

**DEPARTMENT OF TRANSPORTATION****Federal Motor Carrier Safety Administration**

[Docket ID FMCSA–2009–0207]

**Qualification of Drivers; Exemption Applications; Diabetes****AGENCY:** Federal Motor Carrier Safety Administration (FMCSA).**ACTION:** Notice of applications for exemptions from the diabetes standard; request for comments.

**SUMMARY:** FMCSA announces receipt of applications from 24 individuals for exemptions from the prohibition against persons with insulin-treated diabetes mellitus (ITDM) operating commercial motor vehicles (CMVs) in interstate commerce. If granted, the exemptions would enable these individuals with ITDM to operate commercial motor vehicles in interstate commerce.

**DATES:** Comments must be received on or before September 16, 2009.

**ADDRESSES:** You may submit comments bearing the Federal Docket Management System (FDMS) Docket ID FMCSA–2009–0207 using any of the following methods:

- *Federal eRulemaking Portal:* Go to <http://www.regulations.gov>. Follow the on-line instructions for submitting comments.
- *Mail:* Docket Management Facility; U.S. Department of Transportation, 1200 New Jersey Avenue, SE., West Building Ground Floor, Room W12–140, Washington, DC 20590–0001.
- *Hand Delivery:* West Building Ground Floor, Room W12–140, 1200 New Jersey Avenue, SE., Washington, DC, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays.
- *Fax:* 1–202–493–2251.

Each submission must include the Agency name and the docket ID for this Notice. Note that DOT posts all comments received without change to <http://www.regulations.gov>, including any personal information included in a comment. Please see the Privacy Act heading below.

*Docket:* For access to the docket to read background documents or comments, go to <http://www.regulations.gov> at any time or Room W12–140 on the ground level of the West Building, 1200 New Jersey Avenue, SE., Washington, DC, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. The FDMS is available 24 hours each day, 365 days each year. If you want acknowledgment that we received your comments, please include a self-

addressed, stamped envelope or postcard or print the acknowledgement page that appears after submitting comments on-line.

*Privacy Act:* Anyone may search the electronic form of all comments received into any of our dockets by the name of the individual submitting the comment (or of the person signing the comment, if submitted on behalf of an association, business, labor union, etc.). You may review the DOT's complete Privacy Act Statement in the **Federal Register** published on April 11, 2000 (65 FR 19476). This information is also available at <http://Docketinfo.dot.gov>.

**FOR FURTHER INFORMATION CONTACT:** Dr. Mary D. Gunnels, Director, Medical Programs, (202) 366–4001, [fmcamedical@dot.gov](mailto:fmcamedical@dot.gov), FMCSA, Department of Transportation, 1200 New Jersey Avenue, SE., Room W64–224, Washington, DC 20590–0001. Office hours are from 8:30 a.m. to 5 p.m., Monday through Friday, except Federal holidays.

**SUPPLEMENTARY INFORMATION:****Background**

Under 49 U.S.C. 31136(e) and 31315, FMCSA may grant an exemption for a 2-year period if it finds “such exemption would likely achieve a level of safety that is equivalent to, or greater than, the level that would be achieved absent such exemption.” The statutes also allow the Agency to renew exemptions at the end of the 2-year period. The 24 individuals listed in this notice have recently requested an exemption from the diabetes prohibition in 49 CFR 391.41(b)(3), which applies to drivers of CMVs in interstate commerce. Accordingly, the Agency will evaluate the qualifications of each applicant to determine whether granting the exemption will achieve the required level of safety mandated by the statutes.

**Qualifications of Applicants***Tawnya E. Benner*

Ms. Benner, age 38, has had ITDM since 1982. Her endocrinologist examined her in 2009, and certified that she has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of her diabetes using insulin, and is able to drive a CMV safely. Ms. Benner meets the requirements of the vision standard at 49 CFR 391.41(b)(10). Her optometrist examined him in 2009 and certified that she does not have diabetic retinopathy.

She holds a Class C operator's license from Pennsylvania.

*Lowell R. Brown*

Mr. Brown, 71, has had ITDM since 2006. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Brown meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His ophthalmologist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class B Commercial Driver's License (CDL) from Indiana.

*Gerald R. Claypool*

Mr. Claypool, 59, has had ITDM since 2009. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Claypool meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class B CDL from California.

*Robert J. Dupuis*

Mr. Dupuis, 57, has had ITDM since 2009. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Dupuis meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Massachusetts.

*Glenn R. Edwards*

Mr. Edwards, 42, has had ITDM since 2006. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Edwards meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His ophthalmologist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from New Jersey.

*John H. Forchette, Jr.*

Mr. Forchette, 55, has had ITDM since 2008. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Forchette meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His ophthalmologist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Wisconsin.

*Robert A. Gibson*

Mr. Gibson, 44, has had ITDM since 2006. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Gibson meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class B CDL from Missouri.

*Blaine H. Holmes*

Mr. Holmes, 52, has had ITDM since 2008. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the

assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Holmes meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His ophthalmologist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Utah.

*Gerald E. Huelle*

Mr. Huelle, 61, has had ITDM since 1998. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Huelle meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Wyoming.

*Edward L. Johnson*

Mr. Johnson, 60, has had ITDM since 2002. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Johnson meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His ophthalmologist examined him in 2009, and certified that he has stable nonproliferative diabetic retinopathy. He holds a Class A CDL from Montana.

*Mary V. Johnson*

Ms. Johnson, 59, has had ITDM since 2002. Her endocrinologist examined him in 2009, and certified that she has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of her diabetes using

insulin, and is able to drive a CMV safely. Ms. Johnson meets the requirements of the vision standard at 49 CFR 391.41(b)(10). Her ophthalmologist examined her in 2009, and certified that she does not have diabetic retinopathy. She holds a Class B CDL from Arizona.

*Roger L. Kaufman*

Mr. Kaufman, 44, has had ITDM since 2009. His endocrinologist examined him in 2009 and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Kaufman meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009 and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Kentucky.

*Kenneth A. Leeker*

Mr. Leeker, 61, has had ITDM since 2008. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Leeker meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His ophthalmologist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Missouri.

*Paul L. Meier*

Mr. Meier, 33, has had ITDM since 2008. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Meier meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic

retinopathy. He holds a Class B CDL from Illinois.

*Clifford L. Rayl*

Mr. Rayl, 58, has had ITDM since 2004. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Rayl meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2008, and certified that he does not have diabetic retinopathy. He holds a Class an operator's license from Indiana.

*Robert J. Schafer*

Mr. Schafer, 57, has had ITDM since 2009. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Schafer meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Pennsylvania.

*Steven J. Shaw*

Mr. Shaw, 26, has had ITDM since 2005. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Shaw meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Idaho.

*Scott L. Stamstad*

Mr. Stamstad, 39, has had ITDM since 2008. His endocrinologist examined him in 2009, and certified that he has had no

hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Stamstad meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His ophthalmologist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class D operator's license from Wisconsin.

*Kendell R. Strassman*

Mr. Strassman, 31, has had ITDM since 2008. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Strassman meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His ophthalmologist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Wisconsin.

*Allan A. Vanderhamm*

Mr. Vanderhamm, 65, has had ITDM since 2008. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Vanderhamm meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Florida.

*Maurice L. Wedel*

Mr. Wedel, 38, has had ITDM since 2005. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function

that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Wedel meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Kansas.

*Michael R. Wellman*

Mr. Wellman, 66, has had ITDM since 2007. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Wellman meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His ophthalmologist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from Indiana.

*Thomas C. Wilson*

Mr. Wilson, 57, has had ITDM since 2004. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Wilson meets the requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2008, and certified that he does not have diabetic retinopathy. He holds a Class B CDL from Indiana.

*Wayne W. Zander*

Mr. Zander, 55, has had ITDM since 2009. His endocrinologist examined him in 2009, and certified that he has had no hypoglycemic reactions resulting in loss of consciousness, requiring the assistance of another person, or resulting in impaired cognitive function that occurred without warning in the past 5 years; understands diabetes management and monitoring; and has stable control of his diabetes using insulin, and is able to drive a CMV safely. Mr. Zander meets the

requirements of the vision standard at 49 CFR 391.41(b)(10). His optometrist examined him in 2009, and certified that he does not have diabetic retinopathy. He holds a Class A CDL from South Dakota.

#### Request for Comments

In accordance with 49 U.S.C. 31136(e) and 31315, FMCSA requests public comment from all interested persons on the exemption petitions described in this notice. We will consider all comments received before the close of business on the closing date indicated in the date section of the Notice.

FMCSA notes that Section 4129 of the Safe, Accountable, Flexible and Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) requires the Secretary to revise its diabetes exemption program established on September 3, 2003 (68 FR 52441).<sup>1</sup> The revision must provide for individual assessment of drivers with diabetes mellitus, and be consistent with the criteria described in section 4018 of the Transportation Equity Act for the 21st Century (49 U.S.C. 31305).

Section 4129 requires: (1) The elimination of the requirement for three years of experience operating CMVs while being treated with insulin; and (2) the establishment of a specified minimum period of insulin use to demonstrate stable control of diabetes before being allowed to operate a CMV.

In response to section 4129, FMCSA made immediate revisions to the diabetes exemption program established by the September 3, 2003 Notice. FMCSA discontinued use of the 3-year driving experience and fulfilled the requirements of section 4129 while continuing to ensure that operation of CMVs by drivers with ITDM will achieve the requisite level of safety required of all exemptions granted under 49 USC. 31136 (e).

Section 4129(d) also directed FMCSA to ensure that drivers of CMVs with ITDM are not held to a higher standard than other drivers, with the exception of limited operating, monitoring and medical requirements that are deemed medically necessary. FMCSA concluded that all of the operating, monitoring and medical requirements set out in the September 3, 2003 Notice, except as modified, were in compliance with section 4129(d). Therefore, all of the requirements set out in the September 3, 2003 Notice, except as modified by the Notice in the **Federal Register** on

November 8, 2005 (70 FR 67777), remain in effect.

Issued on: August 10, 2009.

**Larry W. Minor,**

*Associate Administrator for Policy and Program Development.*

[FR Doc. E9-19582 Filed 8-14-09; 8:45 am]

**BILLING CODE P**

## DEPARTMENT OF THE TREASURY

### Office of Thrift Supervision

#### Proposed Agency Information Collection Activities; Comment Request—Loan Application Register (HMDA)

**AGENCY:** Office of Thrift Supervision (OTS), Treasury.

**ACTION:** Notice and request for comment.

**SUMMARY:** The Department of the Treasury, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to comment on proposed and continuing information collections, as required by the Paperwork Reduction Act of 1995, 44 U.S.C. 3507. The Office of Thrift Supervision within the Department of the Treasury will submit the proposed information collection requirement described below to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. Today, OTS is soliciting public comments on its proposal to extend this information collection.

**DATES:** Submit written comments on or before October 16, 2009.

**ADDRESSES:** Send comments, referring to the collection by title of the proposal or by OMB approval number, to Information Collection Comments, Chief Counsel's Office, Office of Thrift Supervision, 1700 G Street, NW., Washington, DC 20552; send a facsimile transmission to (202) 906-6518; or send an e-mail to [infocollection.comments@ots.treas.gov](mailto:infocollection.comments@ots.treas.gov). OTS will post comments and the related index on the OTS Internet Site at <http://www.ots.treas.gov>. In addition, interested persons may inspect comments at the Public Reading Room, 1700 G Street, NW., by appointment. To make an appointment, call (202) 906-5922, send an e-mail to [public.info@ots.treas.gov](mailto:public.info@ots.treas.gov), or send a facsimile transmission to (202) 906-7755.

**FOR FURTHER INFORMATION CONTACT:** You can request additional information about this proposed information collection from Stacy E. Messett, Senior

Project Manager (202) 906-6241, Office of Thrift Supervision, 1700 G Street, NW., Washington, DC 20552.

#### SUPPLEMENTARY INFORMATION:

OTS may not conduct or sponsor an information collection, and respondents are not required to respond to an information collection, unless the information collection displays a currently valid OMB control number. As part of the approval process, we invite comments on the following information collection.

Comments should address one or more of the following points:

a. Whether the proposed collection of information is necessary for the proper performance of the functions of OTS;

b. The accuracy of OTS's estimate of the burden of the proposed information collection;

c. Ways to enhance the quality, utility, and clarity of the information to be collected;

d. Ways to minimize the burden of the information collection on respondents, including through the use of information technology.

We will summarize the comments that we receive and include them in the OTS request for OMB approval. All comments will become a matter of public record. In this notice, OTS is soliciting comments concerning the following information collection.

*Title of Proposal:* Loan Application Register (HMDA).

*OMB Number:* 1550-0021.

*Form Numbers:* N/A.

*Regulation requirement:* 12 CFR Part 203.

*Description:* The Home Mortgage Disclosure Act (HMDA), 12 U.S.C. 2801, requires this collection of information. In accordance with the HMDA, the Board of Governors of the Federal Reserve System (FRB) promulgates and administers HMDA regulations, which are prescribed as part of the FRB's Regulation C (12 CFR Part 203), implementing the HMDA (12 U.S.C. 2801-2810). HMDA forms as well as collection and recordkeeping requirements are approved under OMB Control No. 7100-0247. The FRB supporting statement forms the decisional basis for the OMB action. This submission discusses the burden imposed by Regulation C on the institutions OTS regulates.

The data on loan applications collected under HMDA assist OTS in analyzing lending patterns for possible discrimination. OTS examiners use the data to scope for compliance with the fair lending laws (Equal Credit Opportunity Act, Fair Housing Act, and OTS's Non-discrimination regulation),

<sup>1</sup> Section 4129(a) refers to the 2003 Notice as a "final rule." However, the 2003 Notice did not issue a "final rule" but did establish the procedures and standards for issuing exemptions for drivers with ITDM.