

Type of Review: Extension
Agency: Employment Standards Administration
Title: Operator Controversion—CM-970; Operator Response—CM-970a
OMB Number: 1215-0058
Agency Number: CM-970; CM-970a
Frequency: On occasion
Affected Public: Business or other for-profit
Number of Respondents: 3,500
Estimated Time Per Respondent: 15 minutes
Total Burden Hours: 1,750
Description: The CM-970 and the CM-970a are used by most coal mine operators to controvert an initial finding or potential liability for payment of black lung benefits under the Act.

Type of Review: Extension
Agency: Employment Standards Administration
Title: Request for State or Federal Workers' Compensation Information
OMB Number: 1215-0060
Agency Number: CM-905
Frequency: On occasion
Affected Public: Federal Government; State, Local or Tribal Government
Number of Respondents: 4,440
Estimated Time Per Respondent: 15 minutes
Total Burden Hours: 1,100

Description: The Federal Mine Safety and Health Act of 1977, as amended, 30 U.S.C. 922 and 20 CFR 725.535 direct that Department of Labor benefit payments to a beneficiary for any month be reduced by any other payments of State or Federal benefits for workers' compensation due to pneumoconiosis. To ensure compliance with this mandate, the Division of Coal Mine Workers Compensation (DCMWC) must collect information regarding the status of any State or Federal workers' compensation claim, including date of payments, weekly or lump sum amounts paid, and other fees or expenses paid out of this award. The information is used by the DCMWC in determining the amounts of black lung benefits paid to beneficiaries.

Type of Review: Extension
Agency: Employment Standards Administration
Title: Survivor's Notification of Beneficiary's Death
OMB Number: 1215-0087
Agency Number: CM-1089
Frequency: On occasion
Affected Public: Individuals or households
Number of Respondents: 2,100
Estimated Time Per Respondent: 8 minutes

Total Burden Hours: 280
Description: The CM-1089 is used to gather information from a beneficiary's survivor to ensure that benefits due on behalf of a deceased miner are accurate for continuation of benefits.

Type of Review: Extension
Agency: Employment Standards Administration
Title: Survivor's Notification of Beneficiary's Death
OMB Number: 1215-0116
Agency Number: CA-721, CA-722
Frequency: On occasion
Affected Public: Individuals or households; Business or other for-profit; State, local or Tribal Government

Form	Re-spond-ents	Esti-mated time per re-spond-ent min-utes
CA-721	16	60
CA-722	47	90

Total Burden Hours: 87
Description: These forms are used for filing claims for compensation for injury and death to non-Federal law enforcement officers under the provisions of U.S.C. 8191, etc. seq. The forms provide the basic information needed to process the claims made for injury or death.

Type of Review: Extension
Agency: Employment Standards Administration
Title: Waiver of Child Labor Provisions for Agricultural employment of 10 and 11 Year Old Minor in Hand Harvesting of Short Season Crops
OMB Number: 1215-0120
Frequency: On occasion
Affected Public: Individuals or households; Farms
Number of Respondents: 1
Estimated Time Per Respondent: 4 hours
Total Burden Hours: 4
Description: Agricultural employers must supply certain information to the Department of Labor when applying for a waiver of the child labor provisions to employ 10 and 11 year old minors in hand harvesting of short season crops. Employers granted waivers are required to maintain certain records.

Type of Review: Extension
Agency: Employment Standards Administration
Title: Maintenance of Receipt for Benefits Paid by a Coal Mine Operator
OMB Number: 1215-0124

Agency: CM-200
Frequency: Recordkeeping
Affected Public: Business or other for-profit
Number of Respondents: 150
Estimated Time Per Respondent: 1 hour
Total Burden Hours: 150
Description: Insurance carriers and self-insured coal mine operators who make benefit payments to black lung beneficiaries are required to maintain receipts for black lung benefit payments for five years after the date on which the receipt was executive in order to verify payment of black lung benefits.

Type of Review: Revision
Agency: Employment Standards Administration
Title: Labor Standards for Federal Service Contracts
OMB Number: 1215-0150
Frequency: On occasion
Affected Public: Business or other for-profit; Federal Government
Number of Respondents: 55,567

Type	Re-spond-ents	Estimated time per re-spondent
Vacation benefit seniority list.	53,267	1 hour.
Conformance record.	300	30 minutes.
Collective bargaining agreements.	2,000	5 minutes.

Total Burden Hours: 53,584
Description: This information collection is in accordance with the provisions of 29 CFR part 4 for recordkeeping and incidental reporting requirements in Service Contract Act Regulations applicable to employers performing on service contracts with the Federal government.

Type of Review: Extension
Agency: Employment Standards Administration
Title: Rehabilitation Maintenance Certificate
OMB Number: 1215-0161
Agency number: OWCP 17
Frequency: On occasion
Affected Public: Individuals or households; Business or other for-profit; Not-for-profit institutions
Number of Respondents: 1,300
Estimated Time per Respondent: 10 minutes
Total Burden Hours: 15,600
Description: The Office of Workers Compensation Program (OWCP 17) serves as a bill submitted by the injured worker to OWCP requesting reimbursement of expenses incurred due to participation in an approved rehabilitation effort for the preceding four week period or fraction thereof.