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under	ial Exposure Cohort Petition the Energy Employees Occupational Compensation Act		RCVD -	Centers for Diseas	nd Human Services se Control and Prevention pational Safety and Health
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Spec	ial Exposure Cohort Petition	— Form A			Page 1 of 2
	In	structions on Comp	leting this Forn	1:	
	should use this petition form on reconstruction needed for you		ted to you in wri	ting that it cann	ot complete the
All ot	her petitioners should use Peti	tion Form B to submit	a petition to NIC	SH.	
toll-fr	urther Information: If you have one phone number and request to ort about an SEC petition: 1-877	o speak to someone in			_
Α	NIOSH Claim Information -	– Complete as much	information as	you can in Se	ection A.
A.1	NIOSH Tracking Number (indicated on all NIOSH correspondence):				
A.2	Print Name of Energy Emp	loyee for whom this	claim was filed	l:	
	First Name	Middle	e Initial	Last Na	ame
A.3	Social Security Number of	Energy Employee fo	or whom this cl	aim was filed:	
В	Signature of Person Subm	itting this Petition —	Complete Sec	tion B.	
	Print and sign your name below to indicate that you are petitioning for HHS to consider adding a class				

of employees to the Special Exposure Cohort that would include the employee indicated by the tracking number or name under entry 1 above.

Print your name below: First Name Middle Initial Last Name Sign your name below: First Name Middle Initial Last Name

Please send this form to NIOSH at the address below.

Once NIOSH receives this form, the U.S. Department of Health and Human Services will consider adding a class of employees to the Special Exposure Cohort. Your contact at NIOSH will be available to inform you of the progress of your petition.

Send this form to:

SEC Petition

Office of Compensation Analysis and Support

NIOSH

4676 Columbia Parkway, MS-C-47

Cincinnati, OH 45226

Special Exposure Cohort Petition

under the Energy Employees Occupational Illness Compensation Act

U.S. Department of Health and Human Services

Centers for Disease Control and Prevention National Institute for Occupational Safety and Health

OMB Number: 0920-0639

Expires: 07/31/2010
Page 2 of 2

Special Exposure Cohort Petition — Form A

Public Burden Statement

Public reporting burden for this collection of information is estimated to average 3 minutes per response, including time for reviewing instructions, gathering the information needed, and completing the form. If you have any comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, send them to CDC Reports Clearance Officer, 1600 Clifton Road, MS-E-11, Atlanta GA, 30333; ATTN:PRA 0920-0639. Do not send the completed petition form to this address. Completed petitions are to be submitted to NIOSH at the address provided in these instructions. Persons are not required to respond to the information collected on this form unless it displays a currently valid OMB number.

Privacy Act Advisement

In accordance with the Privacy Act of 1974, as amended (5 U.S.C. § 552a), you are hereby notified of the following:

The Energy Employees Occupational Illness Compensation Program Act (42 U.S.C. §§ 7384-7385) (EEOICPA) authorizes the President to designate additional classes of employees to be included in the Special Exposure Cohort (SEC). EEOICPA authorizes HHS to implement its responsibilities with the assistance of the National Institute for Occupational Safety (NIOSH), an Institute of the Centers for Disease Control and Prevention. Information obtained by NIOSH in connection with petitions for including additional classes of employees in the SEC will be used to evaluate the petition and report findings to the Advisory Board on Radiation and Worker Health and HHS.

Records containing identifiable information become part of an existing NIOSH system of records under the Privacy Act, 09-20-147 "Occupational Health Epidemiological Studies and EEOICPA Program Records. HHS/CDC/NIOSH." These records are treated in a confidential manner, unless otherwise compelled by law. Disclosures that NIOSH may need to make for the processing of your petition or other purposes are listed below.

NIOSH may need to disclose personal identifying information to: (a) the Department of Energy, other federal agencies, other government or private entities and to private sector employers to permit these entities to retrieve records required by NIOSH; (b) identified witnesses as designated by NIOSH so that these individuals can provide information to assist with the evaluation of SEC petitions; (c) contractors assisting NIOSH; (d) collaborating researchers, under certain limited circumstances to conduct further investigations; (e) Federal, state and local agencies for law enforcement purposes; and (f) a Member of Congress or a Congressional staff member in response to a verified inquiry.

This notice applies to all forms and informational requests that you may receive from NIOSH in connection with the evaluation of an SEC petition.

Use of the NIOSH petition forms (A and B) is voluntary but your provision of information required by these forms is mandatory for the consideration of a petition, as specified under 42 CFR Part 83. Petitions that fail to provide required information may not be considered by HHS.

OFFICIAL BUSINESS Penalty for Private Use \$300

RCVD

BUSINESS REPLY MAIL

ATTN: OCAS J. KI WWALL STOP C- 46 DHHS PHS CDC FIRST CLASS MAIL PERMIT NO. 99110 ATLANTA, GA 30333 Postage Will Be Paid by Department of Health and Human Services

NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY & HEALTH

CINCINNATI OH 45226-9987 4676 COLUMBIA PARKWAY ROBERT A TAFT LABORATORIES