The Department of Labor—Office of Workers’ Compensation Programs (OWCP), Office of Management and Budget, Room 10235, Washington, DC 20503, Telephone: 202–395–7316/Fax: 202–395–5806 (these are not toll-free numbers), E-mail: 
OIRA_submission@omb.eop.gov within 30 days from the date of this publication in the Federal Register. In order to ensure the appropriate consideration, comments should reference the OMB Control Number (see below).

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.

Agency: Office of Workers’ Compensation Programs.

Type of Review: Extension without change of a currently approved collection.

Title of Collection: Notice of Issuance of Insurance Policy.

OMB Control Number: 1240–0048.

Agency Form Numbers: CM–921.

Affected Public: Private Sector—Businesses and other for-profits.

Total Estimated Number of Respondents: 60.

Total Estimated Annual Burden Hours: 633.

Total Estimated Annual Costs Burden (Does Not Include Hourly Wage Costs): $1,975.

Description: The Form CM–921 provides insurance carriers with the means to supply OWCP’s Division of Coal Mine Workers’ Compensation with information showing that a responsible coal mine operator is insured against liability for payment of compensation under the Federal Black Lung Benefits Act, as amended. 30 U.S.C. 933. For additional information, see related notice published in the Federal Register on September 15, 2009 (74 FR page 47275).

Darrin A. King, 
Departmental Clearance Officer.

[FR Doc. 2010–9448 Filed 4–22–10; 8:45 am]

BILLING CODE 4510–27–P

DEPARTMENT OF LABOR
Office of Workers’ Compensation Programs
Division of Coal Mine Workers’ Compensation; Proposed Collection; Comment Request

ACTION: Notice.

SUMMARY: The Department of Labor, as part of its continuing effort to reduce paperwork and respondent burden, conducts a pre-clearance consultation program to provide the general public and Federal agencies with an opportunity to comment on proposed and/or continuing collections of information in accordance with the Paperwork Reduction Act of 1995 (PRA95) [44 U.S.C. 3506(c)(2)(A)]. This program helps to ensure that requested data can be provided in the desired format, reporting burden (time and financial resources) is minimized, collection instruments are clearly understood, and the impact of collection requirements on respondents can be properly assessed. Currently, the Office of Workers’ Compensation Programs is soliciting comments concerning the proposed collection: Request for State or Federal Workers’ Compensation Information (CM–905). A copy of the proposed information collection request can be obtained by contacting the office listed below in the addresses section of this Notice.

DATES: Written comments must be submitted to the office listed in the ADDRESSES section below on or before June 22, 2010.

ADDRESSES: Mr. Vincent Alvarez, U.S. Department of Labor, 200 Constitution Ave., NW., Room S–3201, Washington, DC 20210, telephone (202) 693–0372, fax (202) 693–1378, E-mail Alvarez.Vincent@dol.gov. Please use only one method of transmission for comments (mail, fax, or E-mail).

SUPPLEMENTARY INFORMATION:
I. Background: The Federal Mine Safety and Health Act of 1977, as amended (30 U.S.C. 901) and 20 CFR 725.535, require that DOL Black Lung benefit payments be a beneficiary for any month be reduced by any other payments of state or federal benefits for workers’ compensation due to
pneumoconiosis. To ensure compliance with this mandate, DCMWC must collect information regarding the status of any state or Federal workers’ compensation claim, including dates of payments, weekly or lump sum amounts paid, and other fees or expenses paid out for this award, such as attorney fees and related expenses associated with pneumoconiosis. Form CM–905 is used to request the amount of those workers’ compensation benefits. This information collection is currently approved for use through September 30, 2010.

II. Review Focus: The Department of Labor 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 submissions of responses.

III. Current Actions: The Department of Labor seeks the approval for the extension of this currently-approved information collection in order to gather information to determine the amounts of Black Lung benefits paid to beneficiaries. Black Lung amounts are reduced dollar for dollar, for other Black Lung related workers’ compensation awards the beneficiary may be receiving from State or Federal programs.

Type of Review: Revision.
Agency: Office of Workers’ Compensation Programs.
Title: Request for State or Federal Workers’ Compensation Information.
OMB Number: 1240–0032.
Agency Number: CM–905.
Affected Public: Federal government; State, Local or Tribal Government.
Total Respondents: 1400.
Total Annual Responses: 1400.
Average Time per Response: 15 minutes.
Estimated Total Burden Hours: 350.
Frequency: On occasion.
Total Burden Cost (capital/startup): $0.
Total Burden Cost (operating/maintenance): $808.

Comments submitted in response to this notice will be summarized and/or included in the request for Office of Management and Budget approval of the information collection request; they will also become a matter of public record.


Vincent Alvarez,
Agency Clearance Officer, Office of Workers’ Compensation Programs, US Department of Labor.

[FR Doc. 2010–9381 Filed 4–22–10; 8:45 am]
BILLING CODE 4510–CK–P

DEPARTMENT OF LABOR
Employment and Training Administration

[TA–W–71,414]
Tata Technologies Incorporated; A Subsidiary of Tata Technologies Limited: Formally Known As Incat: Novi, MI; Amended Certification Regarding Eligibility To Apply for Worker Adjustment Assistance

In accordance with section 223 of the Trade Act of 1974, as amended (“Act”), 19 U.S.C. 2273, the Department of Labor issued a Certification of Eligibility to Apply for Worker Adjustment Assistance on January 21, 2010, applicable to workers of Tata Technologies Incorporated, a subsidiary of TATA Technologies Limited, Novi, Michigan. The notice was published in the Federal Register on March 5th, 2010 (75 FR 10322).

At the request of the State Agency, the Department reviewed the certification for workers of the subject firm. The workers are engaged in activities related to providing engineering design and product lifecycle management.

Information reports that before April 2009, Tata Technologies Incorporated, a subsidiary of Tata Technologies Limited, was formally known as INCAT. Some workers separated from employment at the subject firm had their wages reported under two separate unemployment insurance (UI) tax accounts under the names Tata Technologies Incorporated, a subsidiary of Tata Technologies Limited, formally known as INCAT.

Accordingly, the Department is amending this certification to properly reflect this matter.

The intent of the Department’s certification is to include all workers of the subject firm who were adversely affected by an affiliated vendor acquiring engineering design and product lifecycle management in India.

The amended notice applicable to TA–W–71,414 is hereby issued as follows:

All workers of Tata Technologies Incorporated, a subsidiary of Tata Technologies Limited, formerly known as INCAT, Novi, Michigan, who became totally or partially separated from employment on or after June 25, 2008, through January 21, 2012, and all workers in the group threatened with total or partial separation from employment on date of certification through two years from the date of certification, are eligible to apply for adjustment assistance under Chapter 2 of Title II of the Trade Act of 1974, as amended.

Signed at Washington, DC, this 13th day of April 2010.

Elliott S. Kushner.
Certifying Officer, Division of Trade Adjustment Assistance.

[FR Doc. 2010–9487 Filed 4–22–10; 8:45 am]
BILLING CODE 4510–FN–P

DEPARTMENT OF LABOR
Employment and Training Administration

[TA–W–71,263]

Chrysler Group LLC, Formerly Known as Chrysler LLC; Belvidere Assembly Plant: Including On-Site Leased Workers From Aerotek, G Tech Services, Inc., and Tri-Dim Filer Corp. Belvidere, IL; Amended Certification Regarding Eligibility To Apply for Worker Adjustment Assistance

In accordance with Section 223 of the Trade Act of 1974, as amended (“Act”), 19 U.S.C. 2273, the Department of Labor issued a Certification of Eligibility to Apply for Worker Adjustment Assistance on September 8, 2009, applicable to workers of Chrysler Group LLC, formerly known as Chrysler LLC, Belvidere Assembly Plant, include on-site leased workers from Aerotek and G Tech Services, Inc., Belvidere, Illinois. The notice was published in the Federal Register on November 5, 2009 (74 FR 57337).

At the request of the State Agency, the Department reviewed the certification for workers of the subject firm. The workers are engaged in activities related to the assembly the Dodge Caliber, Jeep Compass and Jeep Patriot.

The company reports that on-site leased workers from TRI–DIM Filer Corp. were employed on-site at the Belvidere, Illinois location of Chrysler Group LLC, formerly known as Chrysler LLC, Belvidere Assembly Plant. The Department has determined that these workers were insufficiently under the control of the subject firm to be considered leased workers.