SMALL BUSINESS ADMINISTRATION

[Disaster Declaration #20902 and #20903; PUERTO RICO Disaster Number PR-20003]

Presidential Declaration of a Major Disaster for Public Assistance Only for the Commonwealth of Puerto Rico

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 Commonwealth of Puerto Rico (FEMA–4850–DR), dated November 27, 2024

Incident: Tropical Storm Ernesto.

DATES: Issued on November 27, 2024. Incident Period: August 13, 2024 through August 16, 2024.

Physical Loan Application Deadline Date: January 27, 2025.

Economic Injury (EIDL) Loan Application Deadline Date: August 27, 2025.

ADDRESSES: Visit the MySBA Loan Portal at https://lending.sba.gov to apply for a disaster assistance loan.

FOR FURTHER INFORMATION CONTACT:

Alan Escobar, Office of Disaster Recovery & Resilience, U.S. Small Business Administration, 409 3rd Street SW, Suite 6050, Washington, DC 20416, (202) 205–6734.

SUPPLEMENTARY INFORMATION: Notice is hereby given that as a result of the President's major disaster declaration on November 27, 2024, Private Non-Profit organizations that provide essential services of a governmental nature may file disaster loan applications online using the MySBA Loan Portal https://lending.sba.gov or other locally announced locations. Please contact the SBA disaster assistance customer service center by email at disastercustomerservice@sba.gov or by phone at 1–800–659–2955 for further assistance.

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

Primary Municipalities: Aibonito,
Anasco, Aguas Buenas,
Barranquitas, Canovanas, Ceiba,
Coamo, Comerio, Corozal,
Hormigueros, Jayuya, Las Marias,
Loiza, Manati, Maricao, Maunabo,
Mayaguez, Naguabo, Orocovis, San
Lorenzo, San Sebastian, Santa
Isabel, Vega Alta, Vieques, Villalba,
Yabucoa.

The Interest Rates are:

	Percent
For Physical Damage:	

	Percent
Non-Profit Organizations with Credit Available Elsewhere Non-Profit Organizations with-	3.250
out Credit Available Else- where	3.250
For Economic Injury: Non-Profit Organizations without Credit Available Else-	
where	3.250

The number assigned to this disaster for physical damage is 20902B and for economic injury is 209030.

(Catalog of Federal Domestic Assistance Number 59008)

Alejandro Contreras,

Acting Deputy Associate Administrator, Office of Disaster Recovery & Resilience. [FR Doc. 2024–28565 Filed 12–5–24; 8:45 am]
BILLING CODE 8026–09–P

SMALL BUSINESS ADMINISTRATION

[Disaster Declaration #20896 and #20897; CALIFORNIA Disaster Number CA-20029]

Administrative Declaration of a Disaster for the State of California

AGENCY: U.S. Small Business

Administration. **ACTION:** Notice.

SUMMARY: This is a notice of an Administrative declaration of a disaster for the State of California dated November 29, 2024.

Incident: Mountain Fire.

DATES: Issued on November 29, 2024. *Incident Period:* November 6, 2024 and continuing.

Physical Loan Application Deadline Date: January 28, 2025.

Economic Injury (EIDL) Loan Application Deadline Date: August 29, 2025.

ADDRESSES: Visit the MySBA Loan Portal at https://lending.sba.gov to apply for a disaster assistance loan.

FOR FURTHER INFORMATION CONTACT:

Alan Escobar, Office of Disaster Recovery & Resilience, U.S. Small Business Administration, 409 3rd Street SW, Suite 6050, Washington, DC 20416, (202) 205–6734.

SUPPLEMENTARY INFORMATION: Notice is hereby given that as a result of the Administrator's disaster declaration, applications for disaster loans may be submitted online using the MySBA Loan Portal https://lending.sba.gov or other locally announced locations. Please contact the SBA disaster assistance customer service center by email at disastercustomerservice@ sba.gov or by phone at 1–800–659–2955 for further assistance.

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

Primary Counties: Ventura. Contiguous Counties:

California: Kern, Los Angeles, Santa Barbara.

The Interest Rates are:

	Percent
For Physical Damage:	
Homeowners with Credit Avail-	
able Elsewhere	5.125
Homeowners without Credit Available Elsewhere	2.563
Businesses with Credit Avail-	2.503
able Elsewhere	8.000
Businesses without Credit	0.000
Available Elsewhere	4.000
Non-Profit Organizations with	
Credit Available Elsewhere	3.625
Non-Profit Organizations with-	
out Credit Available Else-	0.005
where For Economic Injury:	3.625
Business and Small Agricul-	
tural Cooperatives without	
Credit Available Elsewhere	4.000
Non-Profit Organizations with-	
out Credit Available Else-	
where	3.625

The number assigned to this disaster for physical damage is 208965 and for economic injury is 208970.

The State which received an EIDL Declaration is California.

(Catalog of Federal Domestic Assistance Number 59008)

Isabella Guzman.

Administrator.

[FR Doc. 2024–28528 Filed 12–5–24; 8:45 am]

BILLING CODE 8026-09-P

SOCIAL SECURITY ADMINISTRATION

[Docket No: SSA-2024-0052]

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 extensions and 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, (SSA) Social Security Administration, OLCA, Attn: Reports Clearance Director, Mail Stop 3253 Altmeyer, 6401 Security Blvd., Baltimore, MD 21235, Fax: 833– 410–1631, Email address:

OR.Reports.Clearance@ssa.gov.

Or you may submit your comments online through https://www.reginfo.gov/public/do/PRAmain by clicking on

Currently under Review—Open for Public Comments and choosing to click on one of SSA's published items. Please reference Docket ID Number [SSA– 2024–0052] in your submitted response.

I. The information collection below is pending at SSA. SSA will submit it 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 February 4, 2025. Individuals can obtain copies of the collection instrument by writing to the above email address.

Coverage of Employees of State and Local Governments—20 CFR 404— 0960–0425. The Code of Federal Regulations at 20 CFR 404, Subpart M, prescribes the rules for States submitting reports of deposits and recordkeeping to SSA. SSA requires States (and interstate instrumentalities) to provide wage and deposit contribution information for pre-1987 periods. Not all states have completely satisfied their pending wage report and contribution liability with SSA for pre-1987 tax years. SSA needs these regulations until all pending items with all states are closed out, and to provide for collection of this information in the future, if necessary. The respondents are State and local governments or interstate instrumentalities.

Type of Request: Extension of an OMB-approved Information Collection.

Regulation section	Number of respondents	Frequency of response	Average burden per response (minutes)	Total annual burden (hours)	Average theoretical hourly cost amount (dollars) *	Total annual opportunity cost (dollars) **
404. 1204 (a) & (b)	52 52 52	1 1 1	30 60 60	26 52 52	\$32.39 * 32.39 * 32.39	** \$842 ** 1,684 ** 1,684
Totals	156			130		** 4,210

^{*}We based this figure by averaging both the average State Government hourly wages (https://www.bls.gov/oes/current/naics4_999200.htm), and the average Local Government hourly wages, as reported by Bureau of Labor Statistics data (https://www.bls.gov/oes/current/naics4_999300.htm).

II. SSA submitted the information collections below to OMB for clearance. Your comments regarding these 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 January 6, 2025. Individuals can obtain copies of these OMB clearance packages by writing to the OR.Reports.Clearance@ssa.gov.

1. Work Activity Report—Employee—20 CFR 404.1520(b), 404.1571—404.1576, 404.1584—404.1593, and 416.971—404.976—0960—0059. SSA uses Form SSA—821—BK to collect recipient employment information to determine whether recipients worked after becoming disabled and, if so, whether the work is substantial gainful activity. In addition, SSA uses the SSA—821—BK and SSA—821—APP to obtain work information during the initial claims process, the continuing disability

review process, post-adjudicative work issue actions, and for Supplemental Security Income (SSI) claims involving work issues. SSA reviews and evaluates the data to determine if the applicant or recipient meets the disability requirements of the law. The respondents are applicants or recipients of Title II Social Security Disability, and Title XVI SSI applicants.

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)	Average theoretical hourly cost amount (dollars) *	Average wait time in field office or for teleservice centers (minutes) **	Total annual opportunity cost (dollars) ***
SSA-821-BK In Office	64,330	1	30	32,165	*\$13.30	** 24	*** \$770,030
SSA-821-BK Phone	128,660	1	30	64,330	* 13.30	** 19	*** 1,397,458
SSA-821-BK Returned Via Mail	192,990	1	40	128,660	* 13.30		*** 1,710,380
SSA-821-BK Electronic	25,320	1	45	18,990	* 13.30		*** 252,567
Totals	411,300			244,145			*** 4,130,435

^{*}We based this figure on the average of both DI payments based on SSA's current FY 2024 data (https://mwww.ba.ssa.gov/legislation/2024FactSheet.pdf), and U.S. worker's hourly wages, as reported by Bureau of Labor Statistics data (https://www.bls.gov/oes/current/oes_nat.htm).

**We based this figure on the average FY 2024 wait times for field offices (24 minutes) and teleservice centers (19 minutes), based on SSA's current management

^{**}This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. There is no actual charge to respondents to complete the application.

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2. Claimant's Medication-20 CFR 404.1512, 416.912—0960-0289. To receive Old Age Survivors and Disability Insurance (OASDI) and Supplemental Security Income (SSI) payments, the relevant State Disability Determination Service (DDS) or field office (FO) must first adjudicate claimants' applications. If the DDS or FO denies an initial application, the claimants may request for reconsideration of the initial denial. At that time, the claimants may submit addition documentation to further justify their claims. If the DDS denies

the claim at the reconsideration level, the claimant may then request a hearing before a judge. Before the hearing, SSA allows the claimant to submit additional evidence to support their claim. In addition, since judges must obtain information from the claimant to update and complete their medical record and to verify the accuracy of the information, SSA also sends the claimant Form HA-4632, Claimant's Medications, to request information from the claimant regarding the current medications they use. This information helps the judge overseeing the case to

fully investigate: (1) the claimant's medical treatment and (2) the effects of the medications on the claimant's medical impairments and functional capacity. The judge makes the completed form a part of the documentary evidence of record, placing it in the official record of the proceedings as an exhibit. The respondents are applicants (or their representatives) for OASDI or SSI payments who request a hearing to contest an agency denial of their claim.

Type of Request: Revision of an OMBapproved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars) *	Average wait time in field office or for teleservice centers (minutes) **	Total annual opportunity cost (dollars) ***
HA-46321—PDF/paper version Electronic Records Express Submis-	51,000	1	20	17,000	*\$13.30	**21	*** \$463,505
sions	249,000	1	20	83,000	*31.48		*** 2,612,840
Totals	300,000			100,000			*** 3,076,345

^{*}We based this figure on the average DI payments based on SSA's current data (https://www.ssa.gov/legislation/2024FactSheet.pdf) and on the average U.S. worker's hourly wages, as reported by Bureau of Labor Statistics data (https://www.bls.gov/oes/current/oes_nat.htm).

**We based this figure on averaging both the average FY 2024 wait times for field offices and teleservice centers, based on SSA's current management informa-

3. Questionnaire for Children Claiming SSI Benefits—20 CFR 416.912(a)-0960-0499. Sections 1614 and 1631 of the Act allow SSA to determine the eligibility of an applicant's claim for SSI payments. Parents or legal guardians seeking to obtain or retain SSI eligibility for their

children use Form SSA-3881-BK to provide SSA with the addresses of nonmedical sources such as schools, counselors, agencies, organizations, or therapists who would have information about a child's functioning. SSA uses this information to help determine a child's claim or continuing eligibility

for SSI. The respondents are the parents, guardians, or other caretakers of: (1) applicants who appeal SSI childhood disability decisions; or (2) recipients undergoing a continuing disability review.

Type of Request: Revision of an OMBapproved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Average wait time in field office (minutes) **	Total annual opportunity cost (dollars) ***
SSA-3881-BK (Paper Version) SSA-3881-BK (Intranet Version)	98,307 52,936	1	30 30	49,154 26,468	*\$31.48 *31.48	** 24 ** 21	*** \$2,785,256 *** 1,416,474
Totals	151,243			75,622			*** 4,201,730

*We based this figure on average U.S. worker's hourly wages, as reported by Bureau of Labor Statistics data (https://www.bls.gov/oes/current/oes_nat.htm).

**We based this figure on the average FY 2024 wait times for field offices and hearings office, as well as by averaging both the average FY 2024 wait times for field offices and teleservice centers, based on SSA's current management information data.

***This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. There is no actual charge to respondents to complete the

4. Waiver of Right to Appear— Disability Hearing—20 CFR 404.913-404.914, 404.916(b)(5), 416.1413-416.1414, 416.1416(b)(5)—0960-0534. Claimants for Social Security disability payments or their representatives can use Form SSA-773-U4 to waive their

right to appear at a disability hearing. The disability hearing officer uses the signed form as a basis for not holding a hearing, and for preparing a written decision on the claimant's request for disability payments based solely on the evidence of record. The respondents are

disability claimants for Social Security benefits or SSI payments, or their representatives, who wish to waive their right to appear at a disability hearing.

Type of Request: Revision of an OMBapproved information collection.

tion data.

*** This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application.

There is no actual charge to respondents to complete the application.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars) *	Average wait time in field office or for teleservice centers (minutes) **	Total annual opportunity cost (dollars) ***
SSA-773-U4	4,356	1	3	218	*\$13.30	** 24	*** \$26,068

5. Function Report—Child (Birth to 1st Birthday, Age 1 to 3rd Birthday, Age 3 to 6th Birthday, Age 6 to 12th Birthday, Age 12 to 18th Birthday)—20 CFR 416.912 and 416.924a(a)(2)-0960-0542. As part of SSA's disability determination process, we use Forms SSA-3375-BK through SSA-3379-BK to request information from a child's parent or guardian for children applying for SSI. The five different versions of the form contain questions about the child's

day-to-day functioning appropriate to a particular age group; thus, respondents use only one version of the form for each child. The adjudicative team (disability examiners and medical or psychological consultants) of State disability determination services offices collect the information on the appropriate version of this form (in conjunction with medical and other evidence) to form a complete picture of the children's ability to function and

their impairment-related limitations. The adjudicative team uses the completed profile to determine: (1) if each child's impairment(s) results in marked and severe functional limitations; and (2) whether each child is disabled. The respondents are parents and guardians of child applicants for

Type of Request: Revision of an OMBapproved information collection.

Modality of completion	Number of respondents	Frequency of response	Average burden per response (minutes)	Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars) *	Average wait time in field office or for teleservice centers (minutes) **	Total annual opportunity cost (dollars)***
SSA-3375	26,864	1	20	8,955	*\$31.48	** 21	*** \$577,878
SSA-3376	53,347	1	20	17,782	* 31.48	**21	*** 1,147,540
SSA-3377	108,745	1	20	36,248	* 31.48	**21	*** 2,339,247
SSA-3378	193,800	1	20	64,600	* 31.48	**21	*** 4,168,896
SSA-3379	142,006	1	20	47,335	* 31.48	**21	*** 3,054,725
Totals	524,762			174,921			*** 11,288,286

^{*}We based this figure on the average U.S. worker's hourly wages, as reported by Bureau of Labor Statistics data (https://www.bls.gov/oes/current/oes_nat.htm).

**We based this figure on averaging the average FY 2024 wait times for field offices and teleservice Centers, based on SSA's current management information

Dated: December 2, 2024.

Naomi Sipple,

Reports Clearance Officer, Social Security Administration.

[FR Doc. 2024-28509 Filed 12-5-24; 8:45 am]

BILLING CODE 4191-02-P

SOCIAL SECURITY ADMINISTRATION

[Docket No. SSA-2024-0049]

Social Security Ruling, SSR 24-3p.; Titles II and XVI: Use of Occupational Information and Vocational Specialist and Vocational Expert Evidence in **Disability Determinations and Decisions**

AGENCY: Social Security Administration. **ACTION:** Notice of Social Security Ruling (SSR).

SUMMARY: We are providing notice of SSR 24-3p. This SSR rescinds and replaces "SSR 00-4p: Titles II and XVI: Use of Vocational Expert and Vocational Specialist Evidence, and Other Reliable Occupational Information in Disability Decisions", and explains our standard for evaluating whether vocational evidence is sufficient to support a disability determination or decision.

DATES: We will apply this notice on January 6, 2025.

FOR FURTHER INFORMATION CONTACT:

Patrick McGuire, Social Security Administration, Office of Analytics, Review, and Oversight, Appellate Operations, 6401 Security Boulevard, Baltimore, MD 21235-6401, (703) 605-7100, for information about this notice. For information on eligibility or filing for benefits, call our national toll-free number, 1-800-772-1213 or TTY 1-800-325-0778, or visit our internet site, Social Security Online, at https:// www.ssa.gov.

SUPPLEMENTARY INFORMATION: Although 5 U.S.C. 552(a)(1) and (a)(2) do not

require us to publish this SSR, we are publishing it in accordance with 20 CFR 402.35(b)(1).

SSRs represent precedential final opinions, orders, and statements of policy and interpretations that we have adopted relating to the Federal Old Age, Survivors, and Disability Insurance program, and Supplemental Security Income program. We may base SSRs on determinations or decisions made in our administrative review process, Federal court decisions, decisions of our Commissioner, opinions from our Office of the General Counsel, or other interpretations of law and regulations.

Although SSRs do not have the same force and effect as law, they are binding on all SSA components in accordance with 20 CFR 402.35(b)(1).

This SSR will remain in effect until we publish a notice in the **Federal** Register that rescinds it, or until we publish a new SSR that replaces or modifies it.

^{*}We based this figure on average DI payments based on SSA's current FY 2024 data (https://mwww.ba.ssa.gov/legislation/2024FactSheet.pdf).

*We based this figure on the average FY 2024 wait times for field offices, based on SSA's current management information data.

***This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. There is no actual charge to respondents to complete the

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