer.info/antenna_sickness.aspx).

<sup>22</sup> [http://www.wi-cancer.info/antenna\\_sickness.aspx](http://www.wi-cancer.info/antenna_sickness.aspx).

There is also the danger of transients, “which carry erratic spikes of voltage into electrical systems” which can also have serious health outcomes. Transient voltages are momentary spikes or surges, which cause electrical transformers to operate inefficiently and run hotter than normal.<sup>23</sup>

- **EMS Disability/Injury Recognized by Federal Agencies and Internationally**

The U.S. Access Board (which advises the Justice Department and other state and federal agencies under the Americans with Disabilities Act) recognized EMS disability going back to 2002.<sup>24</sup> It notes that a U.S. National Institute of Building Sciences survey of a representative region found that 2-6% of the population are sensitive to electro-magnetic fields.<sup>25</sup> That would represent about 6.5 million to 20 million of the U.S. population.

A 2019 Bevington study,<sup>26</sup> analyzed the prevalence of EMS within a given population:

- 0.65% Can't work
- 1.5% Severe symptoms
- 5% Moderate symptoms
- 30% Mild symptoms

Based on a population of 332.4 million people in the U.S., the numbers are shockingly high:

Percentages	Number of U.S. EMF Sensitive/Disabled
Can't work – 0.65%	2.16 million
Severe symptom – 1.5%	4.99 million
Moderate symptoms – 5%	16.6 million
Mild symptoms – 30%	99.7 million

**The Department of Defense has guidelines that also recognizes injuries that may occur to its personnel from RF radiation.<sup>27</sup>** As early as 2000, the Social Security Administration also made a

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<sup>23</sup> *Causes and Effects of Transient Voltages*, <https://s3energy.com/learn/causes-and-effects-of-transient-voltages/#:~:text=Transient%20degrade%20the%20contacting%20surfaces,a%20non%2Dexistent%20current%20demand.>

<sup>24</sup> U.S. Access Board, *Advancing Full Access & Inclusion for All*, “Indoor Environmental Quality Project,” <https://www.access-board.gov/research/building/indoor-environmental-quality/>.

<sup>25</sup> U.S. Access Board – *Advancing Full Access & Inclusion for All* - “Indoor Environmental Quality Project,” <https://www.access-board.gov/research/building/indoor-environmental-quality/>.

<sup>26</sup> “The Prevalence of People with Restricted Access to Work in Manmade Electromagnetic Environments,” *Journal of Environment and Health Science*, <https://mdsafetech.files.wordpress.com/2019/10/2018-prevalence-of-electromagnetic-sensitivity.pdf>.

<sup>27</sup> DoD Instruction 6055.11, “Protecting Personnel from Electromagnetic Fields,” <https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/605511p.pdf>.

determination of severe impairment.<sup>28</sup> The National Institute of Building Sciences (NIBS) was contracted by the U.S. Access Board to examine how to accommodate the needs of the electro-sensitive in federally funded buildings; in 2005, they produced a report, the Indoor Environmental Quality (IEQ) Report.<sup>29</sup> The IEQ recommended the following:

Cell Phones Turned Off: Protect those with electromagnetic sensitivities and others who may be adversely affected by electrical equipment.

Ability to turn off or unplug computers and other electrical equipment by occupant or staff: Protect those with electromagnetic sensitivities.

People with electromagnetic sensitivities can experience debilitating reactions... from electromagnetic fields emitted by computers, cell phones, and other electrical equipment. The severity of sensitivities varies among people with electromagnetic sensitivities...According to the Americans with Disabilities Act (ADA) and other disability laws, public and commercial buildings are required to provide reasonable accommodations for those disabled by electromagnetic sensitivities. These accommodations are best achieved on a case-by-case basis.<sup>30</sup>

The National Council on Disabilities (NCD) issued a Framework for health equity, recognizing EMS:<sup>31</sup>

Provide mandatory industry guidance, including recommended policies, training and best practices, to address the needs of people disabled by exposure to low level chemical, electromagnetic, and other environmental exposures **that preclude access to care and treatment at medical, dental and at other providers' offices, hospitals, surgical centers, and other healthcare and healthcare-related facilities**, as a result of their use of chemical, fragranced and other scented products, and also as a result of the usage of wireless communications and electrical technologies and other sources of non-ionizing radiation, which may trigger disabling and life-threatening cardiac, respiratory, neurological, and other adverse physical reactions. (Requires administrative action through HHS Office of Civil Rights, and further research concerning this matter should be conducted by the FDA, NIH, HHS, **and HUD**.) [Emphasis added]

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<sup>28</sup> <https://ehtrust.org/wp-content/uploads/Electromagnetic-Sensitivity-Found-to-be-a-Severe-Impairment-by-the-Social-Security-Administration-2003-and-2020-.pdf>.

<sup>29</sup> <https://www.access-board.gov/research/building/indoor-environmental-quality/>.

<sup>30</sup> Id at 51-52.

<sup>31</sup> <https://ncd.gov/sites/default/files/NCD-Framework-to-End-Health-Disparities-of-People-with-Disabilities.pdf> at Page 10, Sub-Component 6.

A presentation on EMS disability was made to NCD on May 12, 2022 where information included the need to provide access and accommodation for the EMS Disabled.<sup>32</sup>

The Job Accommodations Network (JAN) funded by the U.S. Department of Labor's Office of Disability Employment Policy (DOL/DEP) has issued a list of guidelines that recognize EMS and requires accommodation (see listing for "Electrical Sensitivity & Hypersensitivity," and "Electromagnetic Fields and Public Health").<sup>33</sup> The EMF Medical Conference has been posted as a resource, and it would be advisable for HUD to review and study it.<sup>34</sup>

The Center for Disease Control (CDC), in its International Classification of Diseases, recognizes a medical diagnosis for MW/EMF/RF injuries:<sup>35</sup>

- ICD-10-CM "diagnosis code" for radiation sickness is "T66."
- ICD-10-CM "injury" code for "Exposure to radio frequency" and "Exposure to other non-ionizing radiation" is "W90."

EMS symptoms have also been legally recognized in other countries. Sweden was the first country to recognize EMS as a functional impairment in 2002. EMS also became recognized: (a) in 2002 by the U.S. Access Board (the federal agency devoted to accessibility issues for people with disabilities),<sup>36</sup> (b) in 2007 by the Canadian Human Rights Commission,<sup>37</sup> and (c) in 2009 by the European Parliament.<sup>38</sup> Courts have awarded disability claims to people with electromagnetic sensitivity in Australia,<sup>39</sup> France,<sup>40</sup> Spain,<sup>41</sup> United Kingdom,<sup>42</sup> and United States.<sup>43</sup>

- **Descriptions of Injuries Suffered by Individuals**

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<sup>32</sup> <https://www.electrosensitivesociety.com/national-council-on-disability-ncd-ehs-mcs-presentation-may-12-2022/> (includes transcripts, slide deck and historical timeline of MWEMF/RF exposure).

<sup>33</sup> <https://askjan.org/disabilities/Electrical-Sensitivity.cfm#otherinfo>.

<sup>34</sup> <https://askjan.org/disabilities/Electrical-Sensitivity.cfm#otherinfo>.

<sup>35</sup> <https://icd10cmtool.cdc.gov/?fy=FY2023&query=radiation>.

<sup>36</sup> Johansson O. Electrohypersensitivity: state-of-the-art of a functional impairment. *Electromagn Biol Med.* 2006;25(4):245-58. doi: 10.1080/15368370601044150. PMID: 17178584.

<sup>37</sup> Policy on Environmental Sensitivities, Canadian Human Rights Commission, 2007, Policy Reviewed 2014.

<sup>38</sup> Full recognition of electromagnetic hypersensitivity (EHS) in Europe, European Parliament, 2009.

<sup>39</sup> 'Wi-fi allergies' issue flares up in Australia, iNews, <https://www.itnews.com.au/news/wi-fi-allergies-issue-flares-up-in-australia-356354>.

<sup>40</sup> A Woman Has Been Awarded Compensation For Being "Allergic to Wi-Fi", ScienceAlert, 31 August 2015, <https://www.sciencealert.com/a-woman-has-been-award-compensation-for-being-allergic-to-wi-fi>.

<sup>41</sup> Spain: High Court of Madrid Ruling Recognizes "Electrosensitivity" as Grounds for Total Permanent Disability, August 4, 2016, Maris, <https://www.elettrosensibili.it/2016/09/14/spain-high-court-of-madrid-ruling-recognizes-electrosensitivity-as-grounds-for-total-permanent-disability/>.

<sup>42</sup> Gadget 'allergy': French woman wins disability grant, August 27, 2013, BBC News, <https://www.bbc.com/news/technology-34075146>.

<sup>43</sup> JML Law Wins Appeal in 'Unprecedented' Disability Case Against LAUSD For Failure to Accommodate Teacher With Electroma, March 26, 2021, Bloomberg <https://www.bloomberg.com/press-releases/2021-03-26/jml-law-wins-appeal-in-unprecedented-disability-case-against-laugd-for-failure-to-accommodate-teacher-with-electroma>.

Individuals who have suffered from exposure to MW/EMF/RF radiation describe their stories including those in Section 504 housing. In some instances, pseudonyms or the heading of “Anonymous” have been used to protect the privacy of these individuals. See Appendix E incorporated herein by reference.

- **Overview of Studies Showing Injury from Exposure and Inquiries on Safety**

There has been overwhelming scientific evidence establishing a causal link to health side effects from MW/EMF/RF radiation and devices emitting such radiation:

1. Thousands of scientific and medical studies show neurological disorders; increased risk of cancer and brain tumors; DNA damage; oxidative stress; immune dysfunction; cognitive processing effects; altered brain development, sleep and memory disturbances, ADHD, abnormal behavior, sperm dysfunction, and damage to the blood-brain barrier.<sup>44</sup>
2. Three studies since Jan 2023 show adverse health impacts from exposure to 5G towers. **Previously healthy individuals developed typical “microwave syndrome” symptoms shortly after the towers were installed:** headaches, abnormal fatigue, heart arrhythmia, burning skin, trouble concentrating.<sup>45</sup> The significance of these reports is that non-ionizing radiation<sup>46</sup> from 5G — well below levels allowed by authorities — can cause health problems in individuals who had no prior history of electromagnetic sensitivity.<sup>47</sup> Dr. Lennart Hardell, lead author of the reports and a world-renowned scientist on cancer risks from radiation, affirms these reports as “groundbreaking” because they serve as the “first warning of a health hazard.”<sup>48</sup>

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<sup>44</sup> A Rationale for Biologically-based Exposure Standards for Low-Intensity Electromagnetic Radiation, 2022, <https://bioinitiative.org/conclusions/>; see also, Adverse health effects of 5G mobile networking technology under real-life conditions, May 1, 2020, <https://pubmed.ncbi.nlm.nih.gov/31991167/>; Wireless Radiation (RFR) – Is U.S. Government Ignoring Its Own Evidence for Risk? March, 28, 2019, <https://electromagnetichealth.org/electromagnetic-health-blog/u-s-gov-ignoring-own-evidence/>; Oxidative Mechanisms of Biological Activity of Low-Intensity Radiofrequency Radiation, *Electromagnetic Biology and Medicine*, 35(2), 186-202, Yakymenko, I., Tsybulin, O., Sidorik, E., Henshel, D., Kyrlyenko, O., & Kyrlyenko, S. (2016), <https://pubmed.ncbi.nlm.nih.gov/26151230/>.

<sup>45</sup> Jan 2023 study of 63 year old man and 62 year old woman where 5G antennas were installed on the rooftop of their home, [https://www.gavinpublishers.com/assets/articles\\_pdf/Case-Report-The-Microwave-Syndrome-after-Installation-of-5G-Emphasizes-the-Need-for--Protection-from-Radiofrequency-Radiation.pdf](https://www.gavinpublishers.com/assets/articles_pdf/Case-Report-The-Microwave-Syndrome-after-Installation-of-5G-Emphasizes-the-Need-for--Protection-from-Radiofrequency-Radiation.pdf) and <https://childrenshealthdefense.org/defender/5g-radiation-microwave-syndrome-symptoms/>; Feb 2023 study of two previously healthy men where 5G antennas were installed on the rooftop of their business, <https://www.anncaserep.com/open-access/development-of-the-microwave-syndrome-in-two-men-shortly-after-9589.pdf>; April 2023 study of 52 year old woman whose apartment was 60 meters from a 5G base station, <https://acmcasereport.com/pdf/ACMCR-v10-1926.pdf?fbclid=IwAR2J-mE3XeBxqaXPQdFxsIf9Q23bMCer9vgUBHnCvJXBrgBv-w7YdRUDwF0>; see also, The microwave syndrome or electro-hypersensitivity: historical background <https://pubmed.ncbi.nlm.nih.gov/26556835/>.

<sup>46</sup> <https://childrenshealthdefense.org/emr/emf-key-terms-descriptions/>.

<sup>47</sup> <https://childrenshealthdefense.org/emr/emf-wireless-health-impacts/>.

<sup>48</sup> <https://www.stralskyddsstiftelsen.se/two-studies-show-that-5g-caused-the-microwave-syndrome-in-healthy-persons/>.

3. Given the lack of information regarding any safety testing of 5G, US Sen. Blumenthal confirmed during a Feb. 2019 hearing of telecom executives, that there was no pre-market testing of 5G for public health or safety. The telecom executives conceded that they were not aware of any independent scientific studies on the safety of 5G. Sen. Blumenthal also criticized the FCC and the FDA for inadequate answers on the subject. Sen. Blumenthal concluded, “We’re kind of flying blind here as far as health and safety is concerned.”<sup>49</sup>
4. A study in 2000, commissioned by one of the major telecom carriers, found links to cancer, leukemia, neurological disorders and cognitive impairment, with special caution for children and an acknowledgement of those already disabled from the radiation.<sup>50</sup>
5. The New Hampshire Commission that studied the health impacts of wireless radiation found that levels below the FCC emission limits can be harmful.<sup>51</sup>
6. The Board of Health of Pittsfield, MA issued an emergency order to turn off a 4G cell tower that injured 17 residents most of whom evacuated their homes.<sup>52</sup> Although the emissions were within the FCC emission limits, children were found vomiting in their beds, pets were vomiting and residents were becoming ill and evacuating their homes.<sup>53</sup>
7. One hundred sixty scientists worldwide submitted in 2015 The International Scientists’ Appeal to the United Nations to Protect Humans and Wildlife from the unconstrained proliferation of wireless radiation.<sup>54</sup>
8. The WHO’S International Agency for Research on Cancer classified wireless radiation (2G and 3G) as a possible human carcinogen back in 2011,<sup>55</sup> similar to lead, diesel fuel and gasoline engine exhaust.
9. The National Toxicology Program, commissioned by the Food and Drug Administration to conduct a \$30 million study, in 2018 found clear evidence of cancer;<sup>56</sup> NTP is one of the most prestigious institutions in the world in toxicology. Indeed, in 1999 the FDA nominated to the NTP the study of RFR “with a high priority,” to conduct animal studies, stating that it was “not scientifically possible to guarantee that non-thermal levels of microwave radiation . . . will not cause long-term adverse health effects.”<sup>57</sup> the results

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<sup>49</sup> <https://ehtrust.org/health-effects-of-5g-wireless-technology-confirmed-at-us-senate-hearing-after-senator-blumenthal-questions-industry/>; see also, <https://mdsafetech.org/2019/02/13/no-research-on-5g-safety-senator-blumenthal-question-answered/>.

<sup>50</sup> T-Mobile Deutsche Telekom commissioned study by the Ecolog-Institute, April 2000, “Mobile Telecommunications and Health Review of the Current Scientific Research in View of Precautionary Health Protection,” <https://ehtrust.org/wp-content/uploads/ecolog2000.pdf>.

<sup>51</sup> <http://www.gencourt.state.nh.us/statstudcomm/committees/1474/reports/5G%20final%20report.pdf>.

<sup>52</sup> <https://ehtrust.org/cease-and-desist-order-against-verizon-cell-tower-by-board-of-health-pittsfield-ma/>.

<sup>53</sup> <https://ehtrust.org/family-injured-by-cell-tower-radiation-in-pittsfield-massachusetts/>.

<sup>54</sup> Dr. Martin Blank, PhD, Dept of Physiology and Cellular Biophysics, Columbia University, announcing the appeal and warning on wireless radiation, <https://www.youtube.com/watch?v=HgECRrabuZQ>.

<sup>55</sup> [https://www.iarc.who.int/wp-content/uploads/2018/07/pr208\\_E.pdf](https://www.iarc.who.int/wp-content/uploads/2018/07/pr208_E.pdf).

<sup>56</sup> *Environmental Health Trust, et al v. FCC*, Motion for Leave to File Brief of Amicus Curiae Joseph Sandri in Support of Petitioners Urging Reversal, Aug. 5, 2020, <https://ehtrust.org/wp-content/uploads/20-1025-Amicus-Brief-Joe-Sandri.pdf>.

<sup>57</sup> Letter from the Dept of Health and Human Services to the National Toxicology Program at the National Institute for Environmental Health Studies, May 19, 1999, [https://ntp.niehs.nih.gov/sites/default/files/ntp/htdocs/chem\\_background/exsumpdf/wireless051999\\_508.pdf](https://ntp.niehs.nih.gov/sites/default/files/ntp/htdocs/chem_background/exsumpdf/wireless051999_508.pdf).

have been replicated by the Ramazzini Institute in another study using exposures below the FCC thermal thresholds.<sup>58</sup>

- **The Settled Science on Adverse Health Effects of MW/EMF/RF Radiation: From Industry, FCC, FDA, Scientists And Experts**

- **Industry's Settled Science:**

As early as April 2000, the ECOLOG Institute, which was commissioned by T-Mobile in Germany (parent company to T-Mobile in the U.S.), issued a report on its study of the risks of electromagnetic fields (EMFs) because of the rapidly expanding mobile telecommunications industry. The results were twofold: (1) findings of adverse health impacts associated with exposure to EMFs and (2) strong precautions and warnings to significantly lower the power of the EMFs to which the public would be exposed.<sup>59</sup> The findings included risks of cancer (of the central nervous system and testicular cancer), leukemia, damage to the immune system and cognitive impairments. It found that for all stages of cancer development, power flux densities of less than 1 W/m<sup>2</sup> were sufficient. "For some stages of cancer development, intensities of 0.1 W/m<sup>2</sup> or even less may suffice to trigger effects."<sup>60</sup>

The ECOLOG Institute also addressed the issue of electrosensitivity. It emphasized the importance of developing ***"a strategy for the research of the electrosensitivity phenomenon and its incidence, which would acknowledge the failure of traditional scientific methods to address the problem and allow the inclusion of the data available from the self-help groups and associations of the affected."*** [Emphasis added]

The Institute also provided precautions for vulnerable populations in "residential areas, schools, nurseries, playgrounds, hospitals and all other places at which humans are present for longer than 4 hours."<sup>61</sup>

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<sup>58</sup> <https://www.saferemr.com/2018/03/RI-study-on-cell-phone.html>.

<sup>59</sup> <https://docs.google.com/document/d/1Rd2c900GURf9YYQY-L2MHAFDYGIeI2R1tyMZYQhZTEA/edit>; ECOLOG is a research organization founded in 1991 by scientists from the University of Hannover.

<sup>60</sup> Id.

<sup>61</sup> Id.

In an article, “Why Tech Leaders Don't Let Their Kids Use Tech,”<sup>62</sup> it’s reported that technology executives restrict or forbid their children’s use of the very technology that they are providing to the public, including “the makers of smartphones and tablets, of social media channels and game boxes.” Technology “titans” such as former Apple’s Steve Jobs and Bill and Melinda Gates have admitted to placing restrictions on their children’s use of technology. Chris Anderson, former Wired magazine editor and CEO of 3D Robotics, said that his kids “accuse me and my wife of being fascists and overly concerned about tech, and they say that none of their friends have the same rules. That’s because we have seen the dangers of technology firsthand. I’ve seen it in myself, I don’t want to see that happen to my kids.”<sup>63</sup>

**Federal Communications Commission (FCC):** The FCC admitted in 2019 that at least some types of RF radiation can cause instantaneous non-thermal adverse effects with RF radiation frequencies ranging between 3 KHz and 10 MHz.<sup>64</sup> Typically, the FCC averages exposure levels over 30 minutes, which completely obscures the effects of the pulsating nature of RF radiation and does not account for 24/7 exposure by the population or the constant pulsations of RF radiation. To obtain a more accurate reading of RF emissions, the maximum power density and peak power density levels per millisecond should be recorded, because adverse health effects arise from the peaking and pulsating nature of RF emissions.<sup>65</sup>

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<sup>62</sup> “Why Tech Leaders Don't Let Their Kids Use Tech,” <https://kidzu.co/health-wellbeing/why-tech-leaders-dont-let-their-kids-use-tech/>.

<sup>63</sup> Id.

<sup>64</sup> Proposed Changes in the Commission’s Rule Regarding Human Exposure to Radiofrequency Electromagnetic Fields, 34 FCC Rcd 11687, 11743-11745, ¶¶122- 124 & nn. 322-335 (2019).

<sup>65</sup> Human-made electromagnetic fields: Ion forced-oscillation and voltage-gated ion channel dysfunction, oxidative stress and DNA damage (Review) (2021) Pangopolous DJ, et al. International Journal of Oncology. August 23, 2021. <https://pubmed.ncbi.nlm.nih.gov/34617575/>.

Computational modeling investigation of pulsed high peak power microwaves and the potential for traumatic brain injury. Sci Adv. 2021 Oct; 7(44). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8555891/>. "These studies reveal that the MAE threshold depends on the energy in a single pulse (not the average power density) for sufficiently short pulses [e.g., 32 μs in (46)], and peak power densities of 102 to 105 mW/cm<sup>2</sup> have been known to cause auditory effects in human participants (45)."

“Diplomats' Mystery Illness and Pulsed Radiofrequency/Microwave Radiation,” Dr. Beatrice Golomb. Neural Comput. 2018 Nov; 30(11):2882-2985. <https://pubmed.ncbi.nlm.nih.gov/30183509/>; “Reported facts appear consistent with pulsed RF/MW as the source of injury in affected diplomats.”

“5G: Great risk for EU, U.S. and International Health! Compelling Evidence for Eight Distinct Types of Great Harm Caused by Electromagnetic Field (EMF) Exposures and the Mechanism that Causes Them,” Martin L. Pall, PhD, <https://peaceinspace.blogs.com/files/5g-emf-hazards--dr-martin-l.-pall--eu-emf2018-6-11us3.pdf>.

Belyaev, I., Dean, A., Eger, H. et al. "EUROPAEM EMF Guideline 2016 for the prevention, diagnosis, and treatment of EMF-related health problems and illnesses." Rev environ Health. 2016;31(3):363-397. Doi:10.1515/reveh-2016-0011.

B. W. G. (2012). "Bioinitiative Report 2012: A Rationale for Biologically-based Exposure Standards for Low-Intensity Electromagnetic Radiation."

### **Food and Drug Administration:**

Linda Birnbaum, Ph.D., former Director of the U.S. NIEHS and former Director of the National Toxicology Program (NTP) spanning across the Department of Health and Human Services organizations which involves NIH, FDA and CDC, has stated:

- *“Effects from [wireless] radiofrequency radiation (RFR) such as genetic toxicity, immunotoxicity, oxidative stress, changes in gene and protein expression, changes in cell differentiation and proliferation, and increased permeability of the blood brain barrier were reported in these [scientific] publications.” (pg. 8).*
- *“The phase I [NTP] studies established that non-thermal levels (<10C or no detectible change in temperature) of RFR exposure had toxicological implications in biological systems.” (pg. 9).*
- *“The NTP found and published evidence of DNA damage after only 90 days of exposure.” (pg. 9).*
- *“Overall, the NTP findings demonstrate the potential for RFR to cause cancer in humans. The independent peer review of the entire proceedings carried out by toxicologists, pathologists and statisticians independent of the NTP staff conducted March 26-28, 2018, concluded that there was ‘clear evidence of cancer,’...exposure to RFR is associated with an increase in DNA damage.” (pg. 11).*

IMPORTANT NOTE: NTP refers to the National Toxicology Program. Since completion of the \$30 million NTP study (originally sponsored by the FDA to research possible biological effects of RFR), the results have been replicated by the Ramazzini Institute in another study using exposures below the FCC thermal thresholds (simulating emissions from cellular base stations and wireless transmitters).<sup>66</sup>

- **Facts and Statements by U.S. Preeminent Scientists and Experts In the Area of MW/EMF/RF Radiation Research**

As shown by the following facts and statements by the United States’ preeminent scientists and experts in the area of wireless RFR research, it has become well established that wireless radiation exposure produces or has the recognized potential of producing biological effects.

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<sup>66</sup> <https://www.saferemr.com/2018/03/RI-study-on-cell-phone.html>

1. In 2011, the World Health Organization's (WHO) International Agency for Research on Cancer (IARC) classified wireless radiation as a Group 2B possible carcinogen.<sup>67</sup> This conclusion was based upon an increased risk of malignant brain cancer (glioma) identified in those who used cell phones for over 10 years for an average of 30 minutes per day.

Anthony B. Miller, M.D., Senior Epidemiologist, IARC, states in a 2018 updated assessment to the 2011 IARC classification of wireless radiofrequency radiation (RFR), "***When considered with recent animal experimental evidence, the recent epidemiological studies strengthen and support the conclusion that RFR should be categorized as carcinogenic to humans (IARC Group 1).***"<sup>68</sup>

2. "Since 2011, the scientific evidence linking wireless to cancer has significantly increased and today several published reviews conclude that the current body of evidence indicates cell phone radiation is proven Group 1 human carcinogen (Miller et al 2018, Peleg et al 2018 Carlberg and Hardell 2017, Belpomme et al 2018)." <sup>69</sup>

3. Christopher J. Portier, Ph.D., former director of the National Center for Environmental Health at the Centers for Disease Control and Prevention (CDC) and a scientific advisor for the WHO, reviewed the most recent body of scientific research and literature to look at the feasibility of RFR causing specific brain tumors in humans and concluded in March, 2021:

- "***Given the human, animal and experimental evidence, I assert that, to a reasonable degree of scientific certainty, the probability that RF exposure causes gliomas and neuromas is high.***" <sup>70</sup>

4. Ronald Melnick, Ph.D., retired NIEHS senior toxicologist who won the American Public Health Association's 2007 David P. Rall Award for public health advocacy states:

***"I strongly feel health and regulatory agencies should promote policies that reduce cell phone radiation exposure, especially for children and pregnant women. The agencies in the U.S. say, "if you are concerned" rather than "we are concerned." Agencies should be clear and straightforward educating the public on "here is what you should do."***

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<sup>67</sup> [https://www.iarc.who.int/wp-content/uploads/2018/07/pr208\\_E.pdf](https://www.iarc.who.int/wp-content/uploads/2018/07/pr208_E.pdf).

<sup>68</sup> <https://www.sciencedirect.com/science/article/abs/pii/S0013935118303475>.

<sup>69</sup> <https://ehtrust.org/science/whoarc-position-on-wireless-and-health/>.

<sup>70</sup> <https://www.saferemr.com/2021/03/expert-report-by-former-us-government.html?m=1>.

***“The risk can be greater for children than adults due to the increased penetration of the radiation within brains of children and the fact that the developing nervous system is more susceptible to tissue damaging agents.”***<sup>71</sup>

5. The American Academy of Pediatrics, a non-profit professional organization of 60,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists, stated in a letter to the FCC on July 12, 2012:

***“Children ... are not little adults and are disproportionately impacted by all environmental exposures, including cell phone radiation. In fact, according to IARC, when used by children, the average RF energy deposition is two times higher in the brain and 10 times higher in the bone marrow of the skull, compared with mobile phone use by adults.”***<sup>72</sup>

6. New Hampshire formed a State Commission to examine whether wireless radiation is harmful to human health. The majority of that New Hampshire State Commission came to the conclusion that exposure to wireless radiation is harmful to human health and the environment. The commission was convened through bipartisan legislation<sup>73</sup> that was signed by the governor. Commission membership included unbiased experts in fields relating to health and radiation exposure, and they issued their Final Report in November 2020.<sup>74</sup>
7. In 2021, the U.S. D.C. Circuit Court of Appeals in *EHT et al v. FCC* ruled that the FCC’s 2019 decision to maintain their 26 year old thermal-based exposure “safety” guidelines demonstrated that the FCC was acting in an ***“arbitrary and capricious”*** manner ***“in its complete failure to respond to comments concerning environmental harm caused by RF radiation”*** below the current FCC limits.<sup>75</sup>

The Court further ruled that, ***“The factual premise—the non-existence of non-thermal biological effects—underlying the current RF guidelines may no longer be accurate.”*** The Court pointed out that the FCC had ignored the scientific evidence documenting biological harm at non-thermal levels (i.e., at levels hundreds and even thousands of times below the current FCC wireless exposure “safety” guidelines). Indeed, thousands of scientific studies of biological hazards from RFR and hundreds of personal accounts of injuries from RFR were

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<sup>71</sup> [https://www.youtube.com/watch?v=zSx\\_yDzxvM8&t=2295s](https://www.youtube.com/watch?v=zSx_yDzxvM8&t=2295s)

<sup>72</sup> <https://ehtrust.org/wp-content/uploads/American-Academy-of-Pediatrics-letter-to-the-FCC-July-12-2012.pdf>

<sup>73</sup> <https://legiscan.com/NH/text/HB522/2019>.

<sup>74</sup> <http://www.gencourt.state.nh.us/statstudcomm/committees/1474/reports/5G%20final%20report.pdf>.

<sup>75</sup> [https://www.cadc.uscourts.gov/internet/opinions.nsf/FB976465BF00F8BD85258730004EFDF7/\\$file/20-1025-1910111.pdf](https://www.cadc.uscourts.gov/internet/opinions.nsf/FB976465BF00F8BD85258730004EFDF7/$file/20-1025-1910111.pdf).

in the FCC docket which the FCC ignored, and which the D.C. Circuit Court of Appeals admonished the FCC that it cannot ignore.

The ruling called into question the underlying basis for the FCC's extremely high thermal-only "safety" threshold and ruled in favor of health and safety advocates who sued the FCC.

#### ***8. Scientific Evidence Invalidates Health Assumptions Underlying the FCC Exposure Limit Determinations for Radiofrequency Radiation***<sup>76</sup>

The International Commission on the Biological Effects of Electromagnetic Fields (ICBE-EMF) published a paper which reviewed the studies and assumptions made in determining the current FCC limits, established 27 years ago in 1996, and found that those assumptions were incorrect and cannot form the basis currently to protect the public.

In the late 1990s, the FCC adopted RF radiation exposure limits to protect the public and workers from adverse effects. However, they:

. . . were based on results from behavioral studies conducted **in the 1980s involving 40–60-minute exposures in 5 monkeys and 8 rats**, and then applying arbitrary safety factors to an apparent threshold specific absorption rate (SAR) of 4 W/kg. The limits were also based on two major assumptions: any biological effects were due to excessive tissue heating and no effects would occur below the putative threshold SAR . . .

The paper concludes that extensive research on RF radiation during the intervening 25 years shows that the assumptions are invalid and "continue to present a public health harm" with no adequate protections for the general population for short-term and long-term exposures, including children and those acutely affected by exposure.<sup>77</sup>

Adverse effects observed at exposures **below** the assumed threshold SAR include non-thermal induction of **reactive oxygen species, DNA damage, cardiomyopathy, carcinogenicity, sperm damage, and neurological effects, including electromagnetic hypersensitivity** . . .

The paper makes an urgent appeal for much needed "health protective exposure limits for humans and the environment."<sup>78</sup>

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<sup>76</sup> [https://icbe-emf.org/wp-content/uploads/2022/10/ICBE-EMF-paper-12940\\_2022\\_900\\_OnlinePDF\\_Patched-1.pdf](https://icbe-emf.org/wp-content/uploads/2022/10/ICBE-EMF-paper-12940_2022_900_OnlinePDF_Patched-1.pdf).

<sup>77</sup> Id.

<sup>78</sup> Id.

- **Grassroots Communities**

Grassroot communities have been experiencing health problems from unwanted exposure to RF radiation. An example is in Pittsfield, MA where long-time residents and their children suffered from serious physical ailments after the installation of a wireless cell tower near their homes, and from which they had to evacuate.<sup>79</sup> The Pittsfield, MA Board of Health recently issued an emergency order to a telecommunications carrier to show cause why a cease and desist order should not be issued against the carrier to turn off a cell tower based on health effects and injuries sustained by residents as a result of the cell tower.<sup>80</sup> There have been other reports of health effects from cell towers.<sup>81</sup>

With each new “generation” of wireless technology, including 5G, people are being further exposed to wireless radiation which they cannot avoid.<sup>82</sup> These emerging technologies require new policies to address the increasing number of EMS Disabled, including among the elderly.

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<sup>79</sup> <https://ehtrust.org/statement-by-courtney-gilardi-after-pittsfield-board-of-health-votes-to-send-cess-and-desist-order-for-verizon-cell-tower/>.

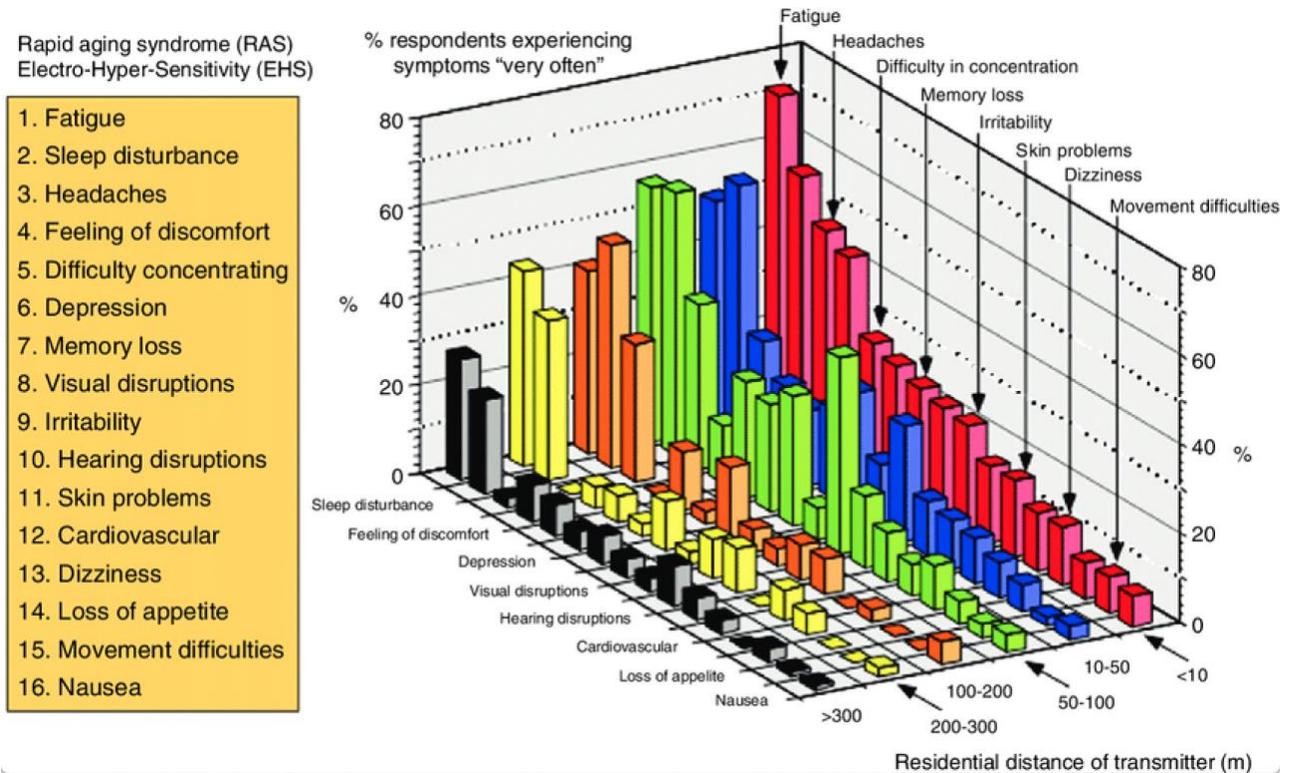
<sup>80</sup> <https://ehtrust.org/wp-content/uploads/Pittsfield-Health-Board-Cell-Tower-Order-to-Verizon-April-11-2022-FINAL-REDACTED.pdf>; see also, <https://ehtrust.org/the-first-cess-and-desist-order-against-verizon-cell-tower-to-be-sent-on-friday-by-by-board-of-health-pittsfield-ma/>.

<sup>81</sup> Cell Tower Health Effects <https://www.saferemr.com/2015/04/cell-tower-health-effects.html>, Center for Family and Community Health, School of Public Health, University of California, Berkeley.

<sup>82</sup> Letter by Dr. Beatrice Golomb, Professor of Medicine, UC San Diego School of Medicine, Aug. 22, 2017, <https://mdsafetech.org/wp-content/uploads/2017/09/golomb-sb649-5g-letter-8-22-20171.pdf>.

- **Neurobehavioral Symptoms Near Cell Towers**<sup>83</sup>

The following chart shows a worsening of symptoms when closer to a cell tower but a lessening of symptoms when farther away from a cell tower.



Symptoms experienced by people near cellular phone base stations; RF radiation affects the blood, heart and autonomic nervous system.<sup>84</sup> Source: Santini, et al (France): *Pathol Biol.* 2002;50:S369-73; Dr. Magda Havas, PhD.

- **Adverse Impacts on Children**

Children are particularly vulnerable and are adversely affected by RF radiation in their environment, homes and schools.<sup>85</sup> A special risk factor has been identified for children "due to their smaller body mass and rapid physical development, both of which magnify their vulnerability to known carcinogens, including radiation."<sup>86</sup> The American Academy of Pediatrics

<sup>83</sup> *Cell Tower Health Effects*, Physicians for Safe Technology, <https://mdsafetech.org/cell-tower-health-effects/>.

<sup>84</sup> Dr. Magda Havas, [https://www.researchgate.net/figure/Symptoms-experienced-by-people-near-cellular-phone-base-stations-based-on-the-work-of\\_fig2\\_258313941](https://www.researchgate.net/figure/Symptoms-experienced-by-people-near-cellular-phone-base-stations-based-on-the-work-of_fig2_258313941).

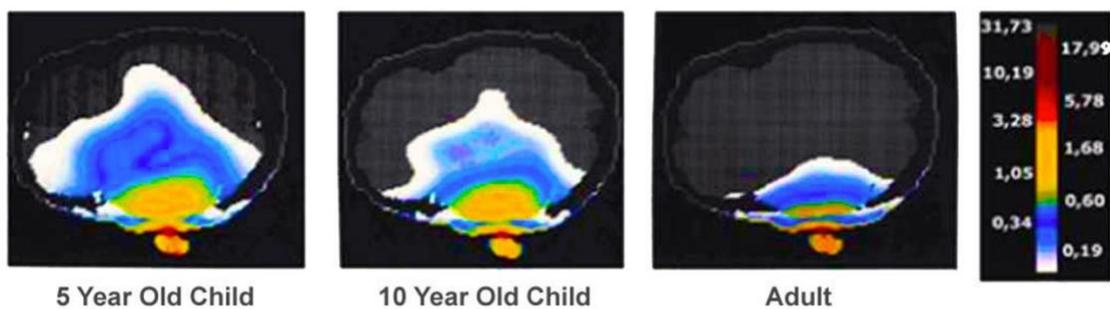
<sup>85</sup> *Children and Wireless Radiation*, <https://ehtrust.org/educate-yourself/children-and-wireless-faqs/>.

<sup>86</sup> *Key Scientific Evidence and Public Health Policy Recommendations*, Supplement 2012, at 21, David O. Carpenter, MD, Director, Institute for Health and the Environment University at Albany, Cindy Sage, MA, Sage Associates,

has pointed out that children are disproportionately affected by cell phone radiation due to their lower bone density and amount of fluid in the brain allowing for absorption of greater quantities of RF radiation than in adults.<sup>87</sup>

Children absorb more RF radiation than adults, and fetuses are at even greater risk.<sup>88</sup> Children's "brain tissues are more absorbent, their skulls are thinner and their relative size is smaller."<sup>89</sup> RF radiation penetrates more deeply into the skulls of children compared to adults,<sup>90</sup> as shown below in cell phone usage.<sup>91</sup>

## Children are more vulnerable to RF microwave radiation.



Depth of absorption of cell phone radiation in a 5-year old child, a 10-year old child, and in an adult from GSM cell phone radiation at 900 MHz. Color scale on right shows the SAR in Watts per kilogram. Source: [Exposure limits: the underestimation of absorbed cell phone radiation, especially in children](#)

Source: Exposure limits: the underestimation of absorbed cell phone radiation, especially in children, Gandhi, Morgan, Augusto de Salles, Han, Heberman, Davis, October 14, 2011.<sup>92</sup>

[https://bioinitiative.org/wp-content/uploads/pdfs/sec24\\_2012\\_Key\\_Scientific\\_Studies.pdf](https://bioinitiative.org/wp-content/uploads/pdfs/sec24_2012_Key_Scientific_Studies.pdf).<https://bioinitiative.org/>.

<sup>87</sup> *Key Scientific Evidence and Public Health Policy Recommendations*, Supplement 2012, at 21, David O. Carpenter, MD, Director, Institute for Health and the Environment University at Albany, Cindy Sage, MA, Sage Associates, [https://bioinitiative.org/wp-content/uploads/pdfs/sec24\\_2012\\_Key\\_Scientific\\_Studies.pdf](https://bioinitiative.org/wp-content/uploads/pdfs/sec24_2012_Key_Scientific_Studies.pdf).<https://bioinitiative.org/>.

<sup>88</sup> *Why children absorb more microwave radiation than adults: The consequences*, Morgan, Kesar and Davis, Journal of Microscopy and Ultrastructure, Vol. 2, Issue 4, December 2014, 197-204, <https://www.sciencedirect.com/science/article/pii/S2213879X14000583>.

<sup>89</sup> Id.

<sup>90</sup> See, Dr. Melnick, London 5G Conference at 39:00, [https://www.youtube.com/watch?v=zSx\\_yDzxvM8&t=2295s](https://www.youtube.com/watch?v=zSx_yDzxvM8&t=2295s); <https://ehtrust.org/research-on-childrens-vulnerability-to-cell-phone-radio-frequency-radiation/> and <https://ehtrust.org/science/scientific-imaging-cell-phone-wi-fi-radiation-exposures-human-body/>.

<sup>91</sup> *Exposure limits: the underestimation of absorbed cell phone radiation, especially in children*, Gandhi, Morgan, Augusto de Salles, Han, Heberman, Davis, October 14, 2011, <https://pubmed.ncbi.nlm.nih.gov/21999884/>.

<sup>92</sup> Id.

Exposure to RF radiation “can result in degeneration of the protective myelin sheath that surrounds brain neurons” and “[d]igital dementia has been reported in school age children.”<sup>93</sup> It also increases the risk of childhood leukemia.<sup>94</sup>

There are also neurological implications to RF radiation exposure for children.<sup>95</sup> Cell towers near schools and Wi-Fi in schools are potentially hazardous to children.<sup>96</sup>

- Elementary school children who were exposed to high levels of RF radiation generated from mobile phone base stations 200 meters from their schools “had a significantly higher risk of type 2 diabetes mellitus” than those exposed to lower RF radiation.<sup>97</sup>
- Adolescent school children who were exposed to high levels of RF radiation generated from mobile phone base stations within 200 meters from their schools had “delayed fine and gross motor skills, spatial working memory and attention” than those exposed to lower RF radiation.<sup>98</sup>
- A ten-year old child testified of his cardiac condition being caused by exposure to RF radiation in a library where he was being tutored.<sup>99</sup>

RF radiation “... has toxic effects in pregnancy, to the fetus and subsequent offspring ... and is tied to developmental problems in later life, including attention deficit and hyperactivity.”<sup>100</sup>

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<sup>93</sup> *Why children absorb more microwave radiation than adults: The consequences*, Morgan, Kesar and Davis, Journal of Microscopy and Ultrastructure, Vol. 2, Issue 4, December 2014, 197-204, <https://www.sciencedirect.com/science/article/pii/S2213879X14000583>.

<sup>94</sup> *Key Scientific Evidence and Public Health Policy Recommendations*, 2007, at 19, David O. Carpenter, MD, Director, Institute for Health and the Environment University at Albany, Cindy Sage, MA, Sage Associates, [https://bioinitiative.org/wp-content/uploads/pdfs/sec24\\_2007\\_Key\\_Scientific\\_Studies.pdf](https://bioinitiative.org/wp-content/uploads/pdfs/sec24_2007_Key_Scientific_Studies.pdf).

<sup>95</sup> See generally, <https://ehtrust.org/research-on-childrens-vulnerability-to-cell-phone-radio-frequency-radiation/>; see also, <https://ehtrust.org/cell-towers-and-cell-antennae/compilation-of-research-studies-on-cell-tower-radiation-and-health/>.

<sup>96</sup> Dr. Magda Havas: WiFi in Schools is Safe. True or False?, <https://www.youtube.com/watch?v=6v75sKAUFdc>.

<sup>97</sup> *Association of Exposure to Radio-Frequency Electromagnetic Field Radiation (RF-EMFR) Generated by Mobile Phone Base Stations (MPBS) with Glycated Hemoglobin (HbA1c) and Risk of Type 2 Diabetes Mellitus*, Sultan Ayoub Meo et al, International Journal of Environmental Research and Public Health, 2015; [https://www.researchgate.net/publication/283726472\\_Association\\_of\\_Exposure\\_to\\_Radio-Frequency\\_Electromagnetic\\_Field\\_Radiation\\_RF-EMFR\\_Generated\\_by\\_Mobile\\_Phone\\_Base\\_Stations\\_with\\_Glycated\\_Hemoglobin\\_HbA1c\\_and\\_Risk\\_of\\_Type\\_2\\_Diabetes\\_Mellitus](https://www.researchgate.net/publication/283726472_Association_of_Exposure_to_Radio-Frequency_Electromagnetic_Field_Radiation_RF-EMFR_Generated_by_Mobile_Phone_Base_Stations_with_Glycated_Hemoglobin_HbA1c_and_Risk_of_Type_2_Diabetes_Mellitus).

<sup>98</sup> Meo, S. A., Almahmoud, M., Alsultan, Q., Alotaibi, N., Alnajashi, I., & Hajjar, W. M. (2018). *Mobile Phone Base Station Tower Settings Adjacent to School Buildings: Impact on Students' Cognitive Health*, American Journal of Men's Health; <https://pubmed.ncbi.nlm.nih.gov/30526242/>.

<sup>99</sup> Child With Heart Problems From Wireless: 5G Health Risks California SB 649 Hearing, [https://www.youtube.com/watch?v=OgNLR9fQOX4&list=PLT6DbkXhTGoDakSqp1i\\_7milpwGx4xMFq](https://www.youtube.com/watch?v=OgNLR9fQOX4&list=PLT6DbkXhTGoDakSqp1i_7milpwGx4xMFq).

<sup>100</sup> Letter by Dr. Beatrice Golomb, Professor of Medicine, UC San Diego School of Medicine, Aug. 22, 2017, <https://mdsafetech.org/wp-content/uploads/2017/09/golomb-sb649-5g-letter-8-22-20171.pdf>.

Children born of mothers who used cell phones during pregnancy developed more behavioral problems by school age than those whose mothers did not use cell phones during pregnancy, with the following results: “25% more emotional problems, 35% more hyperactivity 49% more conduct problems and 34% more peer problems.”<sup>101</sup> A study involving 24,499 children found a 23% increase of emotional and behavioral difficulties.<sup>102</sup>

Therefore, MW/EMF/RF radiation can produce adverse health outcomes in vulnerable populations such as children, pregnant women and the elderly, and for the unsuspecting public who have not been informed of potential health hazards of RF radiation.

As reported by a pre-eminent scientist, Dr. Beatrice Golomb, who conducted a study on the effects of RF radiation, the common refrain is that people were either not aware of, did not hear about, or gave no credence to any possible health hazards connected to wireless infrastructure, until they themselves were injured.<sup>103</sup>

There have been numerous reports of adverse health effects from RF radiation and cell towers that have been placed in close proximity to people, either at their residences, businesses or other areas which they frequent.<sup>104</sup> The relevance of this for the UDC is that cell towers placed in the UDC can have similar effects for any residents or visitors seeking to continue to partake in the recreational activities that the UDC offers.

Public exposure to RF radiation is chronic – 24/7, 365 days a year. Therefore, there is an entire spectrum of conditions produced ranging from neurological and immunological disorders to DNA damage (a precursor to cancer).

Dr. Golomb,<sup>105</sup> conducted a survey on RF radiation exposure in which hundreds participated.<sup>106</sup> She observed that, although prior to their exposure they had no problem navigating in the world, after exposure their access to basic services such as hospital care, post offices and libraries became restricted. As a result of their injuries, they reported their condition cost them up to 2 million dollars, many lost their homes, and “a number became homeless and have

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<sup>101</sup> *Key Scientific Evidence and Public Health Policy Recommendations*, Supplement 2012, at 8, David O. Carpenter, MD, Director, Institute for Health and the Environment University at Albany, Cindy Sage, MA, Sage Associates, [https://bioinitiative.org/wp-content/uploads/pdfs/sec24\\_2012\\_Key\\_Scientific\\_Studies.pdf](https://bioinitiative.org/wp-content/uploads/pdfs/sec24_2012_Key_Scientific_Studies.pdf).

<sup>102</sup> Miller AB, Sears ME, Morgan LL, Davis DL, Hardell L, Oremus M, Soskolne CL. Risks to Health and Well-Being From Radio-Frequency Radiation Emitted by Cell Phones and Other Wireless Devices. *Front Public Health*. 2019 Aug 13;7:223. doi: 10.3389/fpubh.2019.00223. PMID: 31457001; PMCID: PMC6701402, also available at <https://www.frontiersin.org/articles/10.3389/fpubh.2019.00223/full#B42>.

<sup>103</sup> Letter by Dr. Beatrice Golomb, Professor of Medicine, UC San Diego School of Medicine, Aug. 22, 2017, <https://mdsafetech.org/wp-content/uploads/2017/09/golomb-sb649-5g-letter-8-22-20171.pdf>.

<sup>104</sup> Cell Tower Health Effects <https://www.saferemr.com/2015/04/cell-tower-health-effects.html>, Center for Family and Community Health, School of Public Health, University of California, Berkeley.

<sup>105</sup> Dr. Beatrice Golomb’s Curriculum Vitae, <https://www.golombresearchgroup.org/pagecv>.

<sup>106</sup> Letter by Dr. Beatrice Golomb, Professor of Medicine, UC San Diego School of Medicine, Aug. 22, 2017, <https://mdsafetech.org/wp-content/uploads/2017/09/golomb-sb649-5g-letter-8-22-20171.pdf>.

swelled the ranks of so-called ‘EMF refugees.’”<sup>107</sup> Many had been high-functioning individuals, such as engineers, doctors and lawyers. She further states that:

***The best and the brightest are among those whose lives – and ability to contribute to society –will be destroyed.*** High profile individuals with acknowledged electrohypersensitivity include, for instance, ***Gro Harlem Brundtland*** – the former 3-time Prime Minister of Norway and former Director General of the World Health Organization; [and] ***Matti Niemela***, former Nokia Technology chief ...<sup>108</sup> [Emphasis added]

Dr. Golomb further explains the plight of those unwittingly injured by RF radiation, that:

[T]heir problems arose ***due to actions of others, against which they were given no control*** – and can be reversed, in most cases, if the assault on them is rolled back.<sup>109</sup>

In the case of a 59 year old social worker in the United Kingdom, she was found to be permanently disabled from exposure to RF radiation by her medical practitioner:

***Mrs. Burns has a medical condition that renders her permanently incapable of undertaking any gainful work.*** There currently are no treatments available for her condition; avoidance of emissions is the only way to significantly reduce her symptoms.<sup>110</sup> [Emphasis added.]

Unfortunately, because this condition is not commonly understood, Mrs. Burns commented on the unrelenting discrimination that she has been exposed to:

I have worked in Health and Social Care for 35 years, supporting some of the most disabled and vulnerable members of our society and advocating to ensure their rights have been upheld. ***To have been on the receiving end of societal prejudice, discrimination, ignorance and misunderstanding, has been devastating.***<sup>111</sup> [Emphasis added.]

That people are not being informed of the health hazards of RF radiation, having it be forced upon them and their children without recourse, intruding into their homes, and then be

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<sup>107</sup> Id.

<sup>108</sup> Id.

<sup>109</sup> Id.

<sup>110</sup> “59 year old social workers wins ‘early ill health retirement’ for disabling ‘Electromagnetic Hypersensitivity (EHS)’,” Physicians’ Health Initiative for Radiation and Environment Press release June 15, 2022, <https://phiremedical.org/wp-content/uploads/2022/06/Press-Release-EHS-Social-Worker-granted-long-term-ill-health-pension-UK-Named.pdf>.

<sup>111</sup> Id.

discriminated against for the injuries they sustain as a result, ***should shock the conscience of any public official who took an oath to protect public health and welfare.***

Since the proliferation of wireless infrastructure, RF radiation has been intruding into people's homes, businesses, schools and elsewhere, without their consent or knowledge, and injuring them. **HUD should be asking how they can protect public health and welfare.**

Ultimately, Mrs. Burns "won her appeal for early ill-health retirement and will now receive full pension due to disabling Electromagnetic Hypersensitivity (EHS),"<sup>112</sup> as it is referred to in the U.K. She recounts the damage that exposure has done to her career:

My career has been important to me and I'm disappointed to be having to retire early instead of working beyond retirement age as I'd planned,<sup>113</sup>

. . . and to her life:

When exposed [to non-ionizing radiation, such as Wi-Fi and mobile phone emissions] she experiences dizziness, headaches, palpitations, sleep disturbance, vibrating sensations and sensitivity to noise and light. She feels pain in body areas which are nearest to the radiation sources, such as heat and pain at the ear from mobile phone use and abdominal pain from computer use.<sup>114</sup>

In another ground-breaking decision in the U.K. (and probably the world), a child was recognized as having EHS and was awarded accommodation, meaning that the school was mandated to make accommodation for the child's condition<sup>115</sup>. This was decided in 2022 by the Upper Tribunal of the Administrative Appeals Chamber, which is to say that the decision is precedent setting in the U.K. In the child's own words:

I am a 13-year-old girl with EHS. I have headaches, insomnia and other symptoms sometimes when exposed to WiFi or other kinds of EMF . . . These can become very severe . . . I can feel things and sense things most people can't. This has protected my health . . . I have previously been unable to go to school, as the school I went to put in WiFi . . . If you have EHS and are struggling to stay in good health, or can't go to school, or

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<sup>112</sup> <https://ehitrust.org/major-uk-decision-awards-to-social-worker-on-the-basis-of-electromagnetic-hypersensitivity-ehs/>.

<sup>113</sup> Id.

<sup>114</sup> Id.

<sup>115</sup> <https://ehitrust.org/education-health-care-plan-ehcp-awarded-aug-2022-for-uk-child-on-the-basis-of-electromagnetic-hypersensitivity-ehs/>.

work, don't give up . . . People are becoming more aware of this condition, and even if right now it seems like nothing will ever change, it already is.<sup>116</sup>

The Massachusetts Medical Association and California Medical Association have adopted resolutions for further studies on health outcomes from RF radiation, calling for safety limits to protect human health.<sup>117</sup>

When the best and the most fit among us, such as firefighters, become injured from MW/EMF/RF radiation, then we know we have a big problem for the rest of the population.

Firefighters in California were injured after a cell tower was installed on their station house property. They experienced headaches, and memory, sleeping and neurological disorders. SPECT brain scans found abnormalities associated with wireless radiation. Testing results showed delay in reaction time and difficulty in mental focus.<sup>118</sup> During actual emergency calls, they would sometimes become disoriented and could not respond to emergencies with the speed, cognition and orientation required to perform their duties at optimal capacity.

“Firefighters have reported getting lost on 911 calls in the same community they grew up in, and one veteran medic forgot where he was in the midst of basic CPR on a cardiac victim and couldn't recall how to start the procedure over again...Prior to the installation of the tower on his station, this medic had not made a single mistake in 20 years.”<sup>119</sup>

Consequently, the International Association of Firefighters passed a resolution opposing, and calling for a moratorium, on the placement of cell towers near fire stations in the U.S. and Canada.

## **Environmental Justice**

The EMS Disabled have been ignored by HUD and left behind. Expanding the definition for “disabilities” to include the EMS Disabled is an environmental justice issue. The EMS Disabled have been injured, over which they had no control, from wireless radiation from base stations, smart meters, wireless antennas, “small” cells, cell phones, wireless devices and telecommunications infrastructure facilities placed right next to their homes, businesses, schools, medical facilities and other public locations. These disadvantaged communities are

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<sup>116</sup> Id.

<sup>117</sup> *Massachusetts Medical Association Adopts Resolution on Wireless Safety Standards Reevaluation*, <https://ehtrust.org/massachusetts-medical-association-adopts-resolution-on-wireless-safety-standards-reevaluation/>.

<sup>118</sup> <https://www.iaff.org/cell-tower-radiation/>; International Association of Firefighters (IAFF) Votes To Study Health Effects of Cell Towers on Fire Stations, Call for Moratorium on New Cell Towers on Fire Stations Until Health Effects Can Be Studied, [https://ehtrust.org/wp-content/uploads/pr\\_iaff\\_vote-1.pdf](https://ehtrust.org/wp-content/uploads/pr_iaff_vote-1.pdf).

<sup>119</sup> Letter by Dr. Beatrice Golomb, Professor of Medicine, UC San Diego School of Medicine, Aug. 22, 2017, <https://mdsafetech.org/wp-content/uploads/2017/09/golomb-sb649-5g-letter-8-22-20171.pdf>.

significantly suffering from wireless radiation exposure as a result. This exposure is being forced onto residents, without notice, without their consent, and without any consideration to injuries to their health, no matter how much they are injured and despite incontrovertible evidence of those injuries.

- **Summary**

Therefore, given the foregoing reasons, the definition for “disabilities” should be expanded to include those disabilities and handicaps of the EMS Disabled. **The time has come for HUD to finally recognize them and place the full weight of the Fair Housing Act, the Americans with Disabilities Act and HUD regulations on accommodations for those who are EMS Disabled.**

## **Question 2**

### **Descriptions of Injuries and Discrimination Suffered by Individuals**

Individuals who have suffered from exposure to MW/EMF/RF radiation describe their stories including those in Section 504 housing. In some instances, pseudonyms or the heading of “Anonymous” have been used to protect the privacy of these individuals. See Appendix E.

There is also the story of Lily Marie who lived in Section 504 housing, and in her 80s had to evacuate her apartment of over 40 years because the landlord, it can be argued, refused to provide reasonable accommodation.

Wireless transmitters were placed on the rooftop of Lily Marie’s building, directly above the ceiling of this elderly woman. She tells the story of her suffering every day for 26 months until she had no choice but to evacuate her apartment for her health. Although she was in the largest studio in the building, the offer of accommodation was for the smallest studio in the building, even though there were reports of plenty of suitable and available apartments where she could have moved into, away from the transmitters. The landlord also refused to do anything about the transmitters directly over her head although she was nauseous and vomiting every day and notified the landlord repeatedly about her severe injuries.

She had to resort to sleeping in her doorway or in the lobby to get away from the radiation. But each time she did so, she was told to go back into her apartment.

### **Question 3 – see attached Appendix C (incorporated herein by reference)**

### **Questions 4, 9, 10, 11**

Vulnerable communities are significantly and negatively affected by wireless radiation. Many of the EMS Disabled and EMS sensitive (although not disabled, are yet seriously affected) are already disadvantaged and/or indigent and the condition only makes things worse. The

condition itself often turns even accomplished professionals into indigency. The EMS Disabled and EMS sensitive are not able to live, work or visit in spaces or buildings where wireless equipment is deployed. They also cannot successfully participate in virtual remote settings using free wireless connectivity because MS/EMF/RF radiation exposure is a barrier to them: their lives are placed in jeopardy with any such exposure.

Children are also a vulnerable community and there is documented research, as shown above, on the adverse effects of wireless radiation as it penetrates even more deeply into the skulls of children compared to adults.<sup>120</sup>

It was recently announced that the FCC is considering deploying Wi-Fi in school buses. No accommodation is being contemplated for EMS Disabled children who will have no other safe school transportation alternative.<sup>121</sup>

Access to work is critical for disadvantaged communities. The EMS Disabled are most affected when they cannot work safely in environments containing wireless radiation inside a building, such as Wi-Fi, or wireless radiation coming from outside a building from nearby base station antennas.<sup>122</sup> This is not a disability that only affects the EMS Disabled but given the estimated number of people with EMS symptoms in the U.S. EMS disability can be accommodated by creating wireless radiation free zones that employ only wired facilities in the work and home environments.

It is important to note that MW/EMF/RF radiation is characterized as a pollutant by the telecommunications industry in their product protection plans for which they disclaim liability for personal injury. For example, an industry brochure for consumers for cell phone insurance protection states:

***"Pollutants means any ... gaseous, or thermal irritant or contaminant including ... artificially produced electric fields, magnetic field, electromagnetic field, sound waves, microwaves and all artificially produced ionizing or non-ionizing radiation ..."***<sup>123</sup>

Similar definitions for pollution are in the product protection plans for other telecommunications companies.<sup>124</sup>

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<sup>120</sup> See, <https://ehtrust.org/research-on-childrens-vulnerability-to-cell-phone-radio-frequency-radiation/> and <https://ehtrust.org/science/scientific-imaging-cell-phone-wi-fi-radiation-exposures-human-body/>.

<sup>121</sup> "FCC Chairwoman Rosenworcel Pushes for E-Rate Funding of School Bus Wi-Fi," May 11, 2022, <https://stnonline.com/news/fcc-chairwoman-rosenworcel-pushes-for-e-rate-funding-of-school-bus-wi-fi/>.

<sup>122</sup> "The Prevalence of People with Restricted Access to Work in Manmade Electromagnetic Environments," <https://mdsafetech.files.wordpress.com/2019/10/2018-prevalence-of-electromagnetic-sensitivity.pdf>.

<sup>123</sup> <https://ehtrust.org/wp-content/uploads/device-protection-brochure-nationwide.pdf>;

<sup>124</sup> <https://ehtrust.org/key-issues/electromagnetic-field-insurance-policy-exclusions/>, <https://ehtrust.org/wp-content/uploads/ATT-Multi-Device-Protection-Pack-Insurance.pdf>, <https://ehtrust.org/wp-content/uploads/Sprint-Insurance-Terms-and-Conditions-Downloaded-2019.pdf>.

Two of the largest insurance companies in the world (i.e., Lloyd’s of London and Swiss Re) have declined to insure telecom companies for any liability for personal injury that results from these exposures.<sup>125,126,127</sup> Insurance companies, reviewing potential claims from a risk analysis perspective, have assessed MW/EMF/RF as “high” risk by the insurance industry and is, therefore, excluded from coverage.

Minority and rural communities have historically been affected by environmental hazards. Those mistakes should not be amplified by their exposure to wireless RFR in close proximity to their homes, schools and businesses. Wired connections to and through the premises are the only way that the EMS Disabled can participate in society on an equal footing with others.

- **HUD is Creating a Barrier for Relief for the EMS Disabled**

Despite HUD’s recognition of Environmental Illness in 1992, HUD decided to deny jurisdiction for any claims for accommodation related to EMS. There appears to have been no investigation or committee to review the matter, in short, HUD seems to lack a reasoned approach to deny jurisdiction over a disability accommodation that was recognized since 1992. Although the 1992 guidelines were based on “substances,” MW/EMF/RF radiation was either virtually non-existent or nowhere near as extant as it is today. However, in 2017 it was extant, and giving rise to similar, as well as even more severe symptoms than those reported for substances. At about 2017, Joseph Pelletier, HUD’s Director, Fair Housing Assistance Program, and without justification, issued guidance not to recognize any EMS claims:

“The Department of Energy and Department of Justice have also received numerous complaints dealing with these issues and have informed HUD that they will not open investigations under Section 504 based on these allegations. Based on advice from HUD’s Office of General Counsel, FHEO will not accept as jurisdictional allegations dealing with Smart Meters, RF and/or EMF issues, and any complaints already accepted will be closed... HUD reimburses only for cases that are jurisdictional under the federal Fair Housing Act. Where such complaints are accepted by a FHAP, they will not be accepted by HUD for payment.”<sup>128</sup> (See full text in Appendix A, incorporated herein by reference.)

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<sup>125</sup> <https://5gtechnologynews.com/insurance-companies-can-refuse-claims-related-to-electromagnetic-radiation-illnesses/>

<sup>126</sup> <https://ehtrust.org/wp-content/uploads/Swiss-Re-SONAR-Publication-2019-excerpt-1.pdf>, pg. 29.

<sup>127</sup> <https://ehtrust.org/key-issues/reports-white-papers-insurance-industry>.

<sup>128</sup> Letter addressed to “Fair Housing Enforcement Partners” by Joseph A. Pelletier, Director, Fair Housing Assistance Program, U.S. Dept. of Housing and Urban Development; obtained from Maine Human Rights Commission, 2017.

Similarly, Timothy M. Smyth, HUD's Deputy Assistant Secretary for Enforcement and Programs, sent an email on March 31, 2017 concerning complaints regarding "Smart Meters, Radio Frequency and Electromagnetic Frequency," stating:

After consultation with OGC-Fair Housing, it has been decided that, at this time, FHEO will not accept, as jurisdictional, allegations dealing with Smart Meters, RF and/or EMF issues. Should circumstances change in the future with respect to medical or legal opinions relating to these types of cases, the Department may reevaluate this position; but for now, FHEO Intake should not accept these types of allegations and any complaints already accepted should be closed accordingly. As we always do when declining to accept allegations as jurisdictional, we must counsel front line staff to speak cautiously when asserting limitations of the Fair Housing Act's jurisdiction.<sup>129</sup> (See full text in Appendix B, incorporated herein by reference.)

Remarkably, there is also a form letter to deny any request for accommodation based on these guidelines.<sup>130</sup>

This determination and behavior is, quite plainly, stated and explicit discrimination against the EMS Disabled, in reckless disregard of the daily suffering they are forced to endure due to involuntary and non-consensual exposure to MW/EMF/RF radiation in housing. (See Appendix E for reference of this suffering.)

Based on a Freedom of information Act (FOIA) request made by a researcher on the number of requests for accommodation made from 2000 to 2020, there were about 101 requests. The requests included complaints related to smart meters, cell tower transmitters placed on rooftops and forms of harassment. Only 2 were reported as closed as "conciliation / settlement successful." That is a poor record and needs to be improved.

The rest were dismissed. Some of the reasons HUD provided were: (1) no reasonable nexus between the proximity to a smart meter and the exacerbation of the disabling condition; (2) the radiation being emitted from utility meters and Wi-Fi are exposing the claimants no differently than any other person by levels determined to be safe by the authorities who license their

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<sup>129</sup> <https://ehtrust.org/wp-content/uploads/HUD-FHEO-Memo-Singles-Out-the-Electrically-Disabled-for-Discrimination-.pdf>

<sup>130</sup> <https://ehtrust.org/wp-content/uploads/HUD-FHEO-Form-Letter-Denies-Assistance-to-People-Inquiring-About-Accommodation-Regarding-Wireless-Smart-Meters.pdf>

operation; (3) no scientific link between EMF and the disability; (4) electromagnetic hypersensitivity is not a recognized medical diagnosis.

All of these assertions have been soundly refuted in this paper. In summary response:

- (1) a smart meter emits MW/EMF/RF radiation just as any other radiation emitting device and based on the studies, including an industry study, provided in this paper there is conclusive evidence of a nexus and the exacerbation of the disabling condition;
- (2) this begs the issue that some people are more susceptible than others, and under the legal theory of the “eggshell plaintiff,” “a defendant can be liable for all of the plaintiff's injuries even if the plaintiff has a physical or mental condition that made them more susceptible to injury than a person in regular good health. This can be a pre-existing injury or physical or mental condition;”<sup>131</sup>
- (3) there is conclusive evidence of a scientific link between MW/EMF/RF radiation and ensuring injuries and disability; and
- (4) the CDC has provided the codes of T66 and W90, the latter specifically calling electromagnetic radiation.

That people are plainly suffering injury, repeatedly, from exposure to MW/EMF/RF radiation, having it be forced upon them and their children without recourse, intruding into their homes, and then being denied accommodation and dismissed ***should shock the conscience of every HUD agency official charged with protecting public health and welfare.***

Since the proliferation of wireless infrastructure, RF radiation has been intruding into people’s homes, businesses, schools and elsewhere, without their consent or knowledge, and injuring them. **HUD should be placing the entire weight of its authority to protect public health and welfare.**

The EMS Disabled have been ignored by HUD and left behind. Because wireless radiation is invisible, so, apparently, have been the sufferings of the EMS Disabled. That radiation is invisible does not mean it’s not harmful. Wireless radiation cannot be perceived with the naked eye or by smell (such as gas leaking from a stove) and therefore goes unnoticed until one develops symptoms or is injured by it. Presenting these comments is an effort to make visible what has otherwise been invisible – the EMS Disabled and their need for recognition, access to necessary and safe accommodation, immediately when the symptoms occur.

### **Accommodations, Accessibility and Inclusion**

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<sup>131</sup> <https://injury.arnoldsmithlaw.com/eggshell-plaintiff-rule.html#:~:text=The%20Eggshell%20Plaintiff%20Rule&text=Under%20this%20rule%2C%20a%20defendant,or%20physical%20or%20mental%20condition.>

HUD has recently announced the importance of the role of accommodations in creating a disability-inclusive workplace.

This year marks the 50th anniversary of the Rehabilitation Act of 1973 (Rehab Act) and the 33rd anniversary of the Americans with Disabilities Act (ADA) of 1990. The primary goals of the Rehab Act and ADA include full participation, equal opportunity, independent living, and economic self-sufficiency. These laws form the foundation of disability inclusion in the United States.

In order for the EMS Disabled to participate in society, accommodations need to be made including accessibility. HUD's implementing regulation in 24 C.F.R 100.201 (1991) defines the following terms:<sup>132</sup>

**Accessible** when used with respect to the public and common use areas of a building containing covered multifamily dwellings, means that the public or common use areas of the building can be approached, entered, and used by individuals with physical disabilities.

**Accessible route** means a continuous unobstructed path connecting accessible elements and spaces in a building or within a site that can be negotiated by a person with a severe disability using a wheelchair and that is also safe for and usable by people with other disabilities. Interior accessible routes may include corridors, floors, ramps, elevators, and lifts.

[Emphasis added]

The definition for "accessible" should be expanded to include public anchor institutions, such as libraries, schools, medical facilities, etc.

When an individual is EMS disabled, it's exceedingly difficult, and even impossible for them to advocate for themselves because of the impairments, which can include neurological brain injury. The many ADA, FHA, and HUD/DOJ regulations that apply to the EMS disabled may not be able to be easily accessed. If they are able to even find free legal counsel at disability agencies, they may not be aware of how to apply the regulations to the EMS Disabled. There needs to be an easy-to-read guide, and video, on what regulations apply and how to easily navigate through a request for accommodation.

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<sup>132</sup> <https://www.law.cornell.edu/cfr/text/24/100.201>

The National Institute for Science, Law and Public Policy published a report of hard-wiring which would be of tremendous benefit for making accommodation for the EMS Disabled.<sup>133</sup>

In addition, there needs to be mitigation and retrofitting of existing HUD buildings and also for new builds using Building Biologists' guidelines and supervision.<sup>134</sup>

- **Accommodation in Public Anchor Institutions**

Accommodation for the EMS Disabled should be made in public anchor institutions, such as libraries, schools and medical facilities, so that a portion of each such institution would not expose the EMS Disabled to wireless radio frequency radiation. Wi-Fi/wireless free zones, e.g., areas in a building that do not have Wi-Fi or other wireless connectivity and are free of any wireless frequency of any kind, including, but not limited to, that generated by cell phone devices or any other type of wireless transmitting or receiving devices such as smart meters. This zone would be designed to accommodate broadband and telecommunications access for the EMS Disabled and to provide safe access to all anchor institutions that they use.

Here are some examples of accommodations needed for the EMS Disabled. The EMS Disabled need landline corded phones in community anchor institutions (e.g., libraries, schools, medical facilities) and family dwellings. They cannot use or be dependent on cell phones. A portion of each community anchor institution should have accommodation for the EMS Disabled so as not to expose them to wireless frequency radiation.

Accommodation for EMS Disabled would include creating a Wi-Fi/[wireless free zone](#), which would include a way to terminate all wireless transmitting signals originating from within the zone and attenuate all wireless receiving signals penetrating into the zone. Transmitting signals can be terminated with a combination of a hard wire shut-off, permanent Wi-Fi free software deactivation that does not reset itself or just by using FTTP and cabled modems / routers / computer / telecommunications equipment. Received signals can be lowered with a combination of RF attenuation building materials, equipment and products that reduce the RFR penetrating into the zone. The objective is to create an "as low as reasonably achievable" level of RFR for receiving signals.

All telecommunications access should be provided by telecommunications equipment (e.g., modems or routers) connected only by copper wire, cable or fiber optics. Any connectors for fiber optics and other hard-wired alternatives must be secured and ensure a leak-free connection. The zone would have a means to terminate all wireless transmitting signals

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<sup>133</sup> "Reinventing Wires: The Future of Landlines and Networks," at 73, National Institute for Science, Law and Public Policy, authored by Timothy Schoechle, PhD; <https://electromagnetichealth.org/wp-content/uploads/2018/02/ReInventing-Wires-1-25-18.pdf>.

<sup>134</sup> <https://buildingbiologyinstitute.org/wp-content/uploads/2019/03/HHStandard2012.pdf>  
At pp 33-42.

originating from within the zone and attenuate all wireless receiving signals penetrating into the zone. Transmitting signals can be terminated with a combination of a hard wire shut-off, permanent Wi-Fi free software deactivation that does not reset itself. Alternatively, telecommunications equipment could simply be permanently connected to fiber optics or cable for an even faster, more secure and healthier experience. Received signals can be lowered with a combination of radio frequency attenuation building materials, equipment and products that reduce the radio frequency penetrating into the zone. The objective is to create an “as low as reasonably achievable” level of radio frequency receiving signals.

The zone could also be “flexible,” by equipping it with an easily accessible and visible “off” switch and robust software that does not permit wireless signals and prohibits these software settings from being automatically overridden or reset. Those needing a connection for their cell phones would simply turn off their Wi-Fi and cellular connections and plug into the hardwired connections that would be made available to them at various locations within the zone, without any attenuation in service and with the possible advantage of even faster and more reliable service without expense to their health.

In order for the EMS Disabled to reach a flexible zone, any wireless frequency within these institutions would require some form of wireless frequency attenuation (such as RF blocking, shielding or reduction device) over the wireless telecommunications equipment to significantly reduce the amount of wireless frequency emitting from that equipment without affecting wireless connectivity.

Since the EMS Disabled cannot use cell phones, they would need landline corded phones in these public anchor institutions. For example, when an EMS Disabled person would otherwise be required to notify a medical facility by cell phone that they are arriving for their appointment, an accommodation would simply be a buzzer at the door to announce their arrival.

- **Accommodation in Home Dwellings**

“A man’s [or woman’s] home is his [her] castle.” This has been a maxim for centuries and is no less relevant here. Since the proliferation of wireless infrastructure, wireless frequencies have been intruding into people’s homes, without their consent, and harming them. If frequencies were not invisible, the intrusion and harm would rise to the level of the common law crime of assault and battery. Accommodation is required to ensure that those already harmed from wireless frequencies are protected from any further intrusion and harm. Indeed, these frequencies are life threatening for the EMS Disabled.

To that end, the EMS Disabled require hard wire, either fiber optics, cable or copper wire, to the premises and hard wire, either fiber optics, cable or copper wire, through the premises. The EMS Disabled require prior notice of planned nearby facilities, their consent to the placement and there must be a minimum setback of at least 500 meters so that the EMS Disabled can live safely within their homes.

In addition, the EMS Disabled require access to medical assistance and emergency services in case of any acts of God, access to which, incidentally, may also become interrupted with wireless infrastructure. The EMS Disabled should have equal access to broadband -- a necessary service -- in a manner that does not injure them and that does not otherwise put them in harm's way. They cannot adopt a technology that is injuring them, especially when wireless technology is intruding into their homes from the outside or from within their own homes.

- **Accommodation for Emergencies**

The EMS Disabled require hardwired connections in the event of any emergency or natural disaster, such as heavy weather conditions or a tornado. An example of how fiber optics made possible the restoration of service during an emergency is in Chattanooga, TN. In November 2012, a tornado ripped through Chattanooga. Because of the fiber optics installation, the system was able to either prevent or automatically restore service from 23,000 customer outages.<sup>135</sup> The EMS Disabled require access to services in such emergencies.

- **Short List of Accommodations**

The following is a short list of readily achievable, affordable structural and design modifications:<sup>136</sup>

- Correct wiring, up to code, especially at the junction and breaker boxes in buildings, needs to be enforced;
- Electrical and magnetic fields need to be at the safe levels as per the Building Biology Institute standards. Wiring errors are frequently made in buildings which increases the EMF's (electromagnetic fields) to unsafe levels. If an outlet is incorrectly wired, especially the grounding, the increased electric fields will travel out into the room and to any device plugged into it. Light switches and fixtures will have unsafe levels of electric and magnetic fields if incorrectly wired or incorrectly grounded (there does not appear to be any U.S. bio-safe standards for electrical and magnetic fields other than to prevent acute electrocution);
- Housing for EMS Disabled in areas away from large electrical outputs like an elevator mechanical room, laundry room. EMS safe apartments need to have stair access and entries that don't have high electrical and magnetic fields;

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<sup>135</sup> "Smart Grid Helps Keep Lights Burning," May 19, 2017 Editorial, Hamilton County Herald, <https://www.hamiltoncountyherald.com/Story.aspx?id=8646&date=5%2F19%2F2017>.

<sup>136</sup> Submitted to the Board of the National Council on Disability, May 12, 2022 by Susan Molloy, M.A., Hansa Trail, Snowflake, AZ, molloy@frontiernet.net.

- Daylight, skylights, or option of incandescent lightbulbs (no fluorescents or LEDS) in designated areas of the facility;
- Remove Fragrance Emission Devices (“FEDS”) in designated restrooms, no fragrance distribution systems in Heating, Ventilation, Air Conditioning (“HVAC”) systems, no scented products;
- Do not use Wi-Fi to monitor indoor air pollutants;
- Use no “smart” meters for electricity, gas, or water in or around public areas of a facility unless they are thoroughly and effectively shielded;
- Separate the electrical wiring and fiber optics for designated parts of the facility and install kill switches for designated areas, so that non-essential computers, printers, fluorescents, equipment can be shut down without impacting all areas of the facility;
- Maintain landline telephones, re-install old-style payphones, in and around the facility;
- Use independent variable fresh air ventilation system (fan and operable window) for designated areas that can be operated by the room occupant without assistance;
- Use signage on and around the facility, in pertinent formats, indicating where to find wheelchair- and otherwise accessible sidewalks, ramps, doors, restrooms, phones, conference rooms, parking, along with a posted schedule of recent maintenance materials;
- Use signage to designate areas where wi-fi, pest control and maintenance chemicals, and recent remodeling are present to avert accidental exposures (to the degree possible);
- Designate areas for re-charging wheelchair batteries, cell phones, computers, vehicles, others, using wired electrical outlets;
- Install hard-wired, wheelchair-accessible, buzzer or intercom outside the facility to summon building occupants such as the receptionist, doctor, your child, police, social service staff, grocer, shopkeeper;
- We request a Memorandum of Understanding (“MOU”) available to us, on good stationery, explaining specifically that we are to be given safe(r) passage and accommodation;

- Study the California Building Standards “Cleaner Air Room” concept and language as per the Indoor Environmental Quality (“IEQ”) Report, pages 47-55, 2005, posted on the U.S. Access Board’s website;
- Request development of shielding or redesign of computers and other technology to block electromagnetic fields and wifi, at the point of manufacture;
- Parking and passenger-loading zones protected from EV battery re-chargers, wireless or 5G equipment, cell towers;
- MW/EMF shielding of premises such as triple-pane Low-E windows, Faraday curtains and Faraday canopies that block fields, Faraday screens around porches and yard areas, where applicable;
- When a single person who is EMS Disabled needs to find a place to live, too often HUD restrictions that limit a person to one bedroom often don't work, as that individual may need a stand alone house if there is no other accommodation away from MW/EMFs.
- Other guidelines include the Indoor Environmental Air Quality Guidelines.<sup>137</sup>

HUD multifamily dwellings need wired internet, phones, security systems. They are a must for the EMS Disabled along with non-electric appliances (stoves, hot water heaters, heaters), low EMF refrigerators or an electrical shut off for them so they can be opened w/o fear of them turning on thereby activating high electrical and magnetic fields. There should be an obligation for HUD to pay for extra mitigation requirement like RF film on windows, curtains, metal screens on windows. All window screens for HUD housing should be metal or be willing to replace for metal.

EMS safe apartments would probably be best placed at the end of buildings, access to stairs rather than elevator (where people will come on with cell phones). Compliance by apartment managers to accommodate the EMS/MCS disabled needs to be HUD policy. Accurate RF-EMR meters for the manager would be very helpful to maintain safe areas and to determine if an apartment is safe for a new EMS Disabled applicant.

## CONCLUSION

Therefore, given all of the foregoing reasons, the definition for “disabilities” should be expanded to include those disabilities and handicaps of the EMS Disabled. Many recommendations have been made in this paper for mitigation and accommodation that are doable and necessary for the EMS Disabled to participate fully in our society.

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<sup>137</sup> <https://smartmeterharm.files.wordpress.com/2017/01/2005-indoor-air-quality-guidelines-nibs.pdf>

**The time has come for HUD to finally recognize the EMS Disabled and place the full weight of the Fair Housing Act, the Americans with Disabilities Act and HUD regulations on accommodations for those who are EMS Disabled.**

## APPENDIX A

From Maine Human Rights Commission, April 25, 2017:

Fair Housing Enforcement Partners:

HUD has recently seen several cases around the country dealing with smart meters, radio frequency (RF) or electromagnetic frequency (EMF) issues. These cases typically concern persons who allege to have a disabling sensitivity to RF or EMF fields. Often a complainant requests, as a reasonable accommodation, that electrical utility companies not place smart meters on a residence or on residences within a certain distance from a subject property usually not within 500 or 600 feet of a subject property. We have also seen, as accommodation requests, that an opt out fee not be charged for declining to have a smart meter installed at their property.

The Department of Energy and Department of Justice have also received numerous complaints dealing with these issues and have informed HUD that they will not open investigations under Section 504 based on these allegations.

Based on advice from HUD's Office of General Counsel, FHEO will not accept as jurisdictional allegations dealing with Smart Meters, RF and/or EMF issues, and any complaints already accepted will be closed. Should circumstances change in the future with respect to medical or legal opinions relating to these types of cases, the Department may reevaluate this position; if so, FHAP agencies will be informed of any change in HUD's position.

\*\*\* FHAP agencies must make their own determination whether to accept such complaints under their respective substantially equivalent State or local fair housing laws. Note, however, that under the Cooperative Agreements between HUD and FHAP participants, HUD reimburses only for cases that are jurisdictional under the federal Fair Housing Act. Where such complaints are accepted by a FHAP, they will not be accepted by HUD for payment. FHAP agencies that decline to accept such complaints should advise individuals of their right to file a civil action on their own under either the substantially equivalent State or local law, the federal Fair Housing Act, or both.

Thank you.

*Joseph A. Pelletier*  
*Director, Fair Housing Assistance Program*  
*U.S. Dept. of Housing and Urban Development*  
*(202) 402-2126*

## APPENDIX B

**From:** Lehman, Barbara L <Barbara.L.Lehman@hud.gov>  
**Sent:** Friday, March 31, 2017 7:14 AM  
**To:** Asantewa, Ife <ife.asantewa@hud.gov>; Marte, Yvonne L <yvonne.l.marte@hud.gov>; Tarver, Andrew <andrew.tarver@hud.gov>; Asunsolo, Rudolph <Rudolph.Asunsolo@hud.gov>  
**Cc:** Fandel, Mona <Mona.Fandel@hud.gov>; Riggs, Jo Ann <jo.ann.riggs@hud.gov>  
**Subject:** FW: Smart Meter, Radio Frequency, and Electromagnetic Frequency

**From:** Smyth, Timothy M  
**Sent:** Friday, March 31, 2017 6:23 AM  
**To:** Frisk, Amy M <Amy.M.Frisk@hud.gov>; Quesada, Anne <Anne.Quesada@hud.gov>; Lehman, Barbara L <Barbara.L.Lehman@hud.gov>; Bottiger, Betty <Betty.Bottiger@hud.gov>; Osegueda, Carlos <Carlos.Osegueda@hud.gov>; Sweeney, Garry L <Garry.L.Sweeney@hud.gov>; Golden, Jay <jay.golden@hud.gov>; McGough, Maurice J <Maurice.J.McGough@hud.gov>; Taylor, Melody C <Melody.C.Taylor@hud.gov>; Forward, Susan M <susan.m.forward@hud.gov>; Nevels, Kimberly L <Kimberly.L.Nevels@hud.gov>; Grosso, Lynn M <Lynn.M.Grosso@hud.gov>; Patterson, Gordon F <Gordon.F.Patterson@hud.gov>; Pelletier, Joseph A <Joseph.A.Pelletier@hud.gov>  
**Subject:** Smart Meter, Radio Frequency, and Electromagnetic Frequency

Hi Team,

The Department has seen several cases around the country dealing with smart meters, radio frequency (RF) or electromagnetic frequency (EMF) issues. Cases typically concern persons who allege to have a disabling sensitivity to RF or EMF fields. Often, a complainant requests, as a reasonable accommodation, that electrical utility companies not place “smart meters” on a residence or on residences within a certain distance from a subject property – usually not within 500 or 600 feet of a subject property. We have also seen putative complainants asking, as an accommodation, that an opt out fee not be charged to complainant for not having a smart meter installed at their property. The Department of Energy and Department of Justice have also received numerous complaints dealing with these issues and have informed FHEO that they will not open investigations under Section 504 based on these allegations.

After consultation with OGC-Fair Housing, it has been decided that, at this time, FHEO will not accept, as jurisdictional, allegations dealing with Smart Meters, RF and/or EMF issues. Should circumstances change in the future with respect to medical or legal opinions relating to these types of cases, the Department may reevaluate this position; but for now, FHEO Intake should not accept these types of allegations and any complaints already accepted should be closed accordingly. As we always do when declining to accept allegations as jurisdictional, we must counsel front line staff to speak cautiously when asserting limitations of the Fair Housing Act’s jurisdiction. Accordingly, the attached letters are short and straightforward. At this time, consistent with our federal partners, we will not open these cases. As the attached sample letters set forth, parties retain their right to timely file in court.

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In addition, this information should be shared with FHAP agencies since we would not pay them to investigate complaints we deem to be non-jurisdictional.

Attached please find two sample documents:

1.Closure of Inquiry concerning Smart Meters 2.Closure of Complaint concerning Smart Meters

Have a good Friday,

Timothy M. Smyth, Deputy Assistant Secretary for Enforcement and Programs U.S. Department  
of Housing and Urban Development  
Division of Fair Housing and Equal Opportunity  
451 7th St. SW, Ste 5204

Washington, DC 20410 Tel: (202) 402-2439 Cell: (202) 412-5913

## APPENDIX C

HUD submission July 24, 2023

Department of Housing and Urban Development (HUD)

24 CFR Parts 8 and 9

Docket No. FR-6257-A-01

RIN 2529-AB03

Nondiscrimination on the Basis of Disability: Updates to HUD's Section 504 Requirements  
Advanced Notice of Proposed Rulemaking (ANPRM)

Comment 3: What types of auxiliary aids (aka equipment) and services are needed by individuals with EMS and related disabilities?

*Wired Internet and phone* are required for EMS Disabled people to communicate.

"Helen" a senior, low income, EMS Disabled woman who lives alone, has neither in her HUD apartment building. She must resort to using an unsafe cell phone on speaker, 8-12' away from it, and cannot use her computer for internet access

*Correct wiring, up to code, especially at the junction and breaker boxes* in buildings, needs to be enforced. This should be certified by accredited entities. And for the EMS Disabled, the electrical and magnetic fields need to be at the safe levels as per the Building Biology Institute standards. Wiring errors are frequently made in buildings which increases the EMF's (electromagnetic fields) to unsafe levels. These can be prevented and many remedied. If an outlet is incorrectly wired, especially the grounding, the increased electric fields will travel through the air into the room and through the wire to any device plugged into it. Light switches and fixtures will have unsafe levels of electric and magnetic fields if incorrectly wired or grounded.

"Helen" cannot use the sink in her bathroom because the light fixture over the sink puts off high EMF's even when it is not turned on. She says "electric and magnetic fields are a nightmare".

"Helen" dares to only use two outlets in her HUD subsidized apartment because all of them are unsafe for her. On these two she uses a "toggle-switched outlet plug" to plug into because she must use a long dowel rod to turn the switch (outlet) on. She also has to use dowel rods to turn on all the light switches. Coming close to the unsafe outlets causes severe neurological effects (muscle spasms, slowed gastrointestinal motility, worsened insomnia, etc) for at least a day.

*Appliances* need to be EMS safe, as many non-electric as possible. *The United States does not have any biological-safe standards for electrical and magnetic fields other than to prevent acute electrocution* and EMS Disabled people need safer levels than most.

Refrigerators need to be low EMF or have an easily accessible shut off for its electric power.

If “Helen” puts her hand into the refrigerator and it turns on, the electric and magnetic fields increase to levels that injure her, injuries that take a day or more to recover from. Imagine having to pull things out of your refrigerator with wooden tools in order to not be injured. This is what “Helen” has been forced to do daily for years.

Electric cook stoves are unsafe for an EMS person, gas stoves are the answer. In order to use the electric stove she has to stay 5’ away from it, turning it on with a dowel rod, never being able to stir her food.

Electric hot water heaters, air conditioners and heaters in or in close proximity to the apartment are also unsafe. A gas hot water heater would allow “Helen” to utilize the pantry room that the heater is in, but she can’t go near it now. She also can’t go close to the only available window to open it because an electric heater/air conditioner unit stands in front of it with EMF’s that are unsafe for her. She uses two long dowel rods to adjustment the controls on the appliance. Metal window screens, rather than vinyl, will help to shield from outside wireless radiation.

“Helen’s” small, one bedroom apartment is largely unsafe for her yet it is the *best* of 3 apartments she has occupied in the building, trying to find safety with each move. In the current apartment she cannot use the bedroom because neighboring wireless radiation floods into it. The previous apartment had higher RFR (radiofrequency radiation) levels which made her sick and worsened the EMS insomnia. The building has no wired internet or phone lines for people to access, only wireless, so it is ubiquitous. This is how people get television service and the security system is run. There is less RFR in this apartment because the lobby is below her and she is at the end of hallway but across the hall, down one floor, is the laundry room with all the electrical appliances she risks injury by using, especially if there are other machines going at the time.

EMS Disabled people cannot live close to laundry rooms or any areas with a lot of electrical appliances, large electric conduits, or mechanical rooms, as well as wireless emitting devices and towers. It is possible to use shielding for wireless radiation but impossible to shield magnetic fields. It’s best to plan for certain areas and apartments to be EMS safe when building or retrofitting.

How did “Helen” become electromagnetically sensitive? She was an optician who used equipment with high electromagnetic fields. Injury by one type of EMF then predisposes one to becoming sensitive to other types of fields. And exposures are cumulative, making EMF tolerance and living more difficult. “Helen” lost her career, condo, partner and savings to live alone in poverty, in unsafe subsidized housing that made her even more sensitive and sicker.

Her first apartment in this building was above the elevator mechanical room. She wasn’t aware of this and the consequences it would cause. The wireless sensitivity she had was far surpassed by the worsening sensitivity to electrical and magnetic fields which was caused by the *high electric fields* (mechanical room) in the first apartment and the *surging magnetic fields* from the

breaker box in the second apartment. She uses meters but every apartment that opened up in that complex had unsafe issues; she had to choose her poison. Exposure to high magnetic fields makes her very shaky and unsteady for at least a day. There happens to be one on the floor right in the middle of the doorway to her current apartment. In order to increase the distance from the field and not be as injured, she places stools there to step on. It is a dangerous situation when she is carrying things across the threshold. She states that even a ramp she could use there would be an improvement.

To accommodate her disability, it is not unreasonable to have her apartment's wiring checked to see if the electrical outlets and fixtures could be made safer and whether shielding the bedroom from wireless would allow her to use it without being injured. Wired internet is an essential for her. As federal monies are being allocated for "broadband" this needs to be used in HUD buildings for "fiber to and through the premises". Cable is also great for the EMS Disabled.

Using Building Biologists guidelines and supervision for mitigation/retrofitting of the existing HUD buildings and new builds, will help create safe disabled housing. This is what is needed for HUD to comply with the law since they are using federal monies.

<https://buildingbiologyinstitute.org/wp-content/uploads/2019/03/HHStandard2012.pdf> p 33-42 is the EMR checklist, etc.

In a healthy home mold should be mitigated. It is very important for all, especially those with environmental illness.

"Helen" has no family or friends to help her which is crippling. Her only income is a small SS check. She has to use part of this check to hire a shopper for groceries because stores and roads have unsafe RF levels for her. The shoppers aren't all the reliable which makes her nervous when she runs out of food. She also must hire someone to vacuum for her because these machines put off a high electromagnetic field. If our government would help provide services like these to the EMS Disabled who are very low income, it would lighten the load of an extremely difficult life. Compliance by apartment managers to accommodate the EMS/MCS disabled needs to be HUD policy.

Recently her only companion, a kitty, died because she did not have enough money to do an expensive treatment for him. She's reluctant to get another cat because she doesn't think she can manage veterinary bills. This is so heartbreaking! "Helen" dreams of being able to find an EMS safe community in which to live. If HUD had apartment buildings that were built for people like "Helen" she would be able to live and move freely in the building and have others with which to socialize. Instead, we have many thousands of EMS refugees living in their cars in the woods or people slowly being killed in unsafe subsidized apartment buildings. It is time that this "invisible" part of the population finally receives safe housing and accommodations for the access that the ADA/FHAA provides.

“Helen” secured *Sec 8 housing* but after an intense search could not find any that was EMS safe before it expired. Two months is not enough time and she was not allowed an accommodation for an extension. No time limit should be placed on the EMS Disabled with Sec 8 housing if they are actively searching. EMS safe housing is like finding a needle in a haystack now. (I hope you can remedy this.) She is willing to move anywhere in the country. She looked in Kansas, Colorado, Pennsylvania, Arizona, Virginia, Maryland, New Mexico and on the few websites for EMS refugees in other areas. She has had applications in several subsidized housing units for 3 years in Colorado and no apartments have opened up.

Before being able to accept an open apartment that apartment would need to have the EMF levels measured by someone with accurate meters because the last thing she wants is to make a treacherous trip to an even more unsafe apartment. Can HUD please purchase some meters? They are not difficult to use. Safe Living Technologies <https://safelivingtechnologies.com/> sells the Safe and Sound Pro II which is used by many around the world for RF's. The Cornet ED88T Plus 2 EMF/RF will measure electrical, magnetic and RF's. This meter now sells for \$99. <https://safelivingtechnologies.com/products/u1-cornet-ed88tplus2-emf-rf-meter-open-box.html>

Below is a letter from “Helen” sent to several City and County officials in Colorado, seeking help with housing. She did not receive any help even though they are building new senior, low-income housing using federal money. This disabled class cannot be ignored any longer. Lives are at stake and our federal government has a duty to protect their citizen's rights, to make sure that at least a safe home can be found.

February 2, 2021

To Whom It May Concern,

I'm a 66 year old single woman who became EMS (electromagnetically sensitive) from exposure to EMF's at several of my jobs.

The job where I had the most long-term exposure was when I was a professional Optician in a medical center in Boulder, CO. I operated a large machine that cut eyeglass lenses. Over time I got too ill to work. I lost my livelihood, my condo, my retirement savings, my partner, my well-being.....

I don't have much of a life because avoiding EMF's is very time consuming and limiting. The EMF's adversely affect my brain and my sleep making me EMS Disabled.

I got ill 18 years ago and it has left me in poverty, isolation, and I have a big loss of freedom, feeling safe, and feeling well. I have no family that can help me. I need help and protection from EMF's as I find it impossible to feel better living in housing that isn't EMF safe.

In my subsidized apartment I get bombarded from high levels of RF's coming from my neighbor's wireless devices; It's like being forced to breathe second-hand smoke. And, I also have high levels of magnetic EMF's surging randomly from my circuit breaker in a 14 foot radius. Then much of my apartment is not useable, the kitchen, living room, and bathroom. I need to live in a low-income house where I can avoid neighbor's EMF's and where I can have more control over reducing EMF's.

I want to move back to Colorado, and desperately need an EMF safe place to live, walk, and hopefully a road that doesn't have strong cell tower signals on my way to the grocery store.

Thank you.

## APPENDIX D

[See next page.]

# INCREASED EXPOSURE FROM 5G/4G "SMALL" CELL ANTENNAS LOCATED CLOSE TO PEOPLE

A study entitled "[Very high radiofrequency radiation at Skeppsbron in Stockholm, Sweden from mobile phone base station antennas positioned close to pedestrians' heads](#)" published in *Environmental Research* by Koppel et al. (2022) created an RF heat map of RF measurements, finding that the highest RF measurements were in areas of close proximity to the base station antennas. The researchers concluded with recommendations to reduce close proximity placements such as positioning antennas "as far as possible from the general public" like in high-elevation locations or more remote areas.

A study entitled "[Measurements of radiofrequency electromagnetic fields, including 5G, in the city of Columbia, South Carolina, USA](#)" published in the *World Academy of Sciences Journal* found the highest RF levels in areas where the cell phone base station antennas were placed on top of utility poles, street lamps, traffic lights or other posts near to the street. The scientists compared their [2022 findings](#) to an earlier [2019 published review](#) on the mean outdoor exposure level of European cities and they found the South Carolina measurements to be higher.

The researchers concluded that the highest exposure areas were due to two reasons: cell phone base antennas on top of high-rise buildings provide "good cell coverage reaching far away, but creating elevated exposure to the radiofrequency electromagnetic fields at the immediate vicinity; and cell phone base station antennas installed on top of utility poles have placed the radiation source closer to humans walking on street level."



Figure 7. Gervais Street: Cell phone base station antenna placed close to street level and causing high exposure to pedestrians and nearby café visitors (exposure scenario illustration). The antenna appears camouflaged and seemingly part of a utility pole. The measurer only discovered the antenna due to the high radiofrequency levels in the vicinity.

## APPENDIX E

### The EMS Disabled – In Their Own Words

Note: Some names have been truncated or changed to protect individuals' privacy or because of fear of retaliation.

#### LILY MARIE, HELL'S KITCHEN, NYC

Lily Marie was a professional actress, model, published lyricist and writer, member of SAG/AFTRA (Screen Actors Guild and American Federation of Television and Radio Artists) living on the top floor of a high-rise in the West Side of Midtown Manhattan in New York City, *also known as Hell's Kitchen*. Lily Marie had been working hard since she was 17, putting herself through college working as a secretary, model and waitress. The breakthrough in acting in New York City came after college. She doesn't consider herself a celebrity though others would. She's been a showroom, platform and print model for the top designers. Her favorite was Oscar de la Renta. She sang, and acted on stage in musicals, comedies and dramas, "did the soaps," television shows over 35 national on-screen television commercials and has a list of movie credits that include *The French Connection* with Gene Hackman, *Stiletto* with Alex Cord, *A Lovely Way to Die* with Kirk Douglas, *Borgia Stick* with Inger Stevens, *Rollover* with Jane Fonda and *Reflections in a Golden Eye* with Elizabeth Taylor and Marlon Brando, among others. For 45 years Lily Marie loved her apartment at the top of a NYC high-rise, and her view of the city that had brought her opportunity and an exciting career of hard work and tremendous joy.

For 45 years, Lily Marie loved her apartment in Section 504 housing in a building for retired performing artists and models. She had a spacious studio on the top floor with a northern view of the city that had brought her opportunity and an exciting career of hard work and tremendous joy. However, everything in her world changed on September 30, 2019. That was the night wireless transmitters were activated after installation on the rooftop right above Lily Marie's apartment. There was no notification to the residents. Five antennas simply appeared on the rooftop, three of them directly above her apartment.

She recalls she instantly felt different, with sudden, severe headaches and a high-pitched constant tinnitus, what Lily Marie refers to as "screaming in my ears." It was worse at night. She would lie in bed, exhausted yet unable to sleep, experiencing heart palpitations, IBS (irritable bowel syndrome), diarrhea, nausea, dizziness, an electrical surge sensation running from her neck to her head, forgetfulness, and general cognitive dysfunction, or "brain fog." As the days went on, her symptoms worsened. She developed bilateral hearing loss, and persistent nausea and vomiting. Lily Marie experienced these symptoms 24/7 for 26 months. In her own words at that time: "It's brutal."

Lily Marie's symptoms were confirmed by her doctor as having been caused by the wireless transmitters on the rooftop right above her apartment. Her doctor reported that she had other

patients living in the same building experiencing similar symptoms within the same time period, also caused by the wireless transmitters.

As a result, Lily Marie could not complete a 300-page novel which she was working on and which she was contracted to do because she could not concentrate or focus, experiencing "brain fog."

Lily Marie had to evacuate her apartment of 45 years and move to a more rural setting to escape from the transmitters above her apartment, and increasingly throughout New York City. Unfortunately, there are now wireless transmitters outside of her apartment in a more rural setting that are causing similar issues, although not as severe as the 26 months of hell she experienced in the penthouse floor overlooking New York City.

Lily Marie is now 85 years old and her EMS disability remains a constant. She wears protective EMF clothing every night with 2 pillows to protect her head/brain and heart. When explaining this syndrome of neurological symptoms she experiences to a new doctor in her new setting, that physician referred to the described symptoms and the attributions to cell towers as "a theory."

Lily Marie told the dismissive doctor she was dismissed. She now has a new physician who is aware of the neurological symptoms that can result from radiofrequency electromagnetic radiation exposure (RF-EMF). But this physician is at a loss about how to help Lily Marie.

The new managers in her current location will not be making any accommodation for her EMS disability, as they know nothing about the condition. They are kind, but without the appropriate instruction for how to minimize overall Wi-Fi exposure in the new assisted living facility, they are at a loss as to how they can help. Lily Marie would love to have hard wiring in the room she now rents at an assisted living facility so she could plug in a wired computer. She wants to communicate with her friends and those she worked in the business with for decades and continue her writing.

This woman who had a wonderful, exciting acting and writing career plus a showroom model for Oscar de la Renta, now, at nighttime, wraps her head in a protective EMF fabric ski cap, 2 pillows to stop the throbbing headaches and lessen the ringing in her ears and a fabric EMF scarf to cover her heart from palpitations.

### **Michael, NYC resident of Manhattan's Upper East Side**

I have lived on the Upper East Side for 54 years and counting. I never had a problem with the 26 Con Edison [analog] meters that were installed on the other side of my apartment entrance door. Then Con Edison installed 26 "smart meters" on October 20, 2020. Shortly thereafter I

experienced tinnitus ringing very loudly in my head 24 hours a day, every day without stopping! It is truly unbearable. I also have headaches and feel chronically tired. I can't do my work as a professional graphics artist nearly as well because of this situation.

Also, around the same time several large rooftop wireless antennas were installed right across the street from my building which face my apartment. One would think I have excellent phone reception. To the contrary, my cell phone reception in my home is very unreliable. Regardless, I'm now right in the middle of the radiation between the 26 smart meters within a foot of my apartment front door and the large rooftop wireless antennas across the street. So, I'm trapped between at least two sources of focused, pulsating radiation!

I purchased an Electromagnetic Field Radiation Detector from Amazon to see if it would indicate the amount of radiation coming from the Smart Meters. When I turned it on in front of the panel of smart meters it immediately spiked and lit up red indicating that there was danger present. I phoned a friend who is on a citizens committee to stop 5G and Smart Meters in NY. It's called New Yorkers 4 Wired Tech. He has an RF Meter more sophisticated than mine and volunteered to come over to my apartment building to take a reading in front of the panel of 26 smart meters. His RF meter immediately spiked to the Extreme danger level and showed average readings as high as 4,930 microwatts per meter squared. This was recorded on film. According to the Building Biology Institute, the average reading should be under 10 microwatts per meter squared to be safe for long term exposure. This shows the intensity of the microwave radiation these so-called smart meters are emitting.

Back in late December, 2020, two Con Edison employees came over at my request and they were very much surprised to see me and a member of NewYorkers4WiredTech who was there with me. They told us that their company meter did not register any danger coming from their 26 smart meters. But it turns out that they did not measure the pulse-modulated microwave radiation that would have registered danger. Their meters were only set to detect base frequency levels. When we asked about the RF spikes which smart meters emit thousands of times per day, they were silent.

I have been advised by another knowledgeable person from New Yorkers 4 Wired Tech that there is special clothing, hats, curtains, and well as wall and window coverings that I can purchase to block out the pulsed microwave frequency from the smart meters and rooftop antennas. However, these items are very expensive. I should not have had these wireless devices installed so close to me, and I should not be put in the position of having to spend money I need for basic necessities to purchase protection so that Con Edison and telecom companies can earn huge profits while they have impaired my health and disrupted my life.

The lockdown from Covid 19 forced me to be home in my apartment far more than before. This has made the situation even worse. I feel both ill and trapped. I used to enjoy living in this neighborhood. Now, as a matter of survival, I am forced to consider relocating just to escape this constant exposure to the microwave radiation from the smart meters and wireless antennas I'm in the middle of. I can only hope something changes for the better soon.

### **Lauren, Upper West Side, Manhattan**

My name is Lauren and I live on the West side of midtown Manhattan where I have lived for many years.

On Feb. 21, 2020, nine "5G" cell towers began operating across the street from my apartment on the roof of 325 W. 37<sup>th</sup> St., approximately 40-90 feet from my apartment windows. I had a safe place to live before cell towers were installed, changing my life overnight.

During the two weeks following the start of their operation, I experienced severe symptoms, which my doctor confirmed:

- Constant tinnitus
- Shortness of breath
- Increased pain in eyes, limiting visual function
- Insomnia
- Severe migraines
- Burning skin
- Palpitations
- Vertical disturbances through cranium and occipital region simultaneous with horizontal intercranial disturbances extending through the ear canal and sharp stabbing pains extending into all 4 extremities

When I entered my apartment, within minutes my symptoms would increase, with severe damage and pain to my central nervous system. My apartment was no longer safe. I would awaken in the night, gasping for breath.

On March 11, 2020, within a month of the initial occurrence, I secured temporary housing.

Since I've left that apartment, my sleep has been restored. Unfortunately, the injuries I sustained have remained. I'm physically weaker, collapsing every day, a sensation of being neurologically sliced and burned. Migraines are more easily triggered, with nausea and heightened sensitivity to light.

Passing by a set of rooftop cell towers is painful. My ear canal intensifies with the sharp energy moving through my head. My heart races, and feels pushed in, creating a sense of suffocation. It feels like a brush of thin metal bristles pressing into my skin.

I am not alone in being injured.

**Jack, Bensonhurst, New York**

There are times when the nerve ending pain I feel, caused by the microwave radiation coming out of the smart meters that have been placed in my building where I live, can be excruciating. Like if someone stuck an ice pick in my ear. Or someone took a whip across the cheek of my face. Or an electric shock deep within my spine. Other times, I can feel my nerve endings burning. A burning, pinching, sensation that I have felt in just about every part of my body at one time or another. From my back and along my arms to my eyes and even my genitals and rectum. The residue from these burning, pinching, sensations would linger throughout the day long after I left my apartment.

Then there were times that I would get cramps in my calves or my chest, making me feel as if I was getting a heart attack. Sometimes my hands and fingers would cramp up, literally becoming disfigured with a muscular distorted look - like I was in a science fiction horror movie. My doctor told me, it's because radiation can change the structure of DNA.

I have felt similar electric currents in many places other than my apartment. Like the laundromats, drugstores, and restaurants in my neighborhood. The painful results have been the same as in my apartment, and sometimes with headaches and dizziness boarding on nausea.

People have asked me, "How do you know it's the meters doing this to you?" Because the first day I experienced these painful sensations, not knowing what was going on with me, I wanted to make an appointment to see my doctor. I looked at my calendar to check the date when she would be in – the day was June 11<sup>th</sup>, 2018. A few days later, I got an e-mail from Con Edison, congratulating me for updating my electrical meter on June 11th to a smart meter. That's how I know for sure it was the smart meter.

The worst part about all of this, regardless of how many family and friends you might have, there is absolutely no one who can help you. The experience of isolation is like being a character in a Kafka novel.

**Steve Romine, Woodstock, NY**

My name is Steve Romine and I have lived in Woodstock, New York since 1984. When I moved into this particular house in 2008, the landlord had a new electrical service installed upgrading from 60 amp service to 100 amp service. The electro-mechanical analog electric utility meter that was on the house before the upgrade was switched out and replaced with a

transmitting/digital/smart utility meter by the utility (Central Hudson) without my informed consent or knowledge. It was a GE I-210 smart transmitting meter on the front of the house near the front door so anyone coming in or out of the house or standing in the front yard was being exposed to the wireless radiation, besides getting affected inside the house. During this time, I developed severe neck pain, muscle cramps and heart palpitations, which I attributed to getting older.

About 2013 my girlfriend, Nicole, and now partner, moved in with me. Once moved in, she began to experience nausea, vertigo and headaches. We were very concerned with all these profoundly worrisome symptoms.

We had heard from a friend that the digital/transmitting/smart utility meter might be causing the problem. We did the research and found that in California where there had been a roll out of these smart meters for the previous 5 years, people were complaining of adverse health effects. We researched the symptoms and found that the complaints of California's electric utility consumers were the same symptoms as Nicole was experiencing. We also discovered that these are classic symptoms of microwave radiation exposure originally coined "microwave sickness". The condition now is labelled "electrosensitive".

We discovered that we had a smart utility meter on our home after looking the model number up on General Electric website. We had a GE I-210 General Electric smart utility meter, one of the three models listed in the " 210 Smart Meter Family" of electric utility meters on GE's product info page.

I called Central Hudson the next day and was told by customer service that smart meters are not approved by the N.Y, Public Service Commission yet for deployment in New York so it cannot be a smart meter and that what we had on our home was an "ERT meter.

I then called General Electric Corporation's main office and spoke with three technical representatives in the smart meter division on three separate phone calls. I was told by three different tech reps that the GE I-210 is definitely a smart meter and that no one in the field calls them "ERT meters." They said the GE I-210 is a transmitting/digital/smart utility meter with an ERT module making it a one way communicating smart meter. Such utility meters are actually called Automated Meter Reader or AMR and is listed on page 7 fig 1 as a first generation smart meter in the Utility Telecom Councils publication "Smart Meters and Smart Meter Systems.

We obtained by purchase a high frequency analyzer meter which measures microwave radiation exposure. I measured the GE I-210 digital/smart meter emissions and they were much higher than the recommended exposures by the latest research report, The Bioinitiative Report of 2012. We also learned that The World Health Organization in 2011 has classified electromagnetic radiation, which is what is emitted from transmitting digital smart utility

meters, a "possible cause of cancer" the same as lead, benzene and DDT, and should be reclassified to a "probable cause of cancer" according to ex-WHO chief scientist Anthony Miller, PhD.

We then realized Central Hudson was not being honest with us. On March 21st, 2013 we sent a legal Notice and Demand for Removal of All Digital Electric Meters Emitting Radiation and Loss of Easement Through Criminal Misconduct. Central Hudson was given 14 days to remove the smart utility meter and replace it with a time-tested, safe, analog electric utility meter, or acting in self defense under the protections of the US constitution, I would have to do the requested removal and installation myself.

On April 9th, 2013 we sent a legal " Notice of Default and a Warning of Liability." Central Hudson and chief execs were notified that they had defaulted for not responding to the claims set forth in the legal notice and thus through acquiescence agreed with the terms and conditions

We sent Central Hudson a total of 5 sets of lawful notices over the course of several months. At no time did Central Hudson, acknowledge the lawful notices or try to contact me and attempt to resolve the situation in any way. Over the course of several months we sent those lawful notices demanding removal of the smart meter 5 times.

Then, Nicole had a mini-stroke standing 10 feet at an angle of 45 degrees from the meter. I brought Nicole to Northern Dutchess County Hospital for medical observation and treatment. The hospital stated that after 2 days of admittance and observation, she appeared to be in perfect health and they didn't know why she had a mini-stroke. They did warn us upon leaving the hospital that, because she had a mini-stroke, she is at high risk for a major stroke in the next 90 days which could mean major disability or even possibly death.

Now we were both really worried and went home from the hospital after Nicole was discharged and began to research microwave exposure symptoms. Our research showed us that chronic exposure to low level microwave radiation can cause heart attacks and strokes. Realizing that Nicole was standing in front of the transmitting digital/smart/utility meter, I understood I had no choice but to remove the smart utility meter before Nicole has another stroke.

I turned off the power to the house with the main breaker. I put wooden pallets on the ground with heavy thick rubber mat's on top. I stood on that and wearing rubber gloves I removed the transmitting digital/smart meter and replaced it with a re-manufactured safe electro-mechanical analog electric utility meter that surpasses the ANSI Standards that the Public Service Commission uses to approve electric utility meters for use in New York.

All of the above activity of removal of smart utility meter and installation of the time tested safe non-transmitting analog meter was recorded by video documenting the last readings on the digital smart meter and the proper operation of the safe analog utility meter showing the dial spinning and electricity flowing. Our home had available electrical power for four days from the proper installation of the analog meter with no problems.

On May 16th, 2013 we sent a package containing Central Hudson's smart meter along with another set of legal documents, "Demand for Removal" and "Notice of Default" accompanied with a DVD documenting the removal of said smart utility meter and the installation of the re-manufactured, refurbished and re-calibrated safe electro-mechanical analog utility meter produced by Hialeah Meter Company. Their standards surpass the standards set by the NY Public Service Commission. All of this was mailed to Central Hudson Headquarters attention to James P. Laurito and Steven V. Lant, chief executives.

Then on May 20th, 2016 Central Hudson came to our home to disconnect us against our protests and proceeded to cut the wires at the pole, where they hung for 6 years while we were deprived of electrical service. It didn't seem to matter to Central Hudson that someone in the house was recovering from a stroke, they disconnected us anyway instead of simply inspecting and testing the installation of our refurbished analog meter or installing one of their own used analog utility meters, which they had the choice of doing but refused. Other electrical work can be done by anyone in Ulster County but needs to be inspected by an electrical inspector. Central Hudson has the ability to test meters to see if they are operating properly. At that point is the only time Central Hudson called us about our claims. At no time previous to my seeking them to correct the situation did they call me to work things out. When they finally called us they did so to threaten to have me arrested. I said I know my constitutional rights to self defense and that is why I removed the unsafe smart utility meter from our home as someone in the house was being affected adversely and was recovering from a stroke. The chief execs at Central Hudson refused to accommodate our health emergency.

***When I removed the transmitting meter, I was very surprised to discover that all my symptoms, including the severe neck pain that I thought would force me into retirement, disappeared and have not returned since I have lived without smart meters in my living environment for the past 7 years. I removed the smart utility meter to protect Nicole from a possible major stroke. I had no idea that in doing so my symptoms would disappear.***

I had suffered with severe neck pain, charlie horse cramps in my legs in the middle of the night when I was sleeping and slight heart palpitations periodically upon retiring to bed. All these symptoms can be caused by exposure to low levels of microwave radiation. Before I knew about the smart meter being on my home, I took 400 milligrams of Ibuprofen morning and

night for 1 and 1/2 years to self- medicate away the pain from the neck as I couldn't afford a doctor and I didn't have any health insurance. The anxiety from the symptoms was incredibly worrisome.

My life was turned upside down and the emotional damage and psychological impact on me from worry over my partner Nicole was extremely difficult. Central Hudson adamantly refused to issue us a safe analog utility meter and demanded that we accept a GE I -210 smart utility meter back on our home, which would have put my partner Nicole at significant risk again. Furthermore Central Hudson demanded that we pay a \$500 disconnect/reconnect fee before they would reconnect our power. Besides many common law and civil law violations our constitutional rights were violated as well as International Rights established in Nuremberg Treaty called the "Nuremberg Code", and agreed to by all the developed nations in the world including the U.S.

Once the digital utility meter was taken off our home, Nicole gradually recovered 90% and has not has another stroke since, but now suffers with electrosensitivity and reported by other people who had a smart meter installed on their homes. We know for a fact these smart meters cause harm.

Having had all these experiences revolving around *involuntary exposures* to man-made pulsing artificial electromagnetic microwave radiation, Nicole founded the Smart Meter Forum monthly meeting in 2013, which recently has been renamed the Truthsayers Forum. I launched the original stopsmartmeterswoodstockny.com website, also known now as "The Truthsayers." I have two lawsuits pending against the past chief executives of the Utility, the Utility: Central Hudson, the parent company; Fortis Inc., and the New York State Public Service Commission. I have a weekly radio show on an independent, commercial free, community, progressive radio station Woodstock 104 (104.1 FM) called the "Woodstock Truth Squad," which broadcasts into parts of the Hudson valley in New York. I will eventually be posting audio links of the show on this website on the archives page. [Emphasis added.]

### **Anonymous**

An amendment to regulations needs to be made for those who have to vacate their homes due to severe debilitation.

Doctors said they didn't know if I would live because of the severity of injuries I had from emfs. They said I was close to having an aneurysm and they told me to get to locations without wireless technology. I found places in very deep woods near me, and temporarily stayed in

many, many friends' houses where it was safe only for a little while. Even when I was at friend's houses, multiple times weekly, I had to sleep in my car in the woods.

Most of 2 1/2 years I was in the woods, and often going back and forth from my home to cook, use the shower, get supplies, etc, though I got injured quickly being there, it was a lifeline of stability. I had no ability for agency to understand what to do, as I was too debilitated, I was just surviving. I spent almost all waking hours sleeping in my car, incapacitated.

I've met several people with similar circumstances, and have heard about more.

When I got well enough to have agency, I contacted a top pro bono attorney, but he who didn't know how to handle this issue. My Housing Authority tried to ignore me so as not to have to make a decision that would be detrimental. They didn't know any policy that existed that could help me.

Please change HUD policy so that those who are extremely ill don't have to face housing choices in the middle of a crisis in which they have no ability to have agency.

### **Anonymous**

11 yrs ago, everyone was awed when I bought a home with the home ownership program. It changed my life completely. I was raised upper middle class, and I was able to move into a lovely neighborhood. I love how my US HUD payments go to pay the USDA loan. Great program!

7 yrs after I moved in, I had an EMF injury when a streetlight went up. I collapsed, developing severe neurological problems/couldn't walk/talk, my head in torturous pain. I couldn't go to hospital. EMFs deadly. It took me a year to find a doctor. I found out in the interim that if I went to the deep woods, away from cell towers/wifi, my symptoms almost disappeared.

One doctor thought I was having an aneurism, and my survival route was to stay in the woods. I couldn't go home/cell towers/neighbors wifi/smart meters.

I had significant brain damage. By the time I was able to come out of the woods and be well enough, I'd been away from my home more than a year. It was an unimaginably horrendous, torturous experience. I know so many who've had the same experience!

I joined EMF accommodations committee, and regularly, sometimes weekly, people call me desperately with issues with HUD. After about a year had gone by, my mom helped me contact

the disability coordinator at my Senator's office. They contacted HUD who didn't know what to do, I contacted the disability attorney (free) they didn't know what to do. Nothing ever really got resolved.

The HA generally just turned their head, as they wanted to protect me from rules that could harm. I was so brain damaged that I didn't know how to ask for RA. I did tell the HA I needed to move immediately as I was in extreme danger in my housing, but nothing .... they didn't do anything.

Now, 3 years later, I'm better, and in my home, living in a small shielding tent in the middle of my living room, as the only safe space. My brain and neurological system continue to be severely injured. My mom hired an aide to help me, but doesn't know how to help. My HA told me at first I couldn't move from my house. I was on disability prior to these EMF issues, and they told me I only had one time to buy a house. This was horrendous. It's also horrendous because as why shouldn't I be able to move, like everyone else in this country. Now, I'm stuck in my house! I got them to budge on that, now they said I couldn't go from a house to a rental without huge administrative burden.

My house isn't medically accessible to my disability. I told them this a few times in person, and they said to put it in writing, however, I have had a severe brain injury, and I have the attention of a fly, so I couldn't write anything, and kept forgetting. As well, they've told me they don't know how to do what I need.

I can't function enough to figure all this out and I keep being injured more severely by the house and surroundings. There's wifi all over, I have to turn the breakers off, I used to not be able to use the stove, or lights, there's smart meters 15 ft on either side of my small house. There's problems with something called ground current and dirty electricity.

I'm so sick from my house, yet I'm not getting help, and I can't figure it out, and it's just injuring me severely. 2 wks ago a private individual, who knows HUD regs, offered to help me. Now I have regs, RA and doctor's letter almost ready. After that I'll move into a temporary rental. I haven't had this approved yet. I need temporary rental while I own, as I'm incapable of doing anything with the brain injury while I'm in the house with neurological damage.

I can barely do anything, and finding a new place is mammoth. It's so difficult to find a place with low EMFs. I need a remote area, and concerned there won't be an HA there. When I tried to live in several peoples' homes, I had to test out each one. I'm not sure if when I rent that I'll know that home won't injure me until I rent for a week or month first.

It could be after a few days that I find some things severely injurious to me. It's like sugar, in that I won't know I've had too much until I do. The assets from the sale of my house, through

no fault of my own, will kick me off Medicaid. I'd like the HA program to have a place to keep the money so I can buy another house, but they wouldn't.

I have a friend, and also know of many people who can't live in houses. HUD should allow these people to purchase land only, as their right to fair housing. There are about 5000 in Facebook groups with EMF issues having housing issues. Need brochures guiding me what to do for EMFs and housing.

HUD guidelines say it has to communicate, but with brain injury that's difficult as I don't understand things very often. Also, when I had EMF injury, definitely felt discriminated against because people thought I was nuts. Now I have 3 doctors' diagnoses, including EMF brain injury. Many I know with this injury talk too much about emfs, not knowing how to present their needs, and HA discriminates.

**Note: This story is about families displaced in Massachusetts**

#### **THE GILARDI FAMILY, PITTSFIELD MASSACHUSETTS**

It was Earth Day, 2021. Based on the children's classic *Alexander and the Terrible, Horrible, No Good, Very Bad Day*, Amelia Gilardi rewrote and retitled, for purposes of Earth Day, the story based on a challenge faced by her family and her community in which the environment plays a central role. "5G Earth Day Countdown: Children — Amelia's Terrible, Horrible, No Good, Very Bad Cell Tower Days" was an ode to her community and in so many ways, it spoke to a much broader audience.

*My name is Amelia and I am 13 years old.*

*A Verizon cell tower blindsided my Pittsfield, Massachusetts neighborhood and made us sick. This is my story.*

*Last March, we were sent home from school due to the pandemic. The ice skating show that we had worked so hard practicing for was cancelled. Auditions for my school musical were cancelled. My weekend nature program was cancelled. Everything was cancelled.*

*Everything except the construction happening in my neighborhood.*

*Trucks were rolling by our house – big ones, flatbed ones, trucks carrying other trucks. When trying to clear the corner between Plumb and Alma Street, the weight of the truck was so much it crushed the water main beneath the road. We couldn't get the car out past the repair crew and went without water for the day. No one knew why.*

*Because we were home with no plan to return to school, we tried to keep busy. For Christmas, my sister and I got mountain bikes and we went riding up our street like we always did. But this time, at the top of the street, we saw parked trucks and the cleared trees. Where there was forest that was once part of the Herman Melville Farm, a land called "Arrowhead" after Melville having found them in the fields, was now a big, open clearing.*

*Trees by the dozens had been chopped down and were lying on the ground. Some had been wood chipped and spread from Alma Street to the clearing. None of the neighbors walking their dogs or out for a jog or pushing their children in strollers had any idea why.*

*Mom called our City Councilor and he didn't know why. He said he would call the Department of Public Works and put some calls into the city to find out. When he got back to mom, he said no one knew anything about the construction. Mom came out for a walk with us and took a photo of the trucks. She called the construction company and asked what they were doing. That is when we learned it was a cell tower.*

Amelia Gilardi is an amazing 13-year-old playing the leading teen role in a theater she never tried out for, with some adults in roles she never dreamed she would witness.

Amelia Gilardi is Courtney Gilardi's daughter. That explains a lot.

The startling news that a 115-foot tall, 12-antenna cell tower was being constructed in their neighborhood in the section of Pittsfield historically known as Shacktown concerned Amelia's mother, Courtney. Construction had already begun. Twenty of the 22 neighbors had not been noticed as was required by the local zoning ordinance, and none of them had been noticed within the period of time allotted for an appeal of permit approval. In the ensuing months Courtney Gilardi and her neighbors struggled to understand how this could happen without notice in their community.

After the tower was activated symptoms were, for most, immediate. Courtney dove into the research. She contacted experts around the country, in Canada and in Europe. Verizon did not inform the residents when the tower was turned on. They knew because their bodies told them. They stopped sleeping through the night if they could get to sleep at all. They were plagued with headaches, vertigo, nausea, brain fog, skin rashes and within the next 18 months there would be two diagnoses of cancer and one recurrence of cancer. Family pets would die, and even the moles did not return to family gardens as the ground started to thaw after winter had passed. Bees and other pollinators began to disappear.

Courtney Gilardi and her husband have two girls, one Courtney refers to as "my little one" for the sake of privacy, and 13-year-old Amelia who has accompanied her mother to every Pittsfield City Council and Board of Health meeting, speaking publicly each time, imploring them month after month to help them find some relief from the injurious Verizon tower. Many of the neighbors joined the fight but few made it their mission to contact experts internationally and

invite them to virtual town halls to educate residents and community leaders about the health impacts associated with RF (wireless) radiation.

What sets this story apart, where residents all over the country are starting to experience an intrusion of cell towers into residential neighborhoods and on school grounds at an alarming pace, is the fact the Gilardis are fighting back. The relentless drumbeat by Courtney and Amelia began to include more neighbors as the months went by. Under longstanding Massachusetts law, Health Boards have strong and extensive authority to require that injurious commercial operation be eliminated, so the Gilardis asked the Board to step in and provide relief. On February 2, 2022 the Pittsfield, Massachusetts Board of Health unanimously voted to require that Verizon and the landowner to appear and show cause why the Board should not issue a cease and desist order. The Board took almost two years reviewing the extensive scientific, medical and personal evidence and expressly found that the cluster of illnesses was caused by the tower's operation. The Board encouraged Verizon to work with the city and residents to reduce the impact on these families but indicated Verizon would be required to cease operations if it persisted in its position that the city was powerless to protect Pittsfield residents from harm. This is the first known cease-and-desist by a state/local Board of Health against a wireless carrier in the United States.

Verizon refused to appear or negotiate. It responded to the Board of Health's issuance of the cease-and-desist with a [federal lawsuit](#), filed May 10, 2022, in a Massachusetts U.S. District Court. The carrier asked the court to rule that the Board is indeed powerless to protect Pittsfield residents even after an expert medical agency finding of both injury and causation. Verizon claims that state and local health authorities are completely preempted by [47 U.S.C. §332\(c\)\(7\)\(B\)\(II\)](#), which prohibits state and local [zoning authorities](#), from "regulat[ing] the placement, construction, and modification of [personal wireless service facilities](#) on the basis of the environmental effects of radio frequency emissions to the extent that such facilities comply with the [Commission's](#) regulations concerning such emissions." The tower looming over the Shacktown section of Pittsfield was tested and found to be within the regulatory limits set by the FCC, so Verizon contends it can operate even if the resultant emissions lead to severe injury or even death and in the face of traditional state police powers.

Courtney Gilardi has been working tirelessly to educate her own community, and simultaneously educating communities across the country, that this practice of wireless carriers bringing their cell towers into residential areas and next to schools has to stop. The fact that this tower is at least arguably within regulatory limits set by the FCC may make Verizon feel they have the upper hand, but it is clearly making a very wide swath of neighbors in the vicinity of the tower sick.

"My little one had headaches, dizziness, and felt like her head was 'buzzy,' explains Courtney. "She also suffered from the sensation that her skin was crawling and was itchy when she was in her room, which was on the side of the house closest to the cell tower. She complained of stomach aches and a once voracious eater and a like-clockwork sleeper could do neither. Since the tower was activated she has lost her appetite for food and complained she couldn't fall

asleep. Those were never issues in the past. She also suffered with horrible nightmares. She would toss and turn and scream out. I only realized how often she did this after we moved to the cottage and she slept peacefully through the night.”

The cottage Courtney is referring to is the unheated cottage they have rented so they can escape their home which they hope and pray they can return to, but much of that depends on a federal judge’s decision. The cottage does not have hot water so Courtney and her family return to their “tower home” for a hot shower, but it is a place they can sleep through the night.

“When we would spend too much time at home, my little one would ask to leave and go to the cottage,” explains Courtney, describing how they would return to the house to get clothes, take a hot shower, and be with their toys and amenities they enjoyed and never contemplated leaving until Verizon became their unwelcome neighbor.

“She would say, “I’m ready now” and we knew despite mentally wanting to stay in her own room with her toys, ‘lovies’, fort, books and the only home she had ever known, that physically she knew her body felt better spending time in a rundown cottage where the only thing she had was a mattress on the floor and many mice for company.

At our home by the tower, she would lay down on the kitchen bench with her legs curled up to her stomach with red, puffy eyes, looking miserable, sleep deprived and not feeling herself. She would be so nauseous that she missed school, which led to her losing confidence as she felt she was falling behind in her studies,” describes the mom of two. “Despite being one of the top students in the class, she felt like she had missed so much and felt ill so often and felt that reflected in her work, that she chose to not take the 5th grade MCAS testing.”

Courtney pauses for a moment as she describes what her “little one” has gone through, and then continues. “One day, within 10 minutes of going to school, she vomited into her face mask. It wasn’t the first time it would happen. She would sleep with a bucket besides her bed and both her dad and I would take turns holding her hair back.

“Amelia, at our first in person Board of Health meeting, shared what our routine was like. She reminded me that we needed to ‘show’ not ‘tell’ what life by the tower was like.” So, with her mother by her side, 13-year-old Amelia Gilardi sat behind the table testifying with her mom showing the various medications Amelia now takes, and the pan she would keep at the side of her bed when the waves of nausea were intense and sudden.

“Amelia would get dizzy. She is my ice skater and gymnast with great balance, and I would watch her walk into walls,” describes Courtney. “Sometimes she would vomit in the middle of the night and I’d hear her little voice besides me in the dark by my bedside saying, “Mama, I’m sick. I just threw up in the sink.’

“Sometimes she would get headaches. She would be dizzy. I remember her schooling from home and having missed several days and realizing that I should check in with the school nurse and tell her why. I remember wondering what she would say, and to my surprise, she actually knew about the [cell tower harms] issue and was supportive.”

“For Amelia, sleep had never come easy, but once she fell asleep, she was a sound and solid sleeper. After the tower, that wasn't the case,” Courtney explains, describing the sudden onset symptoms of classic electromagnetic sensitivity. “She not only had a hard time falling asleep and was often still up at midnight. She just couldn't stay asleep. She was up at 1:00 AM, 2:00 AM, 3:00 AM in the morning. She testified at the City Council getting as few as two to three hours of sleep a night. Often around 4:00 AM or 5:00 AM she would fall asleep, only to be woken by the alarm at 6:00 AM. She never felt or looked rested. She had dark circles under her eyes which always looked tired.

“She had headaches and would ask for Tylenol. We hardwired everything and bought her blue light glasses and tried to spend as much time away from home as possible.” Courtney describes trying to juggle their lives and adjust everything, sometimes on a daily basis. Watching her daughters’ misery was the hardest part. As she was trying to empower her neighbors she sometimes felt powerless herself. In describing Amelia’s struggle, Courtney shares, “Sometimes she would vomit, sometimes she would just retch, and watching that was even worse, because it was like something wanted to come out, but couldn't, and she couldn't get any relief. We tried Tums, papaya enzyme, chamomile, mints, ginger chews and ginger tea and a relaxing lavender spray. We tried everything, but nothing really worked besides distance, which meant leaving our home.”

When Amelia Gilardi wrote her own version of the children’s classic about Alexander’s horrible day, she ended with the following. The only factual change is that the Health Department has, indeed, sided with the Gilardis against Verizon. Now it’s up to a federal judge in a country with increasing numbers of residents extremely unhappy to have cell towers invading their neighborhoods and marking the school grounds at their children’s schools.

From Amelia:

***The really bad, worst, no good bad part –***

*We learned that we were not the only ones harmed by cell towers. We were put in touch with Noah Davidson’s family in Sacramento California. Both their girls, like us, got sick when a 5G tower was placed outside their bedroom window. No one listened to them either.*

*Mom learned about a boy, my age in Canada, also harmed by wireless radiation since he was 5 years old. They made a movie about him and others who were harmed, called Prisoners without Walls. We talked and I learned he liked the same book series. He loved playing video games. He spoke French and liked making videos.*

*We started meeting families from all over with everyday kids, like us, who had been harmed from wireless radiation either from cell towers or mobile devices. Why, if so many people were being hurt from this, was no one helping them?*

*So the truly bad, no good part is that the science is here but our legislators simply are not responding fast enough. Dr. Paul Heroux, Dr. Martha Herbert, Dr. Magda Havas, Dr. Cindy Russell, Dr. Sharon Goldberg, Theodora Scarato, Cecelia Doucette and many others have tried to educate Pittsfield about these issues. They have been silenced at meetings, and any letters from them or offers to present information or assist with an investigation have fallen on deaf ears.*

*My mom would ground me if I was told not to do something and I kept doing it over and over. I've heard my grandma say, "When we know better, we do better."*

*Big people, we know better. Please, do something. We never thought this could happen to us so please, don't wait until it happens to you.*

*I'm asking everyone who is reading this to **advocate for cell tower setbacks away from schools and homes**. I'm asking everyone to require the FCC standards that fail to protect us from biological harm to be updated. I'm asking you restore my neighborhood to the safe, residential place it was before the tower, and I am asking for each and every person to care about the wireless safety issue.*

*Our people, our pollinators and our planet depend on you.*

*Amelia*

**The following groups and individuals have granted permission to submit these comments on their behalf under the name of “Advocates for the EMS Disabled:”** Wired Broadband, Inc., Odette Wilkens, President & General Counsel, Forest Hills, NY; Children’s Health Defense; Manhattan Neighbors for Safer Telecommunications, New York, NY; National Institute for Science, Law and Public Policy, Washington, D.C.; Elyse Polonetsky, Irvington, NY; The Leto Foundation, Westborough, MA; Pennsylvanians for Safe Technology, Donna DeSanto Ott, PT DPT MS FMCHC, Founder & President, disabled by EMS, Mount Pleasant, PA; 5G Free California, Julie Levine, EMS Disabled, California Hot Springs, CA; Safe Tech Hawaii, Debra Greene, PhD, EMS Disabled, Kihei, Hawaii; Felix Gruman, Jackson Heights, NY; The Power Couple EMF Coaching, Roman, Fonthill, Ontario; Sean Alexander Carney, Hampshire, UK; C.R. Scheller, EMS Disabled, Newburgh, IN; Virginians for Safe Technology, Fredericksburg, VA; International Commission for Electromagnetic Safety, Venice, Italy, and European Cancer Environment Research Institute, Brussels, Belgium, Livio Guiliani; Massachusetts for Safe Technology, Cecelia Doucette, Director, Shutesbury, MA; Luanne Moore, EMS Disabled, Boynton Beach, FL; Connie Sampognaro, Calhoun, Louisiana; Safe Tech NC, Mary Anne Tierney, RN, MPH, Fairview, NC; Janet FitzGerald, EMS Disabled, Rowley, MA; Andrew and Marie Molnar, Ithaca, NY; MocoSafeG.org, Robert Janku, Montgomery County, MD; New Yorkers 4 Wired Tech, New York, NY; Alliance for Microwave Radiation Accountability, Inc. (AMRA), Michael Muadin, President, EMS Disabled, East Chatham, NY; Center for Safer Wireless, Desiree Jaworski, Executive Director, Haymarket, VA; SW Pennsylvania for Safe Technology, Susan Jennings, MPA BA, Founder, Mount Pleasant, PA; Doe Kelly, member of Longmont for Safe Technology and Coloradans for Safe Technology, Longmont, CO; Families for Safe Technology, Victor Odlivak, Eugene, Oregon; Disability Policy, Susan Molloy, M.A., Snowflake, AZ; Howard Goodman, Esq., Forest Hills, NY; Pamela Wallace, EMS Disabled, Rochester Hills, Michigan; Jodi Nelson, EMS Disabled, Dahlonga, GA; Rhode Islanders for Safe Technology, Stephen Dahl, EMS Disabled (cannot work or live near Wi-Fi or cellphones or towers), Kingston, RI; Safe Technology Minnesota, Minneapolis, MN; Petra Brokken, Minneapolis, MN; 5G Free Rhode Island, Sheila Resseger, M.A., Cranston, RI; Steve Romine, Woodstock, NY; Kathleen Watson, EMS Disabled, Forestville, CA; Mary Lin, Longmont, CO; Pennsylvania for Safe Technology, Elizabeth Feudale-Bowes, EMS Disabled; Coloradans for Safe Technology, Andrea Mercier (mother of child with environmental sensitivity including but not limited to EMS), Colorado Springs, CO; EMF Safety Network, Sidnee Cox, Director, Windsor, CA; Nick Curto, New York, NY; and La Plata for Safe Technology, Deborah Shisler, EMS Disabled, La Plata, CO.