

states must have the authority to impose an administrative penalty that is “adequate to ensure compliance.” EPA has determined that the APA requirements were adopted into the California Health and Safety Code (HSC) Section 116650 in a manner that California’s statute is comparable to and no less stringent than the federal requirements. EPA has also determined that California’s program revision request meets all of the regulatory requirements for approval, as set forth in 40 CFR 142.12, including a side-by-side comparison of the federal requirements demonstrating the corresponding state authorities, a review of the requirements contained in 40 CFR 142.10 necessary for states to attain and retain primary enforcement responsibility, and a statement by the California Attorney General certifying that California’s laws and regulations to carry out the program revisions were duly adopted and are enforceable. The Attorney General’s statement also affirms that there are no environmental audit privilege and immunity laws that would impact California’s ability to implement or enforce the California laws and regulations pertaining to the program revision. Therefore, EPA approves this revision of California’s approved State primacy program. The Technical Support Document, which provides EPA’s analysis of California’s program revision request, is available by email by submitting a request to the following email address: *R9dw-program@epa.gov*. Please note “Technical Support Document” in the subject line of the email.

Public Process. Any interested person may request a public hearing on this determination. A request for a public hearing must be received before December 30, 2021 and addressed to the Regional Administrator of EPA Region 9, via the following email address: *R9dw-program@epa.gov* or contact the EPA Region 9 contact person listed above in this notice by telephone if you do not have access to email. Please note “State Program Revision Determination” in the subject line of the email. The Regional Administrator may deny frivolous or insubstantial requests for a hearing. If a timely request for a public hearing is made, then EPA Region 9 may hold a public hearing. Any request for a public hearing shall include the following information: 1. The name, address, and telephone number of the individual, organization, or other entity requesting a hearing; 2. A brief statement of the requesting person’s interest in the Regional Administrator’s determination and a brief statement of

the information that the requesting person intends to submit at such hearing; and 3. The signature of the individual making the request, or, if the request is made on behalf of an organization or other entity, the signature of a responsible official of the organization or other entity.

If EPA Region 9 does not receive a timely and appropriate request for a hearing or a request for a hearing was denied by the Regional Administrator for being frivolous or insubstantial, and the Regional Administrator does not elect to hold a hearing on her own motion, EPA’s approval shall become final and effective on December 30, 2021, and no further public notice will be issued.

Authority: Section 1413 of the Safe Drinking Water Act, as amended, 42 U.S.C. 300g–2 (1996), and 40 CFR part 142 of the National Primary Drinking Water Regulations.

Dated: November 8, 2021.

Elizabeth Adams,

Acting Regional Administrator, EPA Region 9.

[FR Doc. 2021–25965 Filed 11–29–21; 8:45 am]

BILLING CODE 6560–50–P

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices; Acquisitions of Shares of a Bank or Bank Holding Company

The notificants listed below have applied under the Change in Bank Control Act (Act) (12 U.S.C. 1817(j)) and § 225.41 of the Board’s Regulation Y (12 CFR 225.41) to acquire shares of a bank or bank holding company. The factors that are considered in acting on the applications are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board’s Freedom of Information Office at <https://www.federalreserve.gov/foia/request.htm>. Interested persons may express their views in writing on the standards enumerated in paragraph 7 of the Act.

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E.

Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington, DC 20551–0001, not later than December 15, 2021.

A. Federal Reserve Bank of Kansas City (Jeffrey Imgarten, Assistant Vice President) 1 Memorial Drive, Kansas City, Missouri 64198–0001:

1. *The Michael J. Klaassen Revocable Trust and Carol S. Klaassen Family Trust, Michael Klaassen, as trustee, all of Wichita, Kansas;* to join the Klaassen Family Group, a group acting in concert, to retain voting shares of Chisholm Trail Financial Corporation, and thereby indirectly retain voting shares of Stryv Bank, both of Wichita, Kansas.

Additionally, The Michael J. Klaassen Qualified Subchapter S Trust, Michael Klaassen, as trustee, both of Wichita, Kansas; Linda J. Klaassen Revocable Trust, Linda Klaassen, as trustee, Kourt Klaassen, Derek Ryan Klaassen, and Brent Klaassen, all of Whitewater, Kansas; Trevor J. Klaassen, Oklahoma City, Oklahoma; and Mitchell R. Klaassen, Frisco, Texas; to join the Klaassen Family Group to acquire voting shares of Chisholm Trail Financial Corporation, and thereby indirectly acquire voting shares of Stryv Bank.

Board of Governors of the Federal Reserve System, November 24, 2021.

Michele Taylor Fennell,

Deputy Associate Secretary of the Board.

[FR Doc. 2021–26061 Filed 11–29–21; 8:45 am]

BILLING CODE 6210–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket Number NIOSH 345]

National Institute for Occupational Safety and Health Tribal Consultation Session

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of meeting and request for testimony.

SUMMARY: The National Institute for Occupational Safety and Health (NIOSH), within the Centers for Disease Control and Prevention (CDC) announces a CDC Tribal Consultation Session. CDC will host American Indian and Alaska Native (AI/AN) Federally Recognized Tribes for a virtual tribal consultation session on the NIOSH draft strategic plan entitled *American Indian and Alaska Native Worker Safety and*

Health Strategic Plan. The proceedings will be open to the public.

DATES: The tribal consultation will be held February 3, 2022, from 4:15 p.m. to 6:00 p.m., EST.

NIOSH will accept written tribal testimony until 5:00 p.m., EST, on February 24, 2022.

ADDRESSES: Written tribal testimony should be submitted by either of the following ways:

- *By Email:* niocindocket@cdc.gov; or
- *By Mail:* Sherri Diana, NIOSH Docket Office, 1090 Tusculum Avenue, MS C-34, Cincinnati, Ohio 45226-1998.

Instructions: All submissions must include Tribal affiliation and Docket number (NIOSH 345). All relevant comments, including any personal information provided, will be posted without change.

FOR FURTHER INFORMATION CONTACT:

David Caruso, National Institute for Occupational Safety and Health (NIOSH), Western States Division, P.O. Box 25226, Denver, Colorado 80225-0226; Telephone: (303) 236-5909 (this is not a toll-free number); Email: DCaruso@cdc.gov; or Elizabeth Dalsey, NIOSH Western State Division, P.O. Box 25226, Denver, Colorado 80225-0226; Telephone: (303) 236-5955 (this is not a toll-free number); Email: EDalsey@cdc.gov.

SUPPLEMENTARY INFORMATION:

Public Participation

Federally Recognized Indian Tribes represented by the Tribal President, Tribal Chair, or Tribal Governor, or an elected or appointed Tribal Leader, or their authorized representative(s) may participate in this consultation by submitting written views, opinions, recommendations, and data. Testimony may be submitted on any topic related to this draft strategic plan. Testimony received, including attachments and other supporting materials, are part of the public record and subject to public disclosure. Do not include any information in your testimony or supporting materials you consider confidential or inappropriate for public disclosure. If you include your name, contact information, or other information that identifies you in the body of your testimony, that information will be on public display. NIOSH will review all submissions and may choose to redact, or withhold, submissions containing private or proprietary information such as Social Security numbers, medical information, inappropriate language, or duplicate/near duplicate examples of a mass-mail campaign. NIOSH will carefully

consider all testimony submitted into the docket.

Oral Tribal Testimony: Based on the number of participants giving testimony and the time available, it may be necessary to limit the time for each presenter. We will adjourn the tribal consultation meeting early if all attendees who requested to provide oral testimony in advance of and during the consultation have delivered their testimony.

Written Tribal Testimony: Written testimony will be accepted per the instructions provided in the **ADDRESSES** section above. Written testimony received in advance of the meeting will be included in the official record of the meeting. The consultation meeting will be recorded, transcribed, and posted without change to <https://www.cdc.gov/niosh/docket/>, including any personal information provided.

This meeting is being held in accordance with Presidential Executive Order No. 13175, November 6, 2000, and the Presidential Memorandum of November 5, 2009, and September 23, 2004, Consultation and Coordination with Indian Tribal Government and CDC/ATSDR's Tribal Consultation Policy which can be found at <https://www.cdc.gov/tribal/documents/consultation/policy475.pdf>.

Purpose: The purpose of the consultation meeting is to advance NIOSH's support for, and collaboration with, federally recognized American Indian and Alaska Native (AI/AN) tribes, and to improve the health of AI/AN tribal nations by pursuing research and outreach activities to prevent injuries, illnesses, and fatalities to AI/AN workers. To advance these goals, CDC conducts government-to-government consultations with Indian Tribes represented by the Tribal President, Tribal Chair, or Tribal Governor, or an elected or appointed Tribal Leader, or their authorized representative(s) to the extent practicable and permitted by law before CDC takes any action that will significantly affect Indian Tribes. Consultation is an enhanced form of communication that emphasizes trust, respect, and shared responsibility. It is an open and free exchange of information and opinion among parties that leads to mutual understanding.

Matters To Be Considered: NIOSH is hosting this meeting to receive input from federally recognized tribes on the development of an American Indian and Alaska Native Worker Safety and Health Strategic Plan. AI/AN workers account for 2.7 million or 1.8% of the total U.S. workforce. These workers are employed in a wide variety of occupations, with

the highest numbers in office and administrative support, sales and related occupations, management, transportation, and food preparation and services. Tribes are often the largest employer on tribal lands. Many AI/AN workers are also employed through tribal enterprises such as medical care, housing, manufactured products, food production, livestock production, and tourism. National data on occupational injuries, illnesses, and fatalities among AI/AN workers are scarce, and there is limited research on worker safety, health, and well-being in tribal communities. Given the lack of systematic data collection, the true numbers of occupational injuries, illnesses, and fatalities are likely much higher. NIOSH is proposing research and outreach activities to enhance worker safety and health in tribal communities and requests input on the draft *American Indian and Alaska Native Worker Safety and Health Strategic Plan, 2022-2031*. Agenda items are subject to change as priorities dictate.

Meeting Information: Zoom Virtual Tribal Consultation. If you wish to attend the virtual consultation session, please register by accessing the CDC web page at: <https://cdc.zoomgov.com/meeting/register/vJItdeipqzIvGgMKRWjU6mOJfMiRxs3dggw>. Instructions to access the Zoom virtual consultation will be provided in the link following registration. All elected tribal officials are encouraged to submit written tribal testimony by mail, or email. Additional information about CDC/ATSDR's Tribal Consultation Policy can be found at <https://www.cdc.gov/tribal/consultation-support/tribal-consultation/sessions.html>.

The Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities.

John J. Howard,

Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.

[FR Doc. 2021-26016 Filed 11-29-21; 8:45 am]

BILLING CODE 4163-18-P