

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

James E. Rivera,

Associate Administrator for Disaster Assistance.

[FR Doc. 2012-23398 Filed 9-21-12; 8:45 am]

BILLING CODE 8025-01-P

SMALL BUSINESS ADMINISTRATION

[Disaster Declaration #13271 and #13272]

Louisiana Disaster Number LA-00048

AGENCY: U.S. Small Business Administration.

ACTION: Amendment 6.

SUMMARY: This is an amendment of the Presidential declaration of a major disaster for the State of Louisiana (FEMA-4080-DR), dated 08/31/2012.

Incident: Hurricane Isaac.

Incident Period: 08/26/2012 and continuing through 09/10/2012.

DATES: Effective Date: 09/10/2012.
Physical Loan Application Deadline Date: 10/30/2012.

EIDL Loan Application Deadline Date: 05/29/2013.

ADDRESSES: Submit completed loan applications to: U.S. Small Business Administration, Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, TX 76155.

FOR FURTHER INFORMATION CONTACT: A. Escobar, Office of Disaster Assistance, U.S. Small Business Administration, 409 3rd Street SW., Suite 6050, Washington, DC 20416.

SUPPLEMENTARY INFORMATION: The notice of the President's major disaster declaration for the State of Louisiana, dated 08/31/2012 is hereby amended to establish the incident period for this disaster as beginning 08/26/2012 and continuing through 09/10/2012.

All other information in the original declaration remains unchanged.

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

James E. Rivera,

Associate Administrator for Disaster Assistance.

[FR Doc. 2012-23405 Filed 9-21-12; 8:45 am]

BILLING CODE 8025-01-P

SMALL BUSINESS ADMINISTRATION

[Disaster Declaration #13273 and #13274]

Mississippi Disaster Number MS-00059

AGENCY: U.S. Small Business Administration.

ACTION: Amendment 1.

SUMMARY: This is an amendment of the Presidential declaration of a major disaster for the State of Mississippi (FEMA-4081-DR), dated 09/01/2012.

Incident: Hurricane Isaac.

Incident Period: 08/26/2012 and continuing.

DATES: Effective Date: 09/07/2012.

Physical Loan Application Deadline Date: 10/31/2012.

EIDL Loan Application Deadline Date: 05/30/2013.

ADDRESSES: Submit completed loan applications to: U.S. Small Business Administration, Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, TX 76155.

FOR FURTHER INFORMATION CONTACT: A. Escobar, Office of Disaster Assistance, U.S. Small Business Administration, 409 3rd Street SW., Suite 6050, Washington, DC 20416.

SUPPLEMENTARY INFORMATION: The notice of the Presidential disaster declaration for the State of MISSISSIPPI, dated 09/01/2012 is hereby amended to include the following areas as adversely affected by the disaster:

Primary Counties: (Physical Damage and Economic Injury Loans): Adams, Amite, Clarke, Forrest, George, Hinds, Lincoln, Marion, Pike, Stone, Walthall, Warren, Wilkinson.

Contiguous Counties: (Economic Injury Loans Only):

Mississippi: Claiborne, Copiah, Covington, Franklin, Greene, Issaquena, Jasper, Jefferson, Jefferson Davis, Jones, Lauderdale, Lawrence, Madison, Newton, Perry, Rankin, Simpson, Wayne, Yazoo.

Alabama: Choctaw.

Louisiana: Concordia, East Carroll, East Feliciana, Madison, Saint Helena, Tangipahoa, Tensas, West Feliciana.

All other information in the original declaration remains unchanged.

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

James E. Rivera,

Associate Administrator for Disaster Assistance.

[FR Doc. 2012-23408 Filed 9-21-12; 8:45 am]

BILLING CODE 8025-01-P

SMALL BUSINESS ADMINISTRATION

[Disaster Declaration #13271 and #13272]

Louisiana Disaster Number LA-00048

AGENCY: U.S. Small Business Administration.

ACTION: Amendment 5.

SUMMARY: This is an amendment of the Presidential declaration of a major disaster for the State of Louisiana (FEMA-4080-DR), dated 08/31/2012.

Incident: Hurricane Isaac.

Incident Period: 08/26/2012 and continuing.

Effective Date: 09/08/2012.

Physical Loan Application Deadline Date: 10/30/2012.

EIDL Loan Application Deadline Date: 05/29/2013.

ADDRESSES: Submit completed loan applications to: U.S. Small Business Administration, Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, TX 76155.

FOR FURTHER INFORMATION CONTACT: A. Escobar, Office of Disaster Assistance, U.S. Small Business Administration, 409 3rd Street SW., Suite 6050, Washington, DC 20416.

SUPPLEMENTARY INFORMATION: The notice of the Presidential disaster declaration for the State of Louisiana, dated 08/31/2012 is hereby amended to include the following areas as adversely affected by the disaster:

Primary Parishes: (Physical Damage and Economic Injury Loans): Saint Mary, Iberville.

Contiguous Parishes: (Economic Injury Loans Only): Louisiana: Pointe Coupee, West Baton Rouge.

All other information in the original declaration remains unchanged.

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

James E. Rivera,

Associate Administrator for Disaster Assistance.

[FR Doc. 2012-23406 Filed 9-21-12; 8:45 am]

BILLING CODE 8025-01-P

SOCIAL SECURITY ADMINISTRATION

Agency Information Collection Activities: Proposed Request and Comment Request

The Social Security Administration (SSA) publishes a list of information collection packages requiring clearance by the Office of Management and Budget (OMB) in compliance with Public Law 104-13, the Paperwork Reduction Act of 1995, effective October 1, 1995. This notice includes revisions to and one extension of OMB-approved information collections.

SSA is soliciting comments on the accuracy of the agency's burden estimate; the need for the information; its practical utility; ways to enhance its quality, utility, and clarity; and ways to minimize burden on respondents,

including the use of automated collection techniques or other forms of information technology. Mail, email, or fax your comments and recommendations on the information collection(s) to the OMB Desk Officer and SSA Reports Clearance Officer at the following addresses or fax numbers.

(OMB), Office of Management and Budget, Attn: Desk Officer for SSA, Fax: 202-395-6974, Email address: *OIRA_Submission@omb.eop.gov*.

(SSA), Social Security Administration, DCRDP, Attn: Reports Clearance Director, 107 Altmeyer Building, 6401 Security Blvd., Baltimore, MD 21235,

Fax: 410-966-2830, Email address: *OR.Reports.Clearance@ssa.gov*.

I

The information collections below are pending at SSA. SSA will submit them to OMB within 60 days from the date of this notice. To be sure we consider your comments, we must receive them no later than November 23, 2012. Individuals can obtain copies of the collection instruments by writing to the above email address.

1. *Reporting Changes that Affect Your Social Security Payment—20 CFR 404.301-305, 404.310-311, 404.330-.333, 404.335-.341, 404.350-.352, and*

404.468-0960-0073. When Social Security benefits recipients experience a change that could affect their payments, they must report these changes to SSA. Title II beneficiaries in this category use form SSA-1425 to report the relevant information to SSA; the agency then determines if the respondents continue to be entitled to benefits, and if so, the proper amount of these benefits. The respondents are Social Security beneficiaries receiving Title II SSA retirement, disability, or survivor's auxiliary benefits who need to report an event that could affect their payments.

Type of Request: Revision of an OMB-approved information collection.

Modality of completion	Number of responses	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)
SSA-1425	70,000	1	5	5,833

2. *Privacy and Disclosure of Official Records and Information; Availability of Information and Records to the Public—20 CFR 401.40(b)&(c), 401.55(b), 401.100(a), 402.130, 402.185-0960-0566.* SSA has established methods for the public to: (1) Access their SSA records; (2) allow SSA to disclose

records; (3) correct or amend their SSA records; (4) consent to release of their records; (5) request records under the Freedom of Information Act (FOIA); and (6) request SSA waive or reduce fees normally charges for release of FOIA. SSA often collects the necessary information for these requests through a

written letter, with the exception of the consent for release of records, for which there is the Form SSA-3288. The respondents are individuals requesting access to, correction of, or disclosure of SSA records.

Type of Request: Revision of an OMB-approved information collection.

Modality of completion	Number of responses	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)
Access to Records	10,000	1	11	1,833
Designating a Representative for Disclosure of Records	3,000	1	120	6,000
Amendment of Records	100	1	10	17
Consent of Release of Records	3,000,000	1	3	150,000
FOIA Requests for Records	15,000	1	5	1,250
Waiver/Reduction of Fees	400	1	5	33
Totals	3,028,500	.....	.....	159,133

3. *Claimant Statement about Loan of Food or Shelter; Statement about Food or Shelter Provided to Another—20 CFR 416.1130-416.1148-0960-0529.* SSA uses Forms SSA-5062 and SSA-L5063 in the administration of the Supplemental Security Income (SSI) program. SSA bases an SSI claimant or recipient's eligibility on need. We measure need by the amount of income

an individual receives. Income includes other persons providing in-kind support and maintenance in the form of food and shelter to SSI applicants or recipients. SSA uses Forms SSA-5062 and SSA-L5063 to obtain statements about food or shelter provided to SSI claimants or recipients. SSA uses this information to determine whether food or shelters are bona fide loans or income

for SSI purposes. This determination may affect a claimant or recipient's eligibility for SSI and the amount of SSI payments. The respondents are claimants and recipients for SSI payments, and individuals who provide loans of food or shelter to them.

Type of Request: Revision of an OMB-approved information collection.

Modality of completion	Number of responses	Frequency of response	Average burden of response (minutes)	Estimated total annual burden (hours)
SSA-5062 Paper form	34,900	1	10	5,817
SSA-L5063 Paper form	34,900	1	10	5,817
SSA-5062 Modernized SSI Claims System (MSSICS)	34,900	1	10	5,817
SSA-L5063 MSSICS	34,900	1	10	5,817

Modality of completion	Number of responses	Frequency of response	Average burden of response (minutes)	Estimated total annual burden (hours)
Total	139,600	.....	.....	23,268

4. *Site Review Questionnaire for Volume and Fee-for-Service Payees and Beneficiary Interview Form—20 CFR 404.2035, 404.2065, 416.665, 416.701, and 416.708—0960-0633.* SSA asks organizational representative payees to complete Form SSA-637, the Site Review Questionnaire for Volume and Fee-for-Service Payees, to provide information on how they carry out their

responsibilities, including how they manage beneficiary funds. SSA then obtains information from the beneficiaries these organizations represent via Form SSA-639, Beneficiary Interview Form, to corroborate the payees' statements. Due to the sensitivity of the information, SSA employees always complete the forms based on the answers respondents

give during the interview. The respondents are individuals, State and local governments, non-profit and for-profit organizations serving as representative payees, and the beneficiaries they serve.

Type of Request: Revision of an OMB-approved information collection.

Modality of completion	Number of responses	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)
SSA-637	1,999	1	120	3,998
SSA-639	8,293	1	10	1,382
Totals	10,292	.....	.....	5,380

5. *Certification of Prisoner Identity Information—20 CFR 422.107—0960-0688.* Inmates of Federal, State, or local prisons may need a Social Security card as verification of their Social Security number for school or work programs, or as proof of employment eligibility upon release from incarceration. Before SSA can issue a replacement Social Security card, applicants must show SSA proof

of their identity. People who are in prison for an extended period typically do not have current identity documents. Therefore, under formal written agreement with the correctional institution, SSA allows prison officials to verify the identity of certain incarcerated U.S. citizens who need replacement Social Security cards. Information prison officials provide

comes from the official prison files, sent on correctional facility letterhead. SSA uses this information to establish the applicant's identity in the replacement Social Security card process. The respondents are prison officials who certify the identity of prisoners applying for replacement Social Security cards.

Type of Request: Extension of an OMB-approved Information Collection.

Modality of completion	Number of responses	Frequency of Response	Average burden per response (minutes)	Estimated total annual burden (hours)
Certification of Prisoner Identity	1,100	200	3	11,000

II

SSA submitted the information collections below to OMB for clearance. Your comments regarding the information collections would be most useful if OMB and SSA receive them 30 days from the date of this publication. To be sure we consider your comments, we must receive them no later than October 24, 2012. Individuals can obtain copies of the OMB clearance packages by writing to OR.Reports.Clearance@ssa.gov.

1. *Statement of Care and Responsibility for Beneficiary—20 CFR*

404.2020, 404.2025, 408.620, 408.625, 416.620, 416.625—0960-0109. SSA uses the information from Form SSA-788 to verify payee applicants' statements of concern and to identify other potential payees. SSA is concerned with selecting the most qualified representative payee who will use Social Security benefits in the beneficiary's best interest. SSA considers factors such as the payee applicant's capacity to perform payee duties, awareness of the beneficiary's situation and needs, demonstration of past and current concern for the beneficiary's well-being, etc. If the payee applicant does not have custody

of the beneficiary, SSA will obtain information from the custodian for evaluation against information provided by the applicant. Respondents are individuals who have custody of the beneficiary in cases where someone else has filed to be the beneficiary's representative payee.

This is a correction notice: SSA published the incorrect burden information for this collection at 77 FR 47688, on 08/09/12. We are correcting this error here.

Type of Request: Revision of an OMB-approved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)
SSA-788	130,000	1	10	21,667

2. *Function Report Adult—Third Party—20 CFR 404.1512 & 416.912—0960-0635.* Individuals receiving or applying for Social Security Disability Insurance (SSDI) or SSI provide SSA with medical evidence and other proof SSA requires to prove their disability. SSA, and Disability Determination

Services (DDS) on our behalf, collect this information using Form SSA-3380-BK. We use the information to document how claimant's disabilities affect their ability to function, and to determine eligibility for SSI and SSDI claims. The respondents are third parties familiar with the functional

limitations (or lack thereof) of claimants who apply for SSI and SSDI benefits.

Note: This is a correction notice: SSA published the incorrect burden information for this collection at 77 FR 40401, on 7/09/12. We are correcting this error here.

Type of Request: Revision of an OMB approved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)
SSA-338-BK (Individuals)	527,000	1	61	535,783
SSA-338-BK (Private Sector)	527,000	1	61	535,783
Totals	1,054,000	.....	.....	1,071,566

3. *Function Report Adult—20 CFR 404.1512 & 416.912—0960-0681.* Individuals receiving or applying for SSDI or SSI must provide medical evidence and other proof SSA requires to prove their disability. SSA, and DDS

on our behalf, collect the information using Form SSA-3373. We use the information to document how claimants' disabilities affect their ability to function, and to determine eligibility for SSI and SSDI claims. The

respondents are title II and title XVI applicants (or current recipients undergoing redeterminations) for disability payments.

Type of Request: Revision of an OMB-approved information collection.

Modality of completion	Number of responses	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)
SSA-3373	4,221,656	1	61	4,292,017

Dated: September 19, 2012.

Faye Lipsky,
Reports Clearance Director, Social Security Administration.

[FR Doc. 2012-23441 Filed 9-21-12; 8:45 am]

BILLING CODE 4191-02-P

DEPARTMENT OF TRANSPORTATION

Federal Highway Administration

Notice of Final Federal Agency Actions on Proposed Highway in Minnesota

AGENCY: Federal Highway Administration (FHWA), DOT.

ACTION: Notice of statute of limitations on claims for judicial review of actions by FHWA and other federal agencies.

SUMMARY: This notice announces actions taken by the FHWA and other Federal agencies that are final within the meaning of 23 U.S.C. 139(l)(1). The actions relate to a proposed highway project on I-90 over the Mississippi

River. The proposed project includes replacement of the Interstate 90 (I-90) Dresbach Bridge over the Mississippi River with a new bridge that meets structural and geometric standards as well as reconstruction of the I-90/U.S. 61 interchange to improve traffic safety, capacity, and access on and between U.S. 61/14 and I-90. Those actions grant approvals for the project.

DATES: By this notice, the FHWA is advising the public of final agency actions subject to 23 U.S.C. 139(l)(1). A claim seeking judicial review of the Federal agency actions of the proposed highway project will be barred unless the claim is filed within 180 days from the date this notice is published in the **Federal Register**. If the Federal law that authorizes judicial review of a claim provides a time period of less than 180 days for filing such a claim, than that shorter time period still applies.

FOR FURTHER INFORMATION CONTACT: For FHWA: Mr. Philip Forst, Environmental Specialist, Federal Highway

Administration, 380 Jackson Street, Suite 500, Saint Paul, MN 55101, Telephone (651) 291-6100, email: *phil.forst@dot.gov*. The Minnesota Division Office's normal business hours are 8 a.m. to 4 p.m. (Central Time). For the Minnesota Department of Transportation (MnDOT): Mr. Jai Kalsy, PE, Project Manager, District 6, 2900 48th Street NW., Rochester, MN 55901-5848, Telephone: (507) 286-7500, Email: *jai.kalsy@state.mn.us*. The MnDOT District 6 normal business hours are 8 a.m. to 4 p.m. (Central Time).

SUPPLEMENTARY INFORMATION: Notice is hereby given that the FHWA and other Federal agencies have take final agency actions by issuing approvals for the following highway project in Minnesota: I-90 Bridge over the Mississippi River and I-90/U.S. 14/U.S. 61 approach roadway interchange. The project is located in Dresbach Township, Winona County, Minnesota, and Campbell Township, La Crosse County,