**SUPPLEMENTARY INFORMATION:** The notice of the Administrator's disaster declaration for the Commonwealth of Pennsylvania, dated 07/29/2021, is hereby amended to extend the deadline for filing applications for physical damages as a result of this disaster to 10/27/2021.

All other information in the original declaration remains unchanged.

(Catalog of Federal Domestic Assistance Number 59008)

#### Isabella Guzman,

Administrator.

[FR Doc. 2021-21108 Filed 9-28-21; 8:45 am]

BILLING CODE 8026-03-P

### SOCIAL SECURITY ADMINISTRATION

[Docket No: SSA-2021-0036]

### Agency Information Collection Activities: 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 revisions,

and one extension 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. Comments: https://www.reginfo.gov/ public/do/PRAMain. Submit your comments online referencing Docket ID Number [SSA-2021-0036].

(SSA), Social Security Administration, OLCA, Attn: Reports Clearance Director, 3100 West High Rise, 6401 Security Blvd., Baltimore, MD 21235. Fax: 410-966-2830. Email address: OR.Reports.Clearance@ssa.gov. Or you may submit your comments online through https://www.reginfo.gov/ public/do/PRAMain, referencing Docket ID Number [SSA-2021-0036].

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 October 29, 2021. Individuals can obtain copies of these OMB clearance packages by writing to OR.Reports.Clearance@ ssa.gov.

1. Application for Parent's Insurance Benefits-20 CFR 404.370, 404.371, 404.373, 404.374 & 404.601-404.603 0960-0012. Section 202(h) of the Social Security Act (Act) establishes the conditions of eligibility a claimant must meet to receive monthly benefits as a parent of a deceased worker who was contributing at least one-half of the parent's support at the time of the worker's death or when the worker became disabled. SSA uses information from Form SSA-7-F6, Application for Parent's Insurance Benefits, to determine if the claimant meets the eligibility and application criteria. The respondents are applicants filing for Parent's Insurance Benefits.

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-7-F6 (Paper)	4 325	1 1	15 15	1 81	*\$27.07 *27.07	**21	*** \$27 *** 5,279
Totals	329			82			*** 5,306

<sup>\*</sup>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#00-

0000).

\*\*We based this figure on averaging both the average FY 2021 wait times for field offices and teleservice centers, based on SSA's current management informa-

2. Employment Relationship Questionnaire-20 CFR 404.1007-0960-0040. When SSA needs information to determine a worker's employment status to maintain a worker's earning records, the agency uses Form SSA–7160, Employment

Relationship Questionnaire, to determine the existence of an employeremployee relationship. We use the information to develop the employment relationship; specifically, to determine whether a beneficiary is self-employed or an employee. The respondents are

individuals, households, businesses, and state or local governments seeking to establish their status as employees, and their alleged employers.

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-7160	45	1	25	19	* \$22.14	** 24	*** \$820

<sup>\*</sup>We based this figure on the average U.S. worker's hourly wages of \$27.07 (https://www.bls.gov/oes/current/oes\_nat.htm); the median hourly wage of \$21.10 for public sector Information and Records Clerks (https://www.bls.gov/oes/current/oes434199.htm); and the median hourly wage of \$18.25 for State and Local government Information and Records Clerks (https://www.bls.gov/oes/current/oes434199.htm), as reported by Bureau of Labor Statistics data. We used the average of these three wages to calculate the combined Average Theoretical Hourly Wage of \$22.14.

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

<sup>\*\*</sup> We based this figure on the average FY 2021 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 application.

3. Statement of Self-Employment Income—20 CFR 404.101, 404.110, & 404.1096—0960–0046. To qualify for insured status, and collect Social Security benefits, self-employed individuals must demonstrate they earned the minimum amount of self-employment income (SEI) in a current

year. SSA uses Form SSA-766, Statement of Self-Employment Income, to collect the information we need to determine if the individual earned at least the minimum amount of SEI needed for one or more quarters of coverage in the current year. Based on the information we obtain, we may credit additional quarters of coverage to give the individual insured status and expedite benefit payments. Respondents are self-employed individuals potentially eligible for Social Security benefits.

*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) *	Total annual opportunity cost (dollars) **
SSA-766	910	1	5	76	*\$27.07	** \$2,057

\*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#00-0000).

\*\*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.

4. Substitution of Party Upon Death of Claimant—20 CFR 404.957(c)(4) & 416.1457(c)(4)—0960–0288. A judge may dismiss a request for a hearing on a pending claim of a deceased individual for Social Security benefits or Supplemental Security Income (SSI) payments. Individuals who believe the dismissal may adversely affect them may complete Form HA–539, Notice

Regarding Substitution of Party Upon Death of Claimant, which allows them to request to become a substitute party for the deceased claimant. The judge and the hearing office support staff use the information from the HA–539 to: (1) Maintain a written record of request; (2) establish the relationship of the requester to the deceased claimant; (3) determine the substituted individual's

wishes regarding an oral hearing or decision on the record; and (4) admit the data into the claimant's official record as an exhibit. The respondents are individuals requesting to be substitute parties for a deceased claimant.

*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)*	Total annual opportunity cost (dollars) **
HA-539	4,000	1	5	333	*\$10.95	** \$3,646

\*We based this figure on the average DI payments based on SSA's current FY 2021 data (https://www.ssa.gov/legislation/2021FactSheet.pdf).

\*\*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.

5. Continuation of Supplemental Security Income Payments for the Temporarily Institutionalized— Certification of Period and Need to Maintain Home—20 CFR 416.212(b)(1)-0960-0516. When SSI recipients: (1) Enter a public institution; or (2) enter a private medical treatment facility with Medicaid paying more than 50 percent of expenses, SSA reduces recipients' SSI payments to a nominal sum. However, if this institutionalization is temporary (defined as a maximum of three months), SSA may waive the reduction. Before SSA can waive the SSI payment reduction, the agency must receive the

following documentation: (1) A physician's certification stating the SSI recipient will only be institutionalized for a maximum of three months; and (2) certification from the recipient, the recipient's family, or friends, confirming the recipient needs SSI payments to maintain the living arrangements to which the individual will return postinstitutionalization. To obtain this information, SSA employees contact the recipient (or a knowledgeable source) to collect the required physician's certification and the statement of need. SSA does not require any specific format for these items, so long as we obtain the necessary attestations. The

respondents are SSI recipients, their family or friends, as well as physicians or hospital staff members who treat the SSI recipient.

*Type of Request:* Revision of an OMB-approved information collection.

NOTE: We created a fillable PDF form to collect the same information as collected through the SSI Claims System screens. The new form, SSA–186, Temporary Institutionalization Statement to Maintain Household and Physician Certification, will make it easier for the recipients, representative payees, and institutions to obtain the statement of need and the physician's certification all on one standardized document.

Modality of completion	Number of respondents	Frequency of response (minutes)  Average burden per response (minutes)		Estimated total annual burden (hours)	Average theoretical hourly cost amount (dollars)*	Average wait time for teleservice centers (minutes) **	Total annual opportunity cost (dollars) ***
Statement from other Respondents Physician's Certifications	26,793 26,793	1 1	5 5	2,233 2,233	*\$10.95 *41.30	19** 0 **	*** \$117,351 92,223 ***
Totals	53,586			4,466			*** 209,574

<sup>\*</sup>We based these figures on the average DI payments based on SSA's current FY 2021 data (https://www.ssa.gov/legislation/2021FactSheet.pdf), and the average Healthcare Practitioners and Technical Occupations hourly wages, as reported by Bureau of Labor Statistics data (https://www.bls.gov/oes/current/oes290000.htm).

\*\*We based this figure on the average FY 2021 wait times for teleservice centers, based on SSA's current management information data.

6. Claimant Statement about Loan of Food or Shelter: Statement about Food or Shelter Provided to Another-20 CFR 416.1130-416.1148-0960-0529. SSA bases an SSI claimant's or recipient's eligibility on need, as measured by the amount of income an individual receives. Per our calculations, income includes other people providing in-kind support and maintenance in the form of

food and shelter to SSI applicants or recipients. SSA uses Forms SSA-5062, Claimant Statement about Loan of Food or Shelter, and SSA-L5063, Statement about Food or Shelter Provided to Another, to obtain statements about food or shelter provided to SSI claimants or recipients. SSA uses this information to determine whether the food or shelter are bona fide loans or

income for SSI purposes. This determination may affect claimants' or recipients' eligibility for SSI as well as the amounts of their SSI payments. The respondents are claimants and recipients for SSI payments, and individuals who provide loans of food or shelter to them.

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-5062—Paper Version	29,026	1	10	4,838	*\$19.01	** 24	*** \$312,676
SSA-L5063—Paper Version	29,026	1	10	4,838	* 19.01	** 24	*** 312,676
SSA-5062—SSI Claims System	29,026	1	10	4,838	* 19.01	** 24	*** 312,676
SSA-L5063—SSI Claims System	29,026	1	10	4,838	* 19.01	** 24	*** 312,676
Totals	116,104			19,352			*** 1,250,704

<sup>&#</sup>x27;SWe based this figure on averaging both the average DI payments based on SSA's current FY 2021 data (https://www.ssa.gov/legislation/2021FactSheet.pdf), and

7. Application for Circuit Court Law— 20 CFR 404.985 & 416.1485-0960-0581. Individuals claiming that an acquiescence ruling (AR) would change SSA's prior determination or decision must submit a written readjudication request with specific information. SSA reviews the information in the requests to determine if the issues stated in the

AR pertain to the claimant's case, and if the claimant is entitled to readjudication. If readjudication is appropriate, SSA considers the issues the AR covers. Any new determination or decision is subject to administrative or judicial review as specified in the regulations, and the claimants must provide information to request

readjudication. The respondents are claimants for Social Security benefits and SSI payments, who request a readjudication of their claim based on an AR notice.

Type of Request: Extension 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) *	Total annual opportunity cost (dollars) ***
AR-based readjudication requests	10,000	1	17	2,833	*\$10.95	** \$31,021

<sup>\*</sup>We based this figure on the average DI payments based on SSA's current FY 2021 data (https://www.ssa.gov/legislation/2021FactSheet.pdf). \*\* 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.

8. Social Security Administration Health IT Partner Program Assessment—Participating Facilities and Available Content Form—20 CFR 404.1614 & 416.1014-0960-0798. The Health Information Technology for

Economic and Clinical Health (HITECH) Act promotes the adoption and meaningful use of health information technology (IT), particularly in the context of working with government agencies. Similarly, section 3004 of the

Public Health Service Act requires health care providers or health insurance issuers with government contracts to implement, acquire, or upgrade their health IT systems and products to meet adopted standards and

<sup>\*\*\*</sup>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.

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 the average FY 2021 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 application.

implementation specifications. To support expansion of SSA's health IT initiative as defined under HITECH, SSA developed Form SSA-680, the Health IT Partner Program Assessment—Participating Facilities and Available Content Form. The SSA-680 allows healthcare providers to provide the information SSA needs to determine their ability to exchange

health information with the agency electronically. We evaluate potential partners (healthcare providers and organizations) on: (1) The accessibility of health information they possess; and (2) the content value of their electronic health records' systems for our disability adjudication processes. SSA reviews the completeness of organizations' SSA-680 responses as

one part of our careful analysis of their readiness to enter into a health IT partnership with us. The respondents are healthcare providers and organizations exchanging information with the agency.

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) *	Total annual opportunity cost (dollars) **
SSA-680	30	1	300	150	*\$41.30	** \$6,195

\*We based this figures on average Healthcare Practitioners and Technical Occupations, as reported by Bureau of Labor Statistics data.

(https://www.bls.gov/oes/current/oes\_nat.htm#00-0000).

\*\*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.

- 9. Authorization for the Social Security Administration to Obtain Personal Information—20 CFR 404.704, 404.820 404.823, 404.1926, 416.203, & 418.3001-0960-0801. SSA uses Form SSA-8510, Authorization for the Social Security Administration to Obtain Personal Information, to contact a public or private custodian of records on behalf of an applicant or recipient of an SSA program to request evidence information or proofs, which may support a benefit application or payment continuation. SSA also uses this form to obtain evidence or proofs to determine the claimant's payment amount. We ask for information such as the following:
- Age requirements (e.g., birth certificate, court documents)

- Insured status (e.g., earnings, employer verification)
  - Marriage or divorce
  - Pension offsets
- Wages verification
- Annuities
- Dividends, royalties, or other similar payments
- Property information
- Benefit verification from a State agency or third party
  - Immigration status (rare instances)
- Income verification from public agencies or private individuals
- Unemployment benefits
- Insurance policies
- Alimony or Child Support

If the custodian of the records requires a signed authorization from the individual(s) whose information SSA requests, SSA may provide the

custodian with a copy of the SSA-8510. Once the respondent completes the SSA-8510, either using the paper form or using the Personal Information Authorization Intranet version, SSA uses the form as the authorization to obtain personal information regarding the respondent from third parties until the authorizing person (respondent) withdraws their claim or revokes the permission of its use. The collection is voluntary; however, failure to verify the individuals' eligibility can prevent SSA from making an accurate and timely decision for their benefits. The respondents are individuals who may file for, or currently receive, Social Security benefits, SSI payments, or Medicare Part D subsidies.

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) ***
Paper SSA-8510 for general evidence purposes  Personal Information Authorization Intranet Screens for general evidence purposes	8,226	1	5	686	*\$19.01	** 24	*** \$75,584
(SSI Claims System)	192,235	1	5	16,020	* 19.01	** 24	*** 1,766,295
Totals	200,461			16,706			*** 1,841,879

We based this figure on averaging both the average DI payments based on SSA's current FY 2021 data (https://www.ssa.gov/legislation/2021FactSheet.pdf), and

Dated: September 24, 2021.

Naomi Sipple,

Reports Clearance Officer, Social Security Administration.

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 the average FY 2021 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 application.

[FR Doc. 2021–21141 Filed 9–28–21; 8:45 am] BILLING CODE 4191–02–P

# OFFICE OF THE UNITED STATES TRADE REPRESENTATIVE

Notice of Product Exclusion Extensions: China's Acts, Policies, and Practices Related to Technology Transfer, Intellectual Property, and Innovation

**AGENCY:** Office of the United States Trade Representative (USTR).

**ACTION:** Notice.

**SUMMARY:** In prior notices, the U.S. Trade Representative modified the action in the Section 301 investigation of China's acts, policies, and practices related to technology transfer, intellectual property, and innovation by excluding from additional duties certain medical-care products needed to address the COVID-19 pandemic. These exclusions are scheduled to expire on September 30, 2021. On August 27, 2021, USTR requested comments on whether to extend these exclusions for up to six months. This notice announces the U.S. Trade Representative's determination to adopt an interim extension of these exclusions for 45 days in order to provide time to review the public comments.

DATES: The extensions announced in this notice will extend the product exclusions through November 14, 2021. FOR FURTHER INFORMATION CONTACT: For general questions about this notice, contact Associate General Counsel Philip Butler or Assistant General Counsel David Salkeld at (202) 395–5725. For specific questions on customs classification or implementation of the product exclusions, contact traderemedy@cbp.dhs.gov.

### SUPPLEMENTARY INFORMATION:

### A. Background

On December 29, 2020, USTR announced the extension of 80 product exclusions on medical-care and/or COVID response products; further modifications in the form of 19 product exclusions, to remove Section 301 duties from additional medical-care and/or COVID response products; and that USTR might consider further extensions and/or modifications as appropriate. See 85 FR 85831 (the December 29 notice). On March 10, 2021, USTR announced the extension of these 99 exclusions until September 30, 2021, and that USTR might consider further extensions and/or modifications as appropriate. 86 FR 13785 (the March 10 notice).

On August 27, 2021, USTR published a **Federal Register** notice requesting public comments on whether any of these 99 exclusions should be further extended for up to six months. 86 FR 48280 (the August 27 notice). Pursuant to that notice, USTR will collect comments through its comment portal until September 27, 2021.

## B. Interim Extension of COVID Exclusions

To provide time for USTR to review the comments it receives in response to the August 27 notice, the U.S. Trade Representative has determined to adopt an interim extension of these exclusions for 45 days. Accordingly, pursuant to sections 301(b), 301(c), and 307(a) of the Trade Act of 1974, as amended, the U.S. Trade Representative has determined to extend the 99 product exclusions described in the December 29 and March 10 notices through November 14, 2021. This change is described in the Annex to this notice. The U.S. Trade Representative's decision to adopt an interim extension considers public comments previously provided, as well as advice of advisory committees and the interagency Section 301 Committee.

As provided in the December 29 and March 10 notices, the exclusions are available for any product that meets the description in the product exclusion. The U.S. Trade Representative may continue to consider further extensions and/or additional modifications as appropriate. U.S. Customs and Border Protection will issue instructions on entry guidance and implementation.

### Annex

Effective with respect to goods entered for consumption, or withdrawn from warehouse for consumption, on or after 12:01 a.m. eastern daylight time on October 1, 2021, and before 11:59 p.m. eastern standard time on November 14, 2021, each of the article descriptions of headings 9903.88.62, 9903.88.63, 9903.88.64 and 9903.88.65 of the Harmonized Tariff Schedule of the United States are modified by deleting "September 30, 2021," and by inserting "November 14, 2021," in lieu thereof.

### Greta Peisch,

General Counsel, Office of the United States Trade Representative.

[FR Doc. 2021-21180 Filed 9-28-21; 8:45 am]

BILLING CODE 3290-F1-P

### **DEPARTMENT OF TRANSPORTATION**

### **Federal Aviation Administration**

Notice of Intent of Waiver With Respect to Land; Brookings Regional Airport

**AGENCY:** Federal Aviation Administration (FAA), DOT.

**ACTION:** Notice.

**SUMMARY:** The FAA is considering a proposal to change 1.44 acres of airport land from aeronautical use to nonaeronautical use and to authorize the sale of airport property located at Brookings Regional Airport, Brookings, South Dakota. The aforementioned land is not needed for aeronautical use. The property is located approximately 6 miles south east of the airport, on the north side of 217th Street between 475th Ave. and 476th Ave., just east of the grove of trees. There was an FAA-owned outer marker located on the subject property, but the outer marker was abandoned when the runway it was serving was relocated and re-aligned. Currently the land is being used for agriculture and does not have an aeronautical use. The land will continue to be used for agriculture.

**DATES:** Comments must be received on or before October 29, 2021.

ADDRESSES: Documents are available for review by appointment at the FAA Dakota-Minnesota Airports District Office, Mr. Dave Anderson, Deputy Manager, 2301 University Drive, Building 23B, Bismarck, ND, 58504, Telephone: (701) 323–7380/Fax: (701) 323–7399 and Ms. Jackie Lanning, City Engineer, Brookings, SD, 520 3rd. Street, Suite 140, Brookings, SD 57006, (605) 692–6629.

Written comments on the Sponsor's request must be delivered or mailed to: Mr. Dave Anderson, Deputy Manager, Federal Aviation Administration, Dakota-Minnesota Airports District Office, 2301 University Drive, Bld. 23B, Bismarck, ND, Telephone Number: (701) 323–7380/FAX Number: (701) 323–7399.

FOR FURTHER INFORMATION CONTACT: Mr. Dave Anderson, Deputy Manager, Federal Aviation Administration, Dakota-Minnesota Airports District Office, 2301 University Drive, Bld. 23B, Bismarck, ND 58504. Telephone Number: (701) 323–7380/FAX Number: (701) 323–7399.

SUPPLEMENTARY INFORMATION: In accordance with section 47107(h) of Title 49, United States Code, this notice is required to be published in the Federal Register 30 days before modifying the land-use assurance that