

comprised of 16 members from drinking water industries, stakeholder organizations, State and local officials, public health officials, environmental organizations, and risk communication experts.

Public Comment: An opportunity for public comment will be provided during the WGPE meeting. Oral statements will be limited to five minutes; it is preferred that only one person present the statement on behalf of a group or organization. Written comments may be provided at the meeting or may be sent by mail to Elizabeth McDermott, Designated Federal Officer for the WGPE, at the mail or e-mail address listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice.

Special Accommodations: Any person needing special accommodations at this meeting, including wheelchair access, should contact Elizabeth McDermott, Designated Federal Officer for the WGPE, at the number or e-mail address listed in the **FOR FURTHER INFORMATION CONTACT** section of this notice. Requests for special accommodations should be made at least five business days in advance of the WGPE meeting.

Dated: January 10, 2006.

Cynthia C. Dougherty,

Director, Office of Ground Water and Drinking Water.

[FR Doc. E6-327 Filed 1-12-06; 8:45 am]

BILLING CODE 6560-50-P

ENVIRONMENTAL PROTECTION AGENCY

[FRL-8021-5]

Meeting of the Ozone Transport Commission

AGENCY: Environmental Protection Agency (EPA).

ACTION: Notice of meeting; correction.

SUMMARY: EPA published a document in the **Federal Register** on December 30,

2005 which announced an upcoming meeting of the Ozone Transport Commission (OTC) in Washington, DC. The document contained incorrect meeting dates.

FOR FURTHER INFORMATION CONTACT:

Marcia L. Spink, Associate Director, Air Protection Division, U.S. Environmental Protection Agency, Region III, 1650 Arch Street, Philadelphia, PA 19103; (215) 814-2100. For documents and press inquiries contact: Ozone Transport Commission, 444 North Capitol Street NW., Suite 638, Washington, DC 20001; (202) 508-3840; e-mail: ozone@otcair.org; Web site: <http://www.otcair.org>.

Corrections

In the **Federal Register** of December 30, 2005, in FR Document No. E5-8127:

1. On page 77381, in the third column, correct the **DATES** caption to read:

DATES: The meeting will be held on February 22, 2006 starting at 1 p.m. and February 23, 2006 at 9 a.m.

2. On page 77382, in the first column, first paragraph, correct the third sentence to read:

"The purpose of this notice is to announce that the OTC will meet on February 22-23, 2006 at the address noted earlier in this notice."

Dated: January 6, 2006.

Donald S. Welsh,

Regional Administrator, Region III.

[FR Doc. E6-320 Filed 1-12-06; 8:45 am]

BILLING CODE 6560-50-P

EXPORT-IMPORT BANK

[Public Notice 77]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Export-Import Bank of the U.S.

ACTION: Notice and request for comments.

SUMMARY: The Export-Import Bank, as a part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal Agencies to comment on the proposed information collection, as required by the Paperwork Reduction Act of 1995. The form will be used by customers who originally applied for a multibuyer policy using EIB 92-50. Our customers will be able to submit this form on paper or electronically.

DATES: Written comments should be received on or before March 14, 2006 to be assured of consideration.

ADDRESSES: Direct all comments and requests for additional information to Walter Kosciow, Export-Import Bank of the U.S., 811 Vermont Avenue, NW., Washington, DC 20571, (202) 565-3649.

SUPPLEMENTARY INFORMATION:

Title and Form Number: Application for Special Buyer Credit Limit (SBCL) Under Multi-Buyer Export Credit Insurance Policies, EIB 92-51.

OMB Number: None.

Type of Review: Regular.

Need and Use: The information requested enables the applicant to provide Ex-Im Bank with the information necessary to obtain legislatively required assurance of repayment and fulfills other statutory requirements.

Affected Public: The form affects entities involved in the export of U.S. goods and Services.

Estimated Annual Respondents: 3,900.

Estimated Time Per Respondent: 1/2 hour.

Estimated Annual Burden: 1,950.

Frequency of Reporting or Use: 2-3 times per year.

Dated: January 9, 2006.

Solomon Bush,

Agency Clearance Officer.

BILLING CODE 6690-01-M

**EXPORT IMPORT BANK OF THE UNITED STATES
APPLICATION FOR SPECIAL BUYER CREDIT LIMIT (SBCL)
UNDER MULTI-BUYER EXPORT CREDIT INSURANCE POLICIES**

App. No. _____
(Ex-Im Bank Use Only)

(Please Print or Type)

1. Insured/ Exporter Name:		2. Broker (If none, state "None")	
Policy No.:	State:	Brokerage:	Broker No.:
Attn.:	Tel No.:	Attn.:	Tel No.:
Fax No.:	E-Mail:	Fax No.:	E-Mail:

3. Buyer Name: _____ **File No.** _____
Address: _____ (Ex-Im Bank Use Only)
City, Country: _____

4. Guarantor Name (if any): _____ **File No.** _____
Address: _____ (Ex-Im Bank Use Only)
City, Country: _____

5. (a) Products ☐ New ☐ Used

(b) Products Description _____

(c) Is each product produced or manufactured in the United States? ☐ Yes ☐ No

(d) Has at least one-half of the value, exclusive of price mark-up, been added by labor or material exclusively of U. S. origin?
☐ Yes ☐ No

(e) Are products listed on the United States Munitions List? (part 121 of Title 22 of the Code of Federal Regulations) ☐ Yes ☐ No

6.(a) Credit Limit Requested \$ _____
(b) Value of orders received \$ _____
(c) Down-payment, if any \$ _____
(d) Requested SBCL effective date / / (mm/dd/yyyy)

(e) Payment terms requested	(Up to - number of days)					Please check applicable box		
Payment Type	Sight	30	60	90	120	180	270	360
Cash Against Documents (CAD)	<input type="checkbox"/>							
Sight Draft Documents Against Payment (SDDP)	<input type="checkbox"/>							
Unconfirmed Irrevocable Letter of Credit (UILC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open Account		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sight Draft Documents Against Acceptance (SDDA)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promissory Note		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7.(a) Your credit experience with this buyer: If none ____ (Check here for "new buyer")

Year of first sale to buyer Year 20____

Year of first credit sale (exclude cash and confirmed L/Cs) Year 20____

Total export credit sales to buyer for the last three (3) years \$ _____

Highest amount outstanding at any time over last twelve months \$ _____

Payment terms extended	(Up to - number of days) Please check applicable boxes							
	Sight	30	60	90	120	180	270	360
Cash Against Documents (CAD)	<input type="checkbox"/>							
Sight Draft Documents Against Payment (SDDP)	<input type="checkbox"/>							
Unconfirmed Irrevocable Letter of Credit (UILC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open Account		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sight Draft Documents Against Acceptance (SDDA)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promissory Note		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(b) Describe buyer's payment history (check one)

☐ No Prior Experience ☐ Prompt/Discount ☐ 1-30 Days Slow ☐ 31-60 Days Slow ☐ more than 60 days slow

(c) Amount now owing \$ _____, as of _____ (Date).

(d) Amount now more than 60 days past due \$ _____ (indicate maturity dates and explanation in an attachment).

(e) Has buyer offered any credit enhancement (security)? ☐ YES ☐ NO If yes, describe:

8. Describe any direct or indirect ownership interest or family relationship which exists between the insured and the buyer/guarantor or between the supplier and the buyer (or guarantor). If none, state "None". _____

9. Are there any extraordinary terms or conditions of sale: ☐ Yes ☐ No. If "Yes," please attach an explanation.

10. CREDIT AND FINANCIAL INFORMATION REQUIREMENTS* for Credit Limit Applications of:

Up to \$100,000: Credit Agency Report, or a Trade Reference

\$100,001- \$300,000: Credit Agency Report and a Trade Reference

(The Buyer's audited or signed unaudited financial statements for the last 2 years may be substituted for the trade reference).

\$300,001 to \$1 million: Credit Agency Report and a Trade Reference and the Buyer's audited or signed unaudited financial statements for the last 2 fiscal years with notes.

over \$1 million: Credit Agency Report and 2 Trade References and a Bank Reference and the Buyer's audited or signed unaudited financial statements for the last 3 fiscal years with notes.

* The applicant's credit experience with the Buyer as completed in question 7 may be substituted for a Trade Reference.

If fiscal year end statements are dated more than 9 months from the date of application, the Buyer's interim statements must be submitted.

If the Buyer has a Market Rating you may submit the rating, below, in place of the Credit and Financial Information.

If a Financial Institution (Bank) is the Buyer or Guarantor or if a letter of credit is used no Credit and Financial Information is necessary.

Market Rating: _____ Source: _____ Rating Date: _____

NOTE: See Short Term Credit Standards (EIB99-09) for Buyers to determine the likelihood of approval. All references and credit reports must be dated within 6 months of the application and show prompt credit experience for similar amounts and similar terms

11. CERTIFICATION OF PRODUCT USE AND REPRESENTATIONS:

(a) The applicant hereby certifies to the Export-Import Bank of the United States that, to the best of its knowledge and belief, the products* and services to be exported in the transaction described herein are principally for use as indicated below. (When a sale is made to entities such as distributors primarily for resale, the principal user is considered to be the original purchaser (the distributor), and part A should be checked. If, however, the applicant has knowledge or reason to believe that the products will be re-exported from the original buyer's country, please check part B.)

A ☐ By the buyer in the country specified above.

B ☐ If not, name the country where the product will be principally used _____

and by whom _____

- NOTE: The Borrower, Guarantor, Buyer and End User must be foreign entities in countries for which Ex-Im is able to provide support, see Ex-Im's Country Limitation Schedule (CLS) at www.exim.gov. There may not be trade measures against them under section 201 of the Trade Act of 1974, see www.usitc.gov/trade_remedy/731_ad_701_cvd/investigations/completed/index.htm#safeguard click on 201. There may not be trade sanctions in force against them. For a list of products and Anti-Dumping or Countervailing Duty sanctions see: www.usitc.gov/trade_remedy/731_ad_701_cvd/investigations/antidump_countervailing/index.htm

(b) The applicant certifies that the representations made and the facts stated by it in the application for the special buyer credit limit are true, to the best of its knowledge and belief, and that it has not omitted any material facts. The applicant agrees that the representations and facts shall form the basis of the credit limit if issued and that the truth of such representations and facts contained herein shall be a condition precedent to any liability of Ex-Im thereunder. The applicant understands that this certification is subject to penalties for fraud provided in Article 18, United States Code, Section 1001.

By _____

Signature of Insured/Exporter

Print Name and Title

Date

Note: Please answer all questions and sign application. Applications not completely filled out or not submitted with required financial and credit information will be withdrawn.

Send, or ask your insurance broker to review and send, this application to

Ex-Im Bank, 811 Vermont Avenue, NW, Washington, D.C. 20571.

The Ex-Im Bank website is <<http://www.exim.gov>>

EIB92-51 (01/06)