period beginning the year before the divestiture. Staff estimates that the burden on each participant to provide this information will be 4 hours, for a total of 348 hours (51 buyers + 36 respondents = 87, 87 x 4 = 348). The total cumulative burden of the document production and chart completion will be 522 hours (174+348).

The estimated total burden for the entire study is therefore calculated to be 825 hours (303+522), which has been rounded to 1,000 hours to allow for small additions such as interviews with and follow-up document requests of subsequent buyers.

Estimate of information collection annual labor cost burden: $75,000.

It is difficult to calculate reliably the costs associated with this information collection, as they entail varying compensation levels of executives, management, and/or support staff among many companies and various industries. Individuals among some or all of those labor categories may be involved in the information collection process. Nonetheless, assuming that responses to interviews, the questionnaire, and the document request are handled by executive and mid-management level personnel alone, and applying a blended average hourly compensation rate of $75/hour for their labor, the total cost should not exceed $75,000 (based on the upward rounding of estimated total hourly burden for the study).

Estimate of information collection annual capital and operating cost burden: None.

The data for the study are being collected in two principal ways. Staff is conducting telephone interviews and asking respondents and buyers to respond to brief questionnaires and produce existing documents. None of these means of collecting information requires any capital expenditure. Interviews solely involve respondents and buyers making available one or more company officials for approximately 1½ hours. The questionnaires and document requests seek only information that the respondents and buyers maintain in the ordinary and usual course of their business. No additional cost burden is imposed.

Debra A. Valentine,
General Counsel.
[FR Doc. 98–20298 Filed 7–29–98; 8:45 am]
BILLING CODE 6750–01–M

GENERAL SERVICES ADMINISTRATION

Fleet Management Division; Cancellation of Standard Forms

AGENCY: Federal Supply Service, General Services Administration.

ACTION: Notice.

SUMMARY: This notice announces the General Services Administration’s intent to cancel the following Standard forms:


Both of these forms were replaced with a bank credit card.


FOR FURTHER INFORMATION CONTACT: Mr. William Webster, Environmental and Legislation Branch (703) 305±6276. This contact is for information on the new fleet services credit card only.


Barbara M. Williams,
Deputy Standard and Optional Forms Management Officer.
[FR Doc. 98–20334 Filed 7–29–98; 8:45 am]
BILLING CODE 6820–34–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

President’s Committee on Mental Retardation; Meeting

AGENCY: President’s Committee on Mental Retardation.

TIME AND DATE: August 28, 1998, 8 a.m.–2 p.m.

PLACE: Renaissance Mayflower Hotel, 1127 Connecticut Avenue, NW., Washington, DC. 20036.

STATUS: Full Committee Meetings are open to the public. An interpreter for the deaf will be available upon advance request. All meeting sites are barrier free.

MATTERS TO BE CONSIDERED: The Committee plans to discuss critical issues concerning Federal Policy, Federal Research and Demonstration, State Policy Collaboration, Minority and Cultural Diversity and Mission and Public Awareness, relating to individuals with mental retardation.

The PCMR acts in an advisory capacity to the President and the Secretary of the U.S. Department of Health and Human Services on a broad range of topics relating to programs, services, and supports for persons with mental retardation. The Committee, by Executive Order, is responsible for evaluating the adequacy of current practices in programs and supports for persons with mental retardation, and for reviewing legislative proposals that impact the quality of life that is experienced by citizens with mental retardation and their families.


John L. Pride,
Deputy Executive Director, PCMR.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 98N–0572]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information and to allow 60 days for public comment in response to the notice. This notice solicits comments on the proposed collection of information concerning a pilot program in which volunteers from the retail food industry will use Hazard Analysis Critical Control Point (HACCP) principles and partner with interested regulatory authorities in the program implementation.


ADDRESSES: Submit written comments on the collection of information to the Dockets Management Branch (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number found in brackets in the heading of this document.
FOR FURTHER INFORMATION CONTACT:
Margaret R. Schlosburg, Office of Information Resources Management (HFA-250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-1223.

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. “Collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to provide a 60-day notice in the Federal Register concerning each proposed collection of information before submitting the collection to OMB for approval. To comply with this requirement, FDA is publishing notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, FDA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of FDA’s functions, including whether the information will have practical utility; (2) the accuracy of FDA’s estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques, when appropriate, and other forms of information technology.

Collection of Letters of Interest and Food Safety Data by Retail Food Operators in a Voluntary Pilot Program using HACCP Principles

Section 301 (21 U.S.C. 331 et seq.) of the Federal Food, Drug, and Cosmetic Act enables FDA to ensure that foods in interstate commerce are safe. In addition, under authority granted in the Public Health Service Act (42 U.S.C. 243 et seq.), the agency engages in a range of activities intended to ensure safety of the nation’s food supply, from regulating food when it can be a vector of disease to assisting, and cooperating with, the States to ensure effective State and local food safety programs. FDA endeavors to assist the more than 3,000 Federal, tribal, State, and local regulatory agencies that have primary responsibility for monitoring retail food establishments to ensure that consumers are protected.

FDA is proposing to collect information, through a voluntary pilot program, on how HACCP principles might be implemented in the retail food industry. The pilot program is designed to provide insight into the problems, costs, and benefits of developing and implementing HACCP principles for food service, retail food stores, and other retail food establishments, in order to improve and provide direct guidance to both the retail industry and regulatory authorities for the implementation of HACCP principles in the retail food sector. FDA will select candidates with a goal of ensuring that the participants in the program cross the spectrum of retail activities, have a range of scientific capabilities, have facilities of varying sizes, and have a range of HACCP experience. FDA has been approached by State and local governments to provide guidance for applying HACCP principles at retail, therefore the agency intends to collect information through the pilot program to develop and enhance guidance. The agency intends to make a summary of the results of the retail pilot program publicly available.

The agency will request interested retail food establishments along with regulatory authorities interested in participating in the pilot program to send to FDA a letter of interest. FDA requests that the letters of interest from the retail food establishments provide information concerning the nature of their menu, the location and size of their facility, the type of techniques they use to prepare their products, the extent to which, and how, they employ HACCP; identify area government officials with whom they have worked to implement or reinforce the system; identify which government officials they would like involved in the pilot program; and identify trade associations they would like involved with them in the pilot. FDA will consider these factors in reviewing the letters of interest from retail applicants as a basis for identifying a limited number of individual establishments that, in the judgment of the agency, are best suited to participate in the program.

The agency will request selected retail pilot participants to maintain their food safety program based upon HACCP principles for the duration of the pilot. FDA will study the information and data the pilot participants use to maintain their food safety program.

FDA estimates the burdens of this collection of the information as follows:

### Table 1.—Estimated Annual Reporting Burden

<table>
<thead>
<tr>
<th>Activity</th>
<th>No. of Respondents</th>
<th>Annual Frequency per Response</th>
<th>Total Annual Responses</th>
<th>Hours per Response</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letters of interest from State/local/tribal authorities&lt;sup&gt;2&lt;/sup&gt;</td>
<td>50</td>
<td>1</td>
<td>50</td>
<td>1</td>
<td>50</td>
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<tr>
<td>Letters from interested retail firms&lt;sup&gt;2&lt;/sup&gt;</td>
<td>50</td>
<td>1</td>
<td>50</td>
<td>1</td>
<td>50</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>100</td>
<td></td>
<td>100</td>
</tr>
</tbody>
</table>

<sup>1</sup> There are no operating and maintenance costs or capital costs associated with this collection of information.

<sup>2</sup> One time activity.

### Table 2.—Estimated Annual Recordkeeping Burden

<table>
<thead>
<tr>
<th>Activity</th>
<th>No. of Recordkeepers</th>
<th>Annual Frequency per Recordkeeping</th>
<th>Total Annual Records</th>
<th>Hours per Recordkeeper</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan development</td>
<td>50</td>
<td>1</td>
<td>50</td>
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<td>5,000</td>
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<tr>
<td>Plan implement documentation</td>
<td>50</td>
<td>7,000</td>
<td>350,000</td>
<td>.05</td>
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<tr>
<td>Implementation review</td>
<td>50</td>
<td>4</td>
<td>200</td>
<td>4</td>
<td>800</td>
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<tr>
<td>Total</td>
<td></td>
<td></td>
<td>23,300</td>
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<td></td>
</tr>
</tbody>
</table>

<sup>1</sup> There are no operating and maintenance costs or capital costs associated with this collection of information.
FDA estimates the burden incurred by interested regulatory agencies and retail industry to provide FDA with a letter of interest to be a one time burden. FDA estimates the burden of collecting and maintaining food safety information based upon HACCP principles during the pilot program will vary considerably across the wide spectrum of retail activities and establishments and depends on the type and number of products involved, and the nature of the equipment or instruments required by the retail establishment for monitoring. The estimated burden by the retail industry for maintaining their food safety system would involve the development, if not already implemented, and maintenance of the food safety plan based upon HACCP principles, the implementation and records generated by that plan, and the verification of the plan’s implementation activities and records.

These estimates are based on FDA’s experience with other government pilot programs and with comments received through the conference of food protection, public meetings, and retail industry advice. This information was utilized to design the pilot program with the least amount of burden to the retail industry.


William K. Hubbard, Associate Commissioner for Policy Coordination.

[FR Doc. 98–20309 Filed 7–29–98; 8:45 am]

TABLE 1.—ESTIMATED ANNUAL REPORTING BURDEN

<table>
<thead>
<tr>
<th>21 CFR Part</th>
<th>Form</th>
<th>No. of Respondents</th>
<th>Annual Frequency per Response</th>
<th>Total Annual Responses</th>
<th>Hours per Response</th>
<th>Total Hours</th>
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<tbody>
<tr>
<td>710</td>
<td>FDA 2511</td>
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<td>1</td>
<td>50</td>
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</table>

1 There are no capital costs or operating and maintenance costs associated with this collection of information.