

United States and the Louisiana Department of Environmental Quality v. The Dow Chemical Company, Union Carbide Corp. and Performance Materials, NA, Inc., Civil Action No. 2:21-cv-00114-MLCF-JVM, DOJ reference number 90-5-2-1-11114. All comments must be submitted no later than 30 days after the publication date of this notice. Comments may be submitted either by email or by first-class mail:

<i>To submit comments:</i>	<i>Send them to:</i>
By email	<i>pubcomment-ees.enrd@usdoj.gov.</i>
By first-class mail.	Assistant Attorney General, U.S. DOJ—ENRD, P.O. Box 7611, Washington, DC 20044-7611.

During the public comment period, the proposed consent decree may be examined and downloaded at this Justice Department website: <https://www.justice.gov/enrd/consent-decrees>. We will provide a paper copy of the proposed consent decree upon written request and payment of reproduction costs. Please mail your request and payment to: Consent Decree Library, U.S. DOJ—ENRD, P.O. Box 7611, Washington, DC 20044-7611.

Please enclose a check or money order for \$3.25 (25 cents per page reproduction cost) payable to the United States Treasury.

Thomas Carroll,

Assistant Section Chief, Environmental Enforcement Section, Environment and Natural Resources Division.

[FR Doc. 2024-00487 Filed 1-11-24; 8:45 am]

BILLING CODE 4410-15-P

DEPARTMENT OF JUSTICE

Notice of Lodging of Proposed Consent Decree under the Clean Air Act

On January 9, 2024, the Department of Justice lodged a proposed Consent Decree with the United States District Court for the Western District of New York in the lawsuit entitled *United States of America v. Allied Waste Niagara Falls Landfill, LLC*, Case No. 1:24-cv-36.

The United States filed this lawsuit to seek civil penalties and injunctive relief for violations of the Clean Air Act, 42 U.S.C. 7401 *et seq.* (“CAA”). The alleged violations stem from the failure by Allied Niagara Falls Landfill, LLC (“Allied”) to comply with federally-enforceable regulations applicable to municipal solid waste (“MSW”)

landfills. Allied operates a MSW landfill in Niagara Falls, New York.

The Consent Decree provides for Allied to come into compliance with the Clean Air Act, 42 U.S.C. 7401 *et seq.*, and its municipal solid waste landfill regulations by installing and operating a gas collection and control system at its landfill and to pay a \$671,000 civil penalty.

The publication of this notice opens a period for public comment on the proposed Consent Decree. Comments should be addressed to the Assistant Attorney General, Environment and Natural Resources Division, and should refer to *Allied Waste Niagara Falls Landfill, LLC*, Civil Action No. 1:24-cv-36, D.J. Ref. No. 90-5-2-1-11610. All comments must be submitted no later than thirty (30) days after the publication date of this notice. Comments may be submitted either by email or by mail:

<i>To submit comments:</i>	<i>Send them to:</i>
By e-mail	<i>pubcomment-ees.enrd@usdoj.gov.</i>
By mail	Assistant Attorney General, U.S. DOJ—ENRD, P.O. Box 7611, Washington, DC 20044-7611.

During the public comment period, the Consent Decree may be examined and downloaded at this Justice Department website: <https://www.justice.gov/enrd/consent-decrees>. We will provide a paper copy of the Consent Decree upon written request and payment of reproduction costs. Please mail your request and payment to: Consent Decree Library, U.S. DOJ—ENRD, P.O. Box 7611, Washington, DC 20044-7611.

Please enclose a check or money order for \$39.75 (25 cents per page reproduction cost) payable to the United States Treasury.

Henry Friedman,

Assistant Section Chief, Environmental Enforcement Section, Environment and Natural Resources Division.

[FR Doc. 2024-00555 Filed 1-11-24; 8:45 am]

BILLING CODE 4410-15-P

DEPARTMENT OF LABOR

Office of the Workers’ Compensation Programs

Agency Information Collection Activities; Comment Request; Representative Payee Report, Representative Payee Report (Short Form), and Physician’s/Medical Officer’s Statement

AGENCY: Division of Coal Mine Workers’ Compensation.

ACTION: Notice.

SUMMARY: The Department of Labor (DOL) is soliciting comments concerning a proposed extension for the authority to conduct the information collection request (ICR) titled, “Representative Payee Report, Representative Payee Report (Short Form), and Physician’s/Medical Officer’s Statement.” This comment request is part of continuing Departmental efforts to reduce paperwork and respondent burden in accordance with the Paperwork Reduction Act of 1995 (PRA).

DATES: Consideration will be given to all written comments received by March 12, 2024.

ADDRESSES: A copy of this ICR with applicable supporting documentation; including a description of the likely respondents, proposed frequency of response, and estimated total burden may be obtained free by contacting Anjanette Suggs by telephone at 202-354-9660 or by email at suggs.anjanette@dol.gov.

Submit written comments about, or requests for a copy of, this ICR by mail or courier to the U.S. Department of Labor, Office of Workers’ Compensation Programs, Room S3323, 200 Constitution Avenue NW, Washington, DC 20210; by email: suggs.anjanette@dol.gov.

FOR FURTHER INFORMATION CONTACT: Contact Anjanette Suggs by telephone at 202-354-9660 or by email at suggs.anjanette@dol.gov.

SUPPLEMENTARY INFORMATION: The DOL, as part of continuing efforts to reduce paperwork and respondent burden, conducts a pre-clearance consultation program to provide the general public and Federal agencies an opportunity to comment on proposed and/or continuing collections of information before submitting them to the OMB for final approval. This program helps to ensure 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 can be properly assessed.

Benefits due to a DOL Black Lung beneficiary are paid to a representative payee on behalf of the beneficiary when he or she is unable to manage the benefits due to incapability or incompetence or because the beneficiary is a minor. The Representative Payee Report (Form CM-623) and Representative Payee Report Short Form (Form CM-623S) are used to ensure that benefits paid to a representative payee are used for the beneficiary's well-being. The Physician's/Medical Officer's Statement (Form CM-787) is used to determine the beneficiary's capability to manage monthly black lung benefits. The Black Lung Benefits Act, 30 U.S.C. 922, authorizes this information collection. authorizes this information collection.

This information collection is subject to the PRA. A Federal agency generally cannot conduct or sponsor a collection of information, and the public is generally not required to respond to an information collection, unless the OMB under the PRA approves it and displays a currently valid OMB Control Number. In addition, notwithstanding any other provisions of law, no person shall generally be subject to penalty for failing to comply with a collection of information that does not display a valid Control Number. See 5 CFR 1320.5(a) and 1320.6.

Interested parties are encouraged to provide comments to the contact shown in the **ADDRESSES** section. Written comments will receive consideration, and summarized and included in the request for OMB approval of the final ICR. In order to help ensure appropriate consideration, comments should mention 1240-0020.

Submitted comments will also be a matter of public record for this ICR and posted on the internet, without redaction. The DOL encourages commenters not to include personally identifiable information, confidential business data, or other sensitive statements/information in any comments.

The DOL is particularly interested in comments that:

- 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: DOL-Office of Workers' Compensation Programs.

Type of Review: Extension.

Title of Collection: Representative Payee Report, Representative Payee Report (Short Form), and Physician's/Medical Officer's Statement.

Form: Representative Payee Report (CM-623), Representative Payee Report (Short Form) (CM-623S) and Physician's/Medical Officer's Statement (CM-787).

OMB Control Number: 1240-0020.

Affected Public: Individuals or Households.

Estimated Number of Respondents: 282.

Frequency: Occasionally.

Total Estimated Annual Responses: 282.

Estimated Average Time per Response: 10-90 minutes.

Estimated Total Annual Burden Hours: 153 hours.

Total Estimated Annual Other Cost Burden: \$192.00.

Authority: 44 U.S.C. 3506(c)(2)(A).

Dated: January 8, 2024.

Anjanette Suggs,

Agency Clearance Officer.

[FR Doc. 2024-00490 Filed 1-11-24; 8:45 am]

BILLING CODE 4510-CK-P

DEPARTMENT OF LABOR

Office of the Workers' Compensation Programs

Agency Information Collection Activities; Comment Request; Certification of Medical Necessity

AGENCY: Division of Coal Mine Workers' Compensation.

ACTION: Notice.

SUMMARY: The Department of Labor (DOL) is soliciting comments concerning a proposed extension for the authority to conduct the information collection request (ICR) titled, "Certification of Medical Necessity". This comment request is part of continuing Departmental efforts to reduce paperwork and respondent burden in accordance with the

Paperwork Reduction Act of 1995 (PRA).

DATES: Consideration will be given to all written comments received by March 12, 2024.

ADDRESSES: A copy of this ICR with applicable supporting documentation; including a description of the likely respondents, proposed frequency of response, and estimated total burden may be obtained free by contacting Anjanette Suggs by telephone at 202-354-9660 or by email at suggs.anjanette@dol.gov.

Submit written comments about, or requests for a copy of, this ICR by mail or courier to the U.S. Department of Labor, Office of Workers' Compensation Programs, Room S3323, 200 Constitution Avenue NW, Washington, DC 20210; by email: suggs.anjanette@dol.gov.

FOR FURTHER INFORMATION CONTACT:

Contact Anjanette Suggs by telephone at 202-354-9660 or by email at suggs.anjanette@dol.gov.

SUPPLEMENTARY INFORMATION: The DOL, as part of continuing efforts to reduce paperwork and respondent burden, conducts a pre-clearance consultation program to provide the general public and Federal agencies an opportunity to comment on proposed and/or continuing collections of information before submitting them to the OMB for final approval. This program helps to ensure 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 can be properly assessed.

The Office of Workers' Compensation Programs administers the Federal Black Lung Compensation Program. The Black Lung Benefits Act (30 U.S.C. 901*et seq.*) and its implementing regulations necessitate this information collection. The regulations at 20 CFR 725.701 set out a miner's eligibility for medical services and supplies for the length of time required by the miner's pneumoconiosis and related disability. The regulations require prior approval before ordering medical equipment where the purchase price exceeds \$300.00. 20 CFR 725.705. The regulations also provide for the ongoing supervision of the miner's medical care, including the necessity, character and sufficiency of care to be furnished; gives the Office of Workers' Compensation Programs authority to request medical reports; and indicates the right to refuse payment for failing to submit any report required. 20 CFR 725.706. To