

| | Percent |
|---|---------|
| Businesses Without Credit Available Elsewhere | 4.000 |
| Non-Profit Organizations With Credit Available Elsewhere ... | 2.625 |
| Non-Profit Organizations Without Credit Available Elsewhere | 2.625 |
| <i>For Economic Injury:</i> | |
| Businesses & Small Agricultural Cooperatives Without Credit Available Elsewhere | 4.000 |
| Non-Profit Organizations Without Credit Available Elsewhere | 2.625 |

The number assigned to this disaster for physical damage is 14756 5 and for economic injury is 14757 0.

The States which received an EIDL Declaration # are: Connecticut, Massachusetts.

(Catalog of Federal Domestic Assistance Number 59008)

Dated: July 8, 2016.

Maria Contreras-Sweet,
Administrator.

[FR Doc. 2016-16818 Filed 7-15-16; 8:45 am]

BILLING CODE 8025-01-P

SMALL BUSINESS ADMINISTRATION
[Disaster Declaration # 14763 and # 14764]

Oklahoma Disaster # OK-00104

AGENCY: U.S. Small Business Administration.

ACTION: Notice

SUMMARY: This is a notice of an Administrative declaration of a disaster for the State of Oklahoma dated 07/08/2016

Incident: Severe storms, tornadoes, straight-line winds and flooding

Incident Period: 06/11/2016 Through 06/19/2016

Effective Date: 07/08/2016

Physical Loan Application Deadline Date: 09/06/2016

Economic Injury (EIDL) Loan Application Deadline Date: 04/10/2017

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: Comanche
Contiguous Counties:
Oklahoma: Caddo, Cotton, Grady, Kiowa, Stephens, Tillman
The Interest Rates are:

| | Percent |
|---|---------|
| <i>For Physical Damage:</i> | |
| Homeowners With Credit Available Elsewhere | 3.250 |
| Homeowners Without Credit Available Elsewhere | 1.625 |
| Businesses With Credit Available Elsewhere | 6.250 |
| Businesses Without Credit Available Elsewhere | 4.000 |
| Non-Profit Organizations With Credit Available Elsewhere | 2.625 |
| Non-Profit Organizations Without Credit Available Elsewhere | 2.625 |
| <i>For Economic Injury:</i> | |
| Businesses & Small Agricultural Cooperatives Without Credit Available Elsewhere | 4.000 |
| Non-Profit Organizations Without Credit Available Elsewhere | 2.625 |

The number assigned to this disaster for physical damage is 14763 B and for economic injury is 14764 0.

The State which received an EIDL Declaration # is Oklahoma

(Catalog of Federal Domestic Assistance Number 59008)

Dated: July 8, 2016.

Maria Contreras-Sweet,
Administrator.

[FR Doc. 2016-16825 Filed 7-15-16; 8:45 am]

BILLING CODE 8025-01-P

SMALL BUSINESS ADMINISTRATION
[Disaster Declaration #14765 and #14766]

TEXAS Disaster #TX-00474

AGENCY: U.S. Small Business Administration.

ACTION: Notice.

SUMMARY: This is a Notice of the Presidential declaration of a major disaster for Public Assistance Only for the State of Texas (FEMA-4272-DR), dated 07/08/2016.

Incident: Severe Storms and Flooding.
Incident Period: 05/26/2016 through 06/24/2016.

Effective Date: 07/08/2016.

Physical Loan Application Deadline Date: 09/06/2016.

Economic Injury (EIDL) Loan Application Deadline Date: 04/10/2017.

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 07/08/2016, Private Non-Profit organizations that provide essential services of governmental nature may file disaster loan applications 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: Bandera, Bastrop, Brown, Caldwell, Eastland, Fayette, Fort Bend, Grimes, Hood, Houston, Jasper, Kleberg, Polk, San Jacinto, Washington.

The Interest Rates are:

| | Percent |
|---|---------|
| <i>For Physical Damage:</i> | |
| Non-profit organizations with credit available elsewhere | 2.625 |
| Non-profit organizations without credit available elsewhere | 2.625 |
| <i>For Economic Injury:</i> | |
| Non-profit organizations without credit available elsewhere | 2.625 |

The number assigned to this disaster for physical damage is 147656 and for economic injury is 147666.

(Catalog of Federal Domestic Assistance Number 59008)

Lisa Lopez-Suarez,

Acting Associate Administrator for Disaster Assistance.

[FR Doc. 2016-16826 Filed 7-15-16; 8:45 am]

BILLING CODE 8025-01-P

SOCIAL SECURITY ADMINISTRATION

[Docket No: SSA-2016-0032]

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 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, OLCA, Attn: Reports Clearance Director, 3100 West High Rise, 6401 Security Blvd., Baltimore, MD 21235, Fax: 410-966-2830, Email address: OR.Reports.Clearance@ssa.gov Or you may submit your comments online through www.regulations.gov,

referencing Docket ID Number [SSA-2016-0032].
 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 September 16, 2016. Individuals can obtain copies of the collection instruments by writing to the above email address.
 1. *Certificate of Coverage Request—20 CFR 404.1913—0960—0554.* The United States holds agreements with 27 foreign countries to eliminate double Social Security coverage and taxation where, except for the provisions of the agreement, a worker would be subject to coverage and taxes in both countries. These agreements contain rules for determining the country under whose laws the worker's period of employment is covered, and to which country the worker will pay taxes. The agreements

further dictate that, upon the request of the worker or employer, the country under whose system the period of work is covered will issue a certificate of coverage. The certificate serves as proof of exemption from coverage and taxation under the system of the other country. The information we collect assists us in determining a worker's coverage and in issuing a U.S. certificate of coverage as appropriate. Per our agreements, we ask a set number of questions to the workers and employers prior to issuing a certificate of coverage; however, our agreements with Denmark, Netherlands, Norway, and Sweden require us to ask more questions in those countries. Respondents are workers and employers wishing to establish exemption from foreign Social Security taxes.
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) |
|---|-----------------------|-----------------------|---------------------------------------|---------------------------------------|
| Requests via Letter—Individuals (minus Denmark, Netherlands, Norway, Poland & Sweden) | 6,272 | 1 | 40 | 4,181 |
| Requests via Internet—Individuals (minus Denmark, Netherlands, Norway, Poland & Sweden) | 9,407 | 1 | 40 | 6,271 |
| Requests via Letter—Individuals in Denmark, Netherlands, Norway, & Sweden | 280 | 1 | 44 | 205 |
| Requests via Letter—Individuals in Poland | 16 | 1 | 41 | 11 |
| Requests via Internet—Individuals in Denmark, Netherlands, Norway, & Sweden | 421 | 1 | 44 | 309 |
| Requests via Internet—Individuals in Poland | 23 | 1 | 41 | 16 |
| Requests via Letter—Employers (minus Denmark, Netherlands, Norway, Poland & Sweden) | 25,087 | 1 | 40 | 16,725 |
| Requests via Internet—Employers (minus Denmark, Netherlands, Norway, Poland, & Sweden) | 37,632 | 1 | 40 | 25,088 |
| Requests via Letter—Employers in Denmark, Netherlands, Norway, & Sweden | 1,121 | 1 | 44 | 822 |
| Requests via Letter—Employers in Poland | 62 | 1 | 41 | 42 |
| Requests via Internet—Employers in Denmark, Netherlands, Norway, & Sweden | 1,680 | 1 | 44 | 1,232 |
| Requests via Internet—Employers in Poland | 93 | 1 | 41 | 64 |
| Totals | 82,094 | | | 54,966 |

2. *Disability Report—Child—20 CFR 416.912—0960—0577.* Sections 223(d)(5)(A) and 1631(e)(1) of the Social Security Act require Supplemental Security Income (SSI) claimants to furnish medical and other evidence to prove they are disabled. SSA uses Form SSA-3820 to collect various types of

information about a child's condition from treating sources or other medical sources of evidence. The State Disability Determination Services evaluators use the information from Form SSA-3820 to develop medical and school evidence, and to assess the alleged disability. The information, together with medical

evidence, forms the evidentiary basis upon which SSA makes its initial disability evaluation. The respondents are claimants seeking SSI childhood disability payments.
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-3820 (Paper Form) | 279,002 | 1 | 90 | 418,503 |
| Electronic Disability Collection System | 1,000 | 1 | 120 | 2,000 |
| i3820 (Internet) | 119,464 | 1 | 120 | 238,928 |

| Modality of completion | Number of respondents | Frequency of response | Average burden per response (minutes) | Estimated total annual burden (hours) |
|------------------------|-----------------------|-----------------------|---------------------------------------|---------------------------------------|
| Totals | 399,466 | | | 659,431 |

3. Request for Accommodation in Communication Method—0960–0777. SSA allows disabled or impaired Social Security applicants, beneficiaries, recipients, and representative payees to choose one of seven alternative methods of communication they want SSA to use when we send them benefit notices and other related communications. The seven alternative methods we offer are: (1) Standard print notice by first-class mail; (2) standard print mail with a follow-up telephone call; (3) certified mail; (4) Braille; (5) Microsoft Word file on data CD; (6) large print (18-point font); or (7) audio CD. However,

respondents who want to receive notices from SSA through a communication method other than the seven methods listed above must explain their request to us. Those respondents use Form SSA–9000 to: (1) Describe the type of accommodation they want, (2) disclose their condition necessitating the need for a different type of accommodation, and (3) explain why none of the seven methods described above are sufficient for their needs. SSA uses Form SSA–9000 to determine, based on applicable law and regulation, whether to grant the respondents’ requests for an

accommodation based on their impairment or disability. SSA collects this information electronically through either an in-person interview or a telephone interview during which the SSA employee keys in the information on our iAccommodate Intranet screens. The respondents are disabled or impaired Social Security applicants, beneficiaries, recipients, and representative payees who ask SSA to send notices and other communications in an alternative method besides the seven modalities we currently offer.
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–9000/iAccommodate | 5,000 | 1 | 20 | 1,667 |

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 August 17, 2016. Individuals can obtain copies of the OMB clearance package by writing to *OR.Reports.Clearance@ssa.gov*.

Work Incentives Planning and Assistance Program—0960–0629. As part of SSA’s strategy to assist Social Security Disability Insurance (SSDI)

beneficiaries and SSI recipients who wish to return to work and achieve self-sufficiency, SSA established the Work Incentives Planning and Assistance (WIPA) program. This community based, work incentive, planning and assistance project collects identifying claimant information via project sites and community work incentives coordinators (CWIC). SSA uses this information to ensure proper management of the project, with particular emphasis on administration, budgeting, and training. In addition, project sites and CWIC’s collect data from SSDI beneficiaries and SSI

recipients on background employment, training, benefits, and work incentives. SSA is interested in identifying SSDI beneficiary and SSI recipient outcomes under the WIPA program, to determine the extent to which beneficiaries with disabilities and SSI recipients achieve their employment, financial, and healthcare goals. SSA will also use the data in its analysis and future planning for SSDI and SSI programs. Respondents are SSDI beneficiaries, SSI recipients, community project sites, and employment advisors.
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) |
|---|-----------------------|-----------------------|---------------------------------------|---------------------------------------|
| Small Site (Under 150 beneficiaries served) | 4,800 | 1 | 20 | 1,600 |
| Medium Site (150–599 beneficiaries served) | 7,500 | 1 | 20 | 2,500 |
| Large Site (600 or more beneficiaries served) | 17,700 | 1 | 20 | 5,900 |
| Total Sites | 30,000 | | | 10,000 |
| SSDI & SSI Beneficiaries | 30,000 | 1 | 25 | 12,500 |
| Help Line | 30,000 | 1 | 5 | 2,500 |

Dated: July 13, 2016.
Naomi R. Sipple,
Reports Clearance Officer, Social Security Administration.
 [FR Doc. 2016–16865 Filed 7–15–16; 8:45 am]
BILLING CODE 4191–02–P