## **SMALL BUSINESS ADMINISTRATION**

[Disaster Declaration #11488]

## Texas Disaster #TX-00312

**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–1791–DR), dated 09/13/2008.

Incident: Hurricane Ike.
Incident Period: 09/07/2008 through 10/02/2008.

Effective Date: 09/13/2008. Physical Loan Application Deadline Date: 11/12/2008.

Economic Injury (EIDL) Loan Application Deadline Date: 06/15/2009.

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 09/13/2008, 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: Angelina, Aransas,
Austin, Brazoria, Burleson,
Chambers, Cherokee, Fort Bend,
Galveston, Grimes, Hardin, Harris,
Houston, Jasper, Jefferson, Liberty,
Madison, Matagorda, Montgomery,
Nacogdoches, Newton, Nueces,
Orange, Polk, Rusk, Sabine, San
Augustine, San Jacinto, San
Patricio, Shelby, Trinity, Tyler,
Walker, Waller, Washington.
The Interest Rates are:

	Percent
Other (Including Non-Profit Orga- nizations) With Credit Available Elsewhere	5.250 4.000

The number assigned to this disaster for physical damage and economic injury is 11488.

(Catalog of Federal Domestic Assistance Numbers 59002 and 59008)

#### Herbert L. Mitchell,

Associate Administrator for Disaster Assistance.

[FR Doc. E8–25495 Filed 10–24–08; 8:45 am]

# **SOCIAL SECURITY ADMINISTRATION**

# Agency Information Collection Activities: Proposed 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 (Pub. L.) 104–13, the Paperwork Reduction Act of 1995, effective October 1, 1995. This notice includes a revision to an OMB-approved information collection.

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 the burden on respondents, including the use of automated collection techniques or other forms of information technology. Mail, e-mail, or fax your comments and recommendations on the information collection(s) to the OMB Desk Officer and the SSA Reports Clearance Officer to the addresses or fax numbers listed below.

(OMB), Office of Management and Budget, Attn: Desk Officer for SSA, Fax: 202–395–6974m, e-mail address: OIRA\_Submission@omb.eop.gov. Social Security Administration, DCBFM, 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 collection below is pending at SSA. SSA will submit it to OMB within 60 days from the date of this notice. Therefore, your comments would be most helpful if you submit them to SSA within 60 days from the date of this publication. Individuals can obtain copies of the collection

date of this publication. Individuals can obtain copies of the collection instrument by calling the SSA Reports Clearance Officer at 410–965–0454 or by writing to the e-mail address listed

1. Application for Mother's or Father's Insurance Benefits—20 CFR 404.339—404.342, 20 CFR 404.601—404.603—0960—0003. The Social Security Act provides for the payment of monthly benefits to the widow or widower of an insured individual if the surviving

spouse is caring for the deceased worker's child who is entitled to Social Security benefits. SSA uses the information collected on Form SSA-5–F6 to entitle an individual to mother's or father's insurance benefits. The respondents are individuals applying for mother's or father's insurance benefits under the Old Age, Survivors, and Disability Insurance (OASDI) program.

Type of Request: Revision of an OMBapproved information collection. Number of Respondents: 53,700.

Frequency of Response: 1.
Average Burden Per Response: 15
minutes.

Estimated Average Burden: 12,992 hours.

2. Statement of Marital Relationship (By one of the parties)—20 CFR 404. 726—0960–0038. Where no formal marriage documentation exists, SSA uses information collected on Form SSA-754-F4 to determine whether an individual applying for spousal benefits meets the criteria of common-law marriage under State law. The respondents are applicants for spouse's Social Security or Supplemental Security Income (SSI) benefits.

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

Estimated Annual Burden: 15,000 hours.

3. Public Information Campaign— 0960–0544. Periodically, SSA sends various public information materials, including public service announcements, news releases, and educational tapes, to public broadcasting systems so they can inform the public about various programs and activities conducted by SSA. SSA will frequently send follow-up business reply cards for these public information materials to obtain suggestions for improving them. The respondents are media sources (e.g., broadcast television and radio media sources) who have received public information campaign materials.

Type of Request: Extension of an OMB-approved information collection. Number of Respondents: 6,000. Frequency of Response: 2. Average Burden Per Response: 1 minute.

Estimated Annual Burden: 200 hours. 4. Medical Source Statement of Ability To Do Work Related Activities (Physical and Mental)—20 CFR 404.1512–404.1513, 404.912–404.913, 404.1517, 416.917—0960–0662. SSA uses the Forms HA–1151 and HA–1152