

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

**Herbert L. Mitchell,**

*Associate Administrator for Disaster Assistance.*

[FR Doc. E7-8831 Filed 5-8-07; 8:45 am]

**BILLING CODE 8025-01-P**

## SMALL BUSINESS ADMINISTRATION

[Disaster Declaration # 10862 and # 10863]

### Texas Disaster # TX-00251

**AGENCY:** U.S. Small Business Administration.

**ACTION:** Notice.

**SUMMARY:** This is a Notice of the Presidential declaration of a major disaster for the State of Texas (FEMA-1697-DR), dated 05/01/2007.

*Incident:* Severe Storms and Tornadoes.

*Incident Period:* 04/21/2007 through 04/24/2007.

*Effective Date:* 05/01/2007.

*Physical Loan Application Deadline Date:* 07/02/2007.

*Economic Injury (EIDL) Loan Application Deadline Date:* 02/01/2008.

**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:** Notice is hereby given that as a result of the President's major disaster declaration on 05/01/2007, applications for disaster loans may be filed at the address listed above or other locally announced locations.

*The following areas have been determined to be adversely affected by the disaster:*

Primary Counties (Physical Damage and Economic Injury Loans):

Maverick, Moore, Swisher.

Contiguous Counties (Economic Injury Loans Only):

Texas, Armstrong, Briscoe, Carson, Castro, Dallam, Dimmit, Floyd, Hale, Hansford, Hartley, Hutchinson, Kinney, Oldham, Potter, Randal, Sherman, Uvalde, Webb, Zavala.

*The Interest Rates are:*

	Percent
For Physical Damage:	
Homeowners With Credit Available Elsewhere .....	5.750

	Percent
Homeowners Without Credit Available Elsewhere .....	2.875
Businesses With Credit Available Elsewhere .....	8.000
Other (Including Non-Profit Organizations) With Credit Available Elsewhere .....	5.250
Businesses And Non-Profit Organizations Without Credit Available Elsewhere	4.000
For Economic Injury:	
Businesses & Small Agricultural Cooperatives Without Credit Available Elsewhere	4.000

The number assigned to this disaster for physical damage is 10862C and for economic injury is 108630.

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

**Herbert L. Mitchell,**

*Associate Administrator for Disaster Assistance.*

[FR Doc. E7-8829 Filed 5-8-07; 8:45 am]

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## SMALL BUSINESS ADMINISTRATION

[Disaster Declaration # 10860 and # 10861]

### Vermont Disaster # VT-00002

**AGENCY:** U.S. Small Business Administration.

**ACTION:** Notice.

**SUMMARY:** This is a notice of an Administrative declaration of a disaster for the State of Vermont dated 05/01/2007.

*Incident:* Severe Storms and Flooding.  
*Incident Period:* 04/15/2007 through 04/16/2007.

*Effective Date:* 05/01/2007.

*Physical Loan Application Deadline Date:* 07/02/2007.

*Economic Injury (EIDL) Loan Application Deadline Date:* 02/01/2008

**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:** Notice is hereby given that as a result of the Administrator's disaster declaration, applications for disaster loans may be filed at the address listed above or other locally announced locations.

*The following areas have been determined to be adversely affected by the disaster:*

Primary Counties:

Rutland.

Contiguous Counties:

Vermont, Addison, Bennington,

Windsor. New York, Washington.

*The Interest Rates are:*

	Percent
Homeowners With Credit Available Elsewhere .....	5.750
Homeowners Without Credit Available Elsewhere .....	2.875
Businesses With Credit Available Elsewhere .....	8.000
Businesses & Small Agricultural Cooperatives Without Credit Available Elsewhere .....	4.000
Other (Including Non-Profit Organizations) With Credit Available Elsewhere .....	5.250
Businesses And Non-Profit Organizations Without Credit Available Elsewhere .....	4.000

The number assigned to this disaster for physical damage is 10860 B and for economic injury is 10861 0. The States which received an EIDL Declaration # are Vermont and New York.

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

Dated: May 1, 2007.

**Steven C. Preston,**

*Administrator.*

[FR Doc. E7-8830 Filed 5-8-07; 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 that will require clearance by the Office of Management and Budget (OMB) in compliance with Pub. L. 104-13, the Paperwork Reduction Act of 1995, effective October 1, 1995. The information collection packages that may be included in this notice are for new information collections, approval of existing information collections, revisions to OMB-approved information collections, and extensions (no change) 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 on ways to minimize burden on respondents, including the use of automated collection techniques or other forms of information technology. Written comments and recommendations

regarding the information collection(s) should be submitted to the OMB Desk Officer and the SSA Reports Clearance Officer. The information can be mailed, faxed or e-mailed to the individuals at the addresses and fax numbers listed below:

(OMB), Office of Management and Budget, Attn: Desk Officer for SSA, Fax: 202-395-6974. E-mail address:

*OIRA\_Submission@omb.eop.gov.*

(SSA), Social Security Administration, DCBPM, Attn: Reports Clearance Officer, 1333 Annex Building, 6401 Security Blvd., Baltimore, MD 21235, Fax: 410-965-6400. E-mail address: *OPLM.RCO@ssa.gov.*

I. The information collections listed below are pending at SSA and will be submitted to OMB within 60 days from the date of this notice. Therefore, your comments should be submitted to SSA within 60 days from the date of this publication. You can obtain copies of the collection instruments by calling the SSA Reports Clearance Officer at 410-965-0454 or by writing to the address listed above.

1. *Representative Payee Evaluation Report—20 CFR 404.2065 & 416.665—0960-0069.* Sections 205(j) and 1631(a)(2) of the Social Security Act provide that a representative payee may be appointed to receive benefits on behalf of an individual entitled to Title II and/or Title XVI benefits when that individual is unable to manage or direct the management of those funds by themselves. The representative payee is required to report to SSA at least once per year on how those funds received have been used or conserved. When a representative payee fails to adequately report to SSA as required, SSA will conduct a face-to-face interview with the payee to complete an SSA-624, Representative Payee Evaluation Report, in order to determine the continued

suitability of the representative payee to serve as a payee. The respondents are individuals and organizations who act as representative payees for Title II and Title XVI benefits who fail to comply with SSA's statutory annual reporting requirement.

*Type of Request:* Extension of an OMB-approved information collection.  
*Number of Respondents:* 252,000.  
*Frequency of Response:* 1.  
*Average Burden per Response:* 30 minutes.

*Estimated Annual Burden:* 126,000 hours.

2. *Request for Change in Time/Place of Disability Hearing—20 CFR 404.914(c)(2) and 416.1414(c)(2)—0960-0348.* The information on Form SSA-769 is used by SSA and the State Disability Determination Services (DDS) to provide claimants with a structured format to exercise their right to request a change in time or place of a scheduled disability hearing. The information will be used as a basis for granting or denying requests for changes and for rescheduling disability hearings. Respondents are claimants who wish to request a change in the time and/or place of their hearing.

*Type of Request:* Extension of an OMB-approved information collection.  
*Number of Respondents:* 7,483.  
*Frequency of Response:* 1.  
*Average Burden Per Response:* 8 minutes.

*Estimated Annual Burden:* 998 hours.

3. *Agency/Employer Government Pension Offset Questionnaire—20 CFR 404.408(a)—0960-0470.* The information collected by form SSA-4163 will provide SSA with accurate information from the agency paying the pension, for purposes of applying the pension-offset provision. The form will be used only when (1) the claimant does not have the information and (2) the pension-paying agency has not cooperated with the claimant. Respondents are Federal and State

Government agencies which have information needed by SSA to determine if the GPO applies and the amount of offset.

*Type of Request:* Extension of an OMB-approved information collection.  
*Number of Respondents:* 1000.  
*Frequency of Response:* 1.  
*Average Burden Per Response:* 3 minutes.

*Estimated Annual Burden:* 50 hours.

4. *Child Care Dropout Questionnaire—20 CFR 404.211(e)(4)—0960-0474.* Information collected on this form is used by SSA to determine if an individual qualifies for a child care exclusion in computing the individual's disability benefit amount. Respondents are applicants for disability benefits.

*Type of Request:* Extension of an OMB-approved information collection.  
*Number of Respondents:* 2000.  
*Frequency of Response:* 1.  
*Average Burden Per Response:* 5 minutes.

*Estimated Annual Burden:* 167 hours.

5. *Statement for Determining Continuing Eligibility for Supplemental Security Income Payments—Adult, Form SSA-3988; Statement for Determining Continuing Eligibility for Supplemental Security Income Payments—Child, Form SSA-3989—20 CFR Subpart B—416.204—0960-0643.*

Forms SSA-3988 and SSA-3989 will be used to determine whether SSI recipients have met and continue to meet all statutory and regulatory non-medical requirements for Supplemental Security Income eligibility, and whether they have been and are still receiving the correct payment amount. The SSA-3988 and SSA-3989 are designed as self-help forms that will be mailed to recipients or to their representative payees for completion and return to SSA. The respondents are recipients of SSI payments or their representatives.

*Type of Request:* Revisions to an existing OMB information collection.

Collection instrument	Respondents	Frequency of response	Average burden per response	Estimated annual burden (hours)
SSA-3988 .....	30,000	1	26 min.	13,000
SSA-3989 .....	30,000	1	26 min.	13,000
Totals .....	60,000	.....	.....	26,000

II. The information collections listed below have been submitted to OMB for clearance. Your comments on the information collections would be most useful if received by OMB and SSA within 30 days from the date of this publication. You can obtain a copy of the OMB clearance packages by calling

the SSA Reports Clearance Officer at 410-965-0454, or by writing to the address listed above.

1. *Treating Physician Consultative Examination Interest Form—20 CFR 404.1519g-i—0960-NEW.* The individual's treating physician (TP) is the preferred source to perform a

consultative examination (CE). SSA uses the SSA-84 to ascertain whether the TP is interested in performing the CE. This form is sent to the claimant's treating physician along with the medical evidence of record request letter. If the treating physician is interested in performing the CE, he or she indicates

interest by completing the SSA-84 and returning it to SSA. If the form is not returned, SSA assumes that the TP is not interested in performing the CE. Respondents are the claimants' treating physicians.

*Type of Request:* Collection in Use Without an OMB Number.

*Number of Respondents:* 168.

*Frequency of Response:* 1.

*Average Burden Per Response:* 5 minutes.

*Estimated Annual Burden:* 14 hours.

2. *Application for Child's Insurance Benefits—20 CFR 404.350–404.368, 404.603, & 416.350–0960-0010.* SSA uses the information collected by the SSA-4-BK to entitle children of living and deceased workers to monthly Social Security payments. Respondents are

guardians completing the form on behalf of the children of living or deceased workers, or the children of living or deceased workers.

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

*Number of Respondents:* 1,740,000.

*Estimated Annual Burden:* 344,141 hours.

Type of request	Number of respondents	Frequency per response	Average burden per response (minutes)	Estimated annual burden
Life Claims .....	46,250	1	10	7,708
Life Claims—MCS .....	439,375	1	10	73,229
Life Claims—Signature Proxy .....	439,375	1	9	65,906
Death Claims .....	40,750	1	15	10,188
Death Claims—MCS .....	387,125	1	15	96,781
Death Claims—Signature Proxy .....	387,125	1	14	90,329
Totals .....	1,740,000	.....	.....	344,141

3. *Work History Report—20 CFR 404.1512 and 416.912—0960-0578.* The information collected by form SSA-3369 is needed to determine disability by the State DDS. The information will be used to document an individual's past work history. The respondents are applicants for SSI disability payments and Social Security disability benefits.

*Type of Request:* Extension of an OMB-approved information collection.

*Number of Respondents:* 1,000,000.

*Frequency of Response:* 1.

*Average Burden Per Response:* 30 minutes.

*Estimated Annual Burden:* 500,000 hours.

4. *Beneficiary Interview and Auditor's Observations Form—0960-0630.* The information collected through the

Beneficiary Interview and Auditor's Observation Form, SSA-322, will be used by SSA's Office of the Inspector General to interview beneficiaries and/or their payees to determine whether representative payees are complying with their duties and responsibilities under SSA's regulations at 20 CFR 404.2035 and 416.635. Respondents to this collection will be randomly selected SSI recipients and Social Security beneficiaries who have representative payees.

*Type of Request:* Extension of an OMB-approved information collection.

*Number of Respondents:* 2,550.

*Frequency of Response:* 1.

*Average Burden Per Response:* 15 minutes.

*Estimated Annual Burden:* 638 hours.

5. *Report to U.S. SSA by Person Receiving Benefits for a Child or Adult Unable to Handle Funds; Report to U.S. SSA—0960-0049.* SSA needs the information on Form SSA-7161-OCR-SM to monitor the performance of representative payees outside the U.S. and the information on Form SSA-7162-OCR-SM to determine continuing entitlement to Social Security benefits and correct benefit amounts for beneficiaries outside the U.S. The respondents are individuals outside the U.S. who are receiving benefits either for someone else, or on their own behalf, under title II of the Social Security Act.

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

Form No.	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated annual burden (hours)
SSA-7161-OCR-SM .....	30,000	1	15	7,500
SSA-7162-OCR-SM .....	236,500	1	5	19,708
Totals .....	257,000	.....	.....	27,208

6. *Real Property Current Market Value Estimate—0960-0471.* The SSA-L2794 is used to obtain current market value estimates of real property owned by applicants for, or recipients of, SSI payments (or a person whose resources are deemed to such an individual). The value of an individual's resources, including non-home real property is one of the eligibility requirements for SSI payments. The respondents are individuals with knowledge of local real property values.

*Type of Request:* Extension of an OMB-approved information collection.

*Number of Respondents:* 5,438.

*Frequency of Response:* 1.

*Average Burden Per Response:* 20 minutes.

*Estimated Annual Burden:* 1,813 hours.

7. *Requests for Self-Employment Information, Employee Information, Employer Information—20 CFR 422.120—0960-0508.* SSA uses forms SSA-L2765, SSA-L3365 and SSA-

L4002 to request correct information when an employer, employee or self-employed person reports an individual's earnings without a Social Security Number (SSN) or with an incorrect name or SSN. The respondents are employers, employees or self-employed individuals who are requested to furnish additional identifying information.

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

Form No.	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated annual burden (hours)
SSA-L2765 .....	15,400	1	10	2,567
SSA-L3365 .....	173,100	1	10	28,850
SSA-L4002 .....	656,000	1	10	109,333
Total .....	844,500	.....	.....	140,750

8. *Questionnaire for Children Claiming SSI Benefits—0960-0499.* The information collected on form SSA-3881-BK is used by SSA to evaluate disability in children who are appealing an unfavorable disability decision or whose continuing disability is being reviewed. The form requests the names and addresses of non-medical sources such as schools, counselors, agencies, organizations or therapists who would have information about a child's functioning. The respondents are children or their representatives who are appealing an unfavorable decision on their claim or whose continuing disability is being reviewed.

*Type of Request:* Extension of OMB-approved collection.

*Number of Respondents:* 253,000.

*Frequency of Response:* 1.

*Average Burden Per Response:* 30 minutes.

*Estimated Annual Burden:* 126,500 hours.

Dated: May 2, 2007.

**Elizabeth A. Davidson,**

*Reports Clearance Officer, Social Security Administration.*

[FR Doc. E7-8804 Filed 5-8-07; 8:45 am]

**BILLING CODE 4191-02-P**

## DEPARTMENT OF TRANSPORTATION

### Federal Aviation Administration

#### Notice of Intent To Rule on Request To Release Airport Property at the Rockwood Municipal Airport, Rockwood, TN

**AGENCY:** Federal Aviation Administration (FAA), DOT.

**ACTION:** Request for public comment.

**SUMMARY:** The Federal Aviation Administration is requesting public comment on the release of land at the Rockwood Municipal Airport in the City of Rockwood, Tennessee. This property, approximately 25 acres, will change to a non-aeronautical use. This action is taken under the provisions of Section 125 of the Wendell H. Ford Aviation Investment Reform Act for the 21st Century (AIR 21).

**DATES:** Comments must be received on or before June 8, 2007.

**ADDRESSES:** Documents are available for review at the Tennessee Department of Transportation, Division of Aeronautics, 424 Knapp Blvd, Bldg 4219, Nashville, TN 37217 and the FAA Airports District Office, 2862 Business Park Drive, Building G, Memphis, TN 38118. Written comments on the Sponsor's request must be delivered or mailed to: Mr. Phillip J. Braden, Manager, Memphis Airports District Office, 2862 Business Park Drive, Building G, Memphis, TN 38118.

In addition, a copy of any comments submitted to the FAA must be mailed or delivered to Mr. Bob Woods, Director, TDOT, Division of Aeronautics, P.O. Box 17326, Nashville, TN 37217.

**FOR FURTHER INFORMATION CONTACT:** Mr. Michael Thompson, Program Manager, Federal Aviation Administration, Memphis Airports District Office, 2862 Business Park Drive, Building G, Memphis, TN 38118. The application may be reviewed in person at this same location, by appointment.

**SUPPLEMENTARY INFORMATION:** The FAA proposes to rule and invites public comment on the request to release property at the Rockwood Municipal Airport, Rockwood, TN. Under the provisions of AIR 21 (49 U.S.C. 47107(h)(2)).

On April 27, 2007, the FAA determined that the request to release property at the Rockwood Municipal Airport submitted by the airport owner meets the procedural requirements of the Federal Aviation Administration. The FAA may approve the request, in whole or in part, no later than June 8, 2007.

The following is a brief overview of the request:

The City of Rockwood, Tennessee, owner of the Rockwood Municipal Airport, is proposing the release of approximately 25 acres of airport property so the property can be converted to use for industrial development.

Any person may inspect, by appointment, the request in person at the FAA office listed above under **FOR FURTHER INFORMATION CONTACT.**

In addition, any person may, upon appointment and request, inspect the request, notice and other documents germane to the request in person at the

Tennessee Department of Transportation, Division of Aeronautics.

Issued in Memphis, TN on April 27, 2007.

**Phillip J. Braden,**

*Manager, Memphis Airports District Office, Southern Region.*

[FR Doc. 07-2272 Filed 5-8-07; 8:45 am]

**BILLING CODE 4910-13-M**

## DEPARTMENT OF TRANSPORTATION

### Federal Aviation Administration

#### Notice of Meetings of the National Parks Overflights Advisory Group Aviation Rulemaking Committee and the Grand Canyon Working Group

**ACTION:** Notice of meetings.

**SUMMARY:** The Federal Aviation Administration (FAA) and the National Park Service (NPS), in accordance with the National Parks Air Tour Management Act of 2000, announce the next meeting of the National Parks Overflights Advisory Group (NPOAG) Aviation Rulemaking Committee (ARC). In addition, the FAA and NPS are announcing the next meeting of the Grand Canyon Working Group (GCWG). The GCWG is a self-contained group within the NPOAG. This notification provides the dates, location, and agendas for the meetings.

**DATES AND LOCATION:** The GCWG meetings will take place on June 12 and June 13, 2007. The NPOAG ARC will meet on June 14 and 15, 2007. The meetings will take place in the Arizona/Barcelona Rooms at the Chaparral Suites Resort, 5001 N. Scottsdale Road, Scottsdale, Arizona 85250, phone number (480) 949-1414. The meetings will begin at 8:30 a.m. each day. Members of either group (NPOAG/GCWG) as well as the public can attend both meetings.

**FOR FURTHER INFORMATION CONTACT:** For the NPOAG meeting contact Barry Brayer, AWP-1SP, Special Programs, Federal Aviation Administration, Western-Pacific Region Headquarters, P.O. Box 92007, Los Angeles, CA 90009-2007, telephone: (310) 725-3800, e-mail: [Barry.Brayer@faa.gov](mailto:Barry.Brayer@faa.gov), or Karen Trevino, National Park Service, Natural