

for the proper performance of the functions of the agency, including whether the information will have practical utility;

- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Enhance the quality, utility, and clarity of the information to be collected; and

- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

*Agency:* Employment and Training Administration.

*Type of Review:* Extension of a currently approved collection.

*Title:* Application for Alien Employment Certification.

*OMB Number:* 1205-0015.

*Affected Public:* Individuals or households; Business or other for-profit; Not-for-profit institutions; Farms; Federal Government; and State, local, or tribal government.

*Type of Response:* Reporting.

*Frequency:* On occasion.

*Number of Respondents:* 111,200.

Requirement	Number of responses	Average response time (hours)	Estimated burden hours
Form 750 Parts A and B .....	100,000	2.8	280,000
H-2A Applications (Form 750 Part A Only) .....	4,200	1	4,200
H-2B Applications (Form 750 Part A Only) .....	7,000	1.4	9,800
Totals: .....	111,200	.....	294,000

*Total Annualized Capital/Startup Costs:* \$0.

*Total Annual Costs (operating/maintaining systems or purchasing services):* \$0.

*Description:* Under section 212(a)(5)(A) of the Immigration and Nationality Act (8 U.S.C. 1182(a)(5)(A)), certain aliens may not obtain a visa for entrance into the United States in order to engage in permanent employment unless the Secretary of Labor has first certified to the Secretary of State and to the Attorney General that: (1) There are not sufficient U.S. workers who are able, willing, qualified and available at the time of application for a visa and admission into the U.S. and at the place where the alien is to perform the work; and (2) the employment of the alien will not adversely affect the wages and working conditions of U.S. workers similarly employed. Form ETA 750, parts A and B, is the application form submitted by employers that forms the basis for a determination as to whether the Secretary shall provide such a certification. Form ETA 750, part A, is also utilized to collect information that permits the Department to meet Federal responsibilities for administering two nonimmigrant programs: The H-2A and H-2B temporary labor certification programs. The H-2A temporary agricultural program establishes a means for agricultural employers who anticipate a shortage of domestic workers to bring nonimmigrant aliens to the U.S. to perform agricultural labor or services of a temporary or seasonal nature. The H-2B program establishes a means for employers to bring

nonimmigrant aliens to the U.S. to perform nonagricultural work of a temporary or seasonal nature.

**Ira L. Mills,**

*Departmental Clearance Officer.*

[FR Doc. 03-25107 Filed 10-2-03; 8:45 am]

**BILLING CODE 4510-23-P**

**DEPARTMENT OF LABOR**

**Office of the Secretary**

**Submission for OMB Review; Comment Request**

September 23, 2003.

The Department of Labor (DOL) has submitted the following public information collection request (ICR) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104-13, 44 U.S.C. chapter 35). A copy of this ICR, with applicable supporting documentation, may be obtained by calling the Department of Labor. To obtain documentation, contact Darrin King on 202-693-4129 (this is not a toll-free number) or e-mail: [king.darin@dol.gov](mailto:king.darin@dol.gov).

Comments should be sent to Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for the Employment Standards Administration (ESA), Office of Management and Budget, Room 10235, Washington, DC 20503 (202-395-7316 / this is not a toll-free number), within 30 days from the date of this publication in the **Federal Register**.

The OMB is particularly interested in comments which:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

- Enhance the quality, utility, and clarity of the information to be collected; and

- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

*Type of Review:* Extension of currently approved collection.

*Agency:* Employment Standards Administration.

*Title:* Regulations Governing the Administration of the Longshore and Harbor Workers' Compensation Act.

*OMB Number:* 1215-0160.

*Affected Public:* Individuals or households and Business or other for-profit.

*Frequency:* On occasion and Annually.

*Type of Response:* Recordkeeping and Reporting.

*Number of Respondents:* 170,564.

Information Collection	Annual Responses	Average Response Time (Hours)	Annual Burden Hours
LS-200, Report of Earnings .....	12,800	0.17	2,176
LS-200, Report of Earnings with no earnings information to report .....	3,200	0	0
Liens .....	10	0.5	5
Certifications .....	5	0.75	4
Reinstatements .....	2	0.5	1
Settlement Applications .....	4,500	2	9,000
Section 8(f) Payments .....	550	5	2,750
ESA-100 (LS), Annual Report .....	42,000	0.02	840
LS-271, Application for Self-Insured Employer .....	20	2	40
LS-274, Report of Injury Experience of Self-Insured Employer .....	412	1	412
LS-201, Notice of Employee's Injury of Death .....	4,500	0.25	1,125
LS-513, Report of Payments .....	900	0.5	450
LS-267, Claimant's Statement .....	1,300	0.033	43
LS-203, Employee's Claim for Compensation .....	10,125	0.25	2,531
LS-204, Attending Physician's Supplementary Report .....	90,000	0.5	45,000
LS-262, Claim for Death Benefits .....	240	0.25	60
<b>Total</b> .....	<b>170,564</b>	.....	<b>64,437</b>

*Total Annualized Capital/Startup Costs:* \$0.

*Total Annual Costs (operating/maintaining systems or purchasing services):* \$56,984.

*Description:* The Longshore and Harbor Workers' Compensation Act, as amended (Pub. L. 98-426) pertains to the provision of benefits to workers injured in maritime employment on the navigable waters of the United States or in an adjoining area customarily used by an employer in loading, unloading, repairing, or building a vessel, as well as coverage extended to certain other employees. The regulations and associated forms cover the submission of information necessary for the processing of claims for benefits under the Longshore Act.

**Ira L. Mills,**

*Departmental Clearance Officer.*

[FR Doc. 03-25108 Filed 10-2-03; 8:45 am]

**BILLING CODE 4510-23-P**

**DEPARTMENT OF LABOR**

**Office of the Secretary**

**Submission for OMB Review; Comment Request**

September 17, 2003.

The Department of Labor (DOL) has submitted the following public information collection requests (ICRs) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104-13, 44 U.S.C. chapter 35). A copy of each ICR, with applicable supporting documentation, may be obtained by calling the Department of Labor. To obtain documentation, contact Darrin

King on 202-693-4129 (this is not a toll-free number) or e-mail: [king.darrin@dol.gov](mailto:king.darrin@dol.gov).

Comments should be sent to Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for the Employment Standards Administration (ESA), Office of Management and Budget, Room 10235, Washington, DC 20503 (202-395-7316/this is not a toll-free number), within 30 days from the date of this publication in the **Federal Register**.

The OMB is particularly interested in comments which:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Enhance the quality, utility, and clarity of the information to be collected; and
- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

*Type of Review:* Extension of a currently approved collection.

*Agency:* Employment Standards Administration.

*Title:* Health Insurance Claim Form.

*OMB Number:* 1215-0055.

*Affected Public:* Business or other for-profit; Not-for-profit institutions; and Individuals or households.

*Frequency:* On occasion.

*Number of Respondents:* 533,427.

*Number of Annual Responses:*

2,133,708.

*Estimated Time Per Response:* 7 minutes.

*Total Burden Hours:* 248,812.

*Total Annualized Capital/Startup Costs:* \$0.

*Total Annual Costs (operating/maintaining systems or purchasing services):* \$0.

*Description:* The information collected by the Form OWCP-1500 is required to reimburse health care providers for services rendered to injured employees covered under the Federal Employees' Compensation Act, 5 U.S.C. 8101 *et seq.*, the Black Lung Benefits Act, 30 U.S.C. 901 *et seq.*, and the Energy Employees Occupational Illness Compensation Program Act of 2000 42 U.S.C. 7384 *et seq.* Appropriate reimbursement cannot be made without documentation that details services provided by health care professionals throughout the country.

*Type of Review:* Extension of a currently approved collection.

*Agency:* Employment Standards Agency.

*Title:* Authorization for Release of Medical Information.

*OMB Number:* 1215-0057.

*Affected Public:* Individuals or households.

*Frequency:* One time.

*Number of Respondents:* 1,500.

*Number of Annual Responses:* 1,500.

*Estimated Time Per Response:* 5 minutes.

*Total Burden Hours:* 125.

*Total Annualized Capital/Startup Costs:* \$0.

*Total Annual Costs (operating/maintaining systems or purchasing services):* \$0.