FOR FURTHER INFORMATION CONTACT: Aydin Örstan, Center for Food Safety and Applied Nutrition (HFS–215), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202–418–3076.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sec. 721(d)(1) (21 U.S.C. 379e(d)(1))), notice is given that a color additive petition (CAP 8C0257) has been filed by EM Industries, Inc., 7 Skyline Dr., Hawthorne, NY 10532. The petition proposes to amend the color additive regulations to provide for the safe use of synthetic iron oxide to color ingested drugs at levels higher than the current limit and to provide for the safe use of mica to color ingested drugs.

The agency has determined under 21 CFR 25.32(r) that this action is of a type that does not individually or cumulatively have a significant effect on the human environment. Therefore, neither an environmental assessment nor an environmental impact statement is required.

Dated: June 10, 1998.

Laura M. Tarantino,

Acting Director, Office of Premarket Approval, Center for Food Safety and Applied Nutrition.

[FR Doc. 98–16504 Filed 6–19–98; 8:45 am]

BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food And Drug Administration

[Docket No. 98F–0432]

Ticona; Filing of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that Ticona has filed a petition proposing that the food additive regulations be amended to provide for the safe use of chromium oxide green, Cr_2O_3 (C.I. Pigment Green 17) as a colorant for polymers intended for use in contact with food.

FOR FURTHER INFORMATION CONTACT: Vir D. Anand, Center for Food Safety and Applied Nutrition (HFS–215), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202–418–3081.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sec. 409(b)(5) (21 U.S.C. 348(b)(5))), notice is given that a food additive petition (FAP 8B4603) has been filed by Ticona, c/o Keller and Heckman, 1001 G St. NW., suite 500 West, Washington, DC 20001. The petition proposes to amend the food additive regulations to provide for the safe use of chromium oxide green, Cr_2O_3 (C.I. Pigment Green 17) as a colorant for polymers intended for use in contact with food. The agency has determined under 21 CFR 25.32(i) that this action is of the type that does not individually or cumulatively have a significant effect on the human environment. Therefore, neither an environmental assessment nor an environmental impact statement is required.

Dated: June 4, 1998.

Laura M. Tarantino,

Acting Director, Office of Premarket Approval, Center for Food Safety and Applied Nutrition.

[FR Doc. 98–16505 Filed 6–19–98; 8:45 am]

BILLING CODE 4160–01–F

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2) (A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104–13), the Health Resources and Services Administration (HRSA) will publish periodic summaries of proposed projects being developed for submission to the Office of Management and Budget under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans, call the HRSA Reports Clearance Officer on (301) 443–1129.

Comments are invited on: (a) whether the proposed collection of information is necessary for the proper performance of the functions of the Agency, including whether the information shall have practical utility; (b) the accuracy of the Agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including the use of automated collection techniques or other forms of information technology.

Proposed Project: Application for NHSC Recruitment and Retention Assistance and Waiver of NHSC Site Bill—(in use Without Approval)

The National Health Service Corps (NHSC) of the HRSA's Bureau of Primary Health Care, assists underserved communities through the development, recruitment, and retention of primary health care clinicians dedicated to serving people in health professional shortage areas.

The Application for NHSC Recruitment and Retention Assistance submitted by sites or clinicians requests information on the practice site, sponsoring agency, recruitment contact, staffing levels, service users, site's 5-year infant mortality or low birth rate averages, and next nearest site. Assistance in completing the application may be obtained through the appropriate State Primary Care Offices, State Primary Care Associations and HRSA field offices. A form requesting a waiver of the NHSC site bill for a calendar year may be requested at the same time. The information on the application is used for determining eligibility of sites and to verify the need for NHSC providers. Sites must submit applications annually or when they need a provider. The request for a waiver is used to suspend the educational and loan repayment costs of NHSC providers.

Estimates of annualized reporting burden are as follows:

Type of report	Number of respondents	Hours per response	Total burden hour
Application	1,000	.75	750
Waiver	738	4	2,952
Total	1,000		3,702

Send comments to HRSA Reports Clearance Officer, Room 14–36, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: June 15, 1998.

Jane Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 98–16452 Filed 6–19–98; 8:45 am]

BILLING CODE 4160–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; Substance Abuse Treatment Study

SUMMARY: Under the provisions of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the National Institute on Alcohol Abuse and Alcoholism (NIAAA), National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below.

This proposed information collection was previously in the **Federal Register** on October 27, 1997, and allowed 60 days for public comment. There were no requests for additional information about this data collection activity, no public comments were received. The purpose of this notice is to allow an additional 30 days for public comment.

The NIH may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after December 31, 1999, unless it displays a currently valid OMB control number.

Proposed Collection: Title: Substance Abuse Treatment Study. *Type of Information Collection Request:* New. *Need and Use of Information Collection:* The information proposed for collection in this study will be used by the NIAAA to observe group treatment at up to 20 treatment facilities. At each facility, directors will be asked to provide information about treatment practices and about the client population. At each facility at least seven members of the treatment staff will be asked to provide information about their treatment activities, personal experiences and training. At each facility eight treatment groups will be observed. The group leader will be asked to complete a questionnaire about the observed session and other client demographics. At least seven group members will also be asked to complete a questionnaire about the observed group session. The target population for the study is a group of outpatient public and private providers that will include group treatment as part of their overall plan of clinical therapeutics.

The specific aim of this study is the testing of instruments and methodologies for the systematic measurement of the content, process, and context of group treatment.

Frequency of Response: On occasion. *Affected Public:* Individuals. *Type of Respondents:* American adults. *Estimated Number of Respondents:* 1440. *Estimated Number of Responses per Respondent:* 1. *Average Burden Hours per Response:* .3465. *And Estimated Total Annual Burden Hours Requested:* 449. *The annualized cost to respondents is estimated at:* $5,676. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

The annual burden estimates are as follows:

Type and number of respondents	Responses per respondent	Total responses	Hours	Total hours
Facility Director—20	1	20	.75	15
Group Leader—80	2	160	.334	55
Treatment Staff—140	1	140	.334	48
Group Member—560	2	1120	.334	381
Total Number of Respondents	.....	1440	.....	.....
Total Number of Responses	.....	1440	.....	.....
Total Hours	.....	499	.....	.....

Request for Comments: Comments are invited on: (a) whether the proposed collection is necessary, including whether the information has practical use; (b) ways to enhance the clarity, quality, and use of the information to be collected; (c) the accuracy of the agency estimate of burden of the proposed collection; and (d) ways to minimize the collection burden of the respondents. Send written comments to Dr. Margaret Mattson, Treatment Research Branch, Division of Clinical and Prevention Research (DCPR), NIAAA, NIH, Willco Bldg., Suite 505, 6000 Executive Blvd., Bethesda, Maryland 20892–7003.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, D.C. 20503, Attention: Desk Officer for NIH.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans, contact Dr. Margaret Mattson, Treatment Research Branch, Division of Clinical and Prevention Research, NIAAA, NIH, Willco Bldg., Suite 505, 6000 Executive Blvd., Bethesda, Maryland 20892–7003, or call non-toll-free number (301) 443–0638.

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received on or before July 22, 1998.

Dated: April 6, 1998.

Martin K. Trusty,

Executive Officer, NIAAA.

[FR Doc. 98–16424 Filed 6–19–98; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; American Stop Smoking Intervention Study for Cancer Prevention (ASSIST) Final Evaluation: ''Tobacco use Supplement to the 1998–1999 Current Population Survey''

SUMMARY: Under the provisions of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the National Cancer Institute (NCI), the National