scope and content of the environmental analysis in connection with the proposed project. A public scoping meeting for the proposed project will be held on Wednesday, March 8, 2006 from 3 to 6 p.m. at the Calexico City Hall, 608 Heber Avenue in Calexico, California. Interested parties may attend to present questions and concerns that they believe should be addressed in the EIS. Comments and questions can also be submitted to the Point of Contact (see the ADDRESS section below). Due to time limits mandated by Federal law, responses to scoping are requested no later than 45 days after publication of this notice. It is anticipated that the Draft EIS will be available for public review and comment in January of 2007.

ADDRESSES: Submit comments and questions to Mr. Morris Angell, Regional Environmental Quality Advisor, 450 Golden Gate Avenue, 3rd Floor East, San Francisco, California, 94102, 415–522–3473, *morris.angell@gsa.gov*.

FOR FURTHER INFORMATION CONTACT: If you require additional information regarding the public scoping meeting or the proposed project, or require special assistance to attend the meeting, please contact Morris Angell, GSA Regional Environmental Quality Advisor, (see the ADDRESS section above).

SUPPLEMENTARY INFORMATION: GSA is proposing two alternative actions: 1) construct a new vehicle and pedestrian inspection facility on the existing site and federally owned vacant land immediately to the west of the current facility, and 2) a ''no action'' alternative. Under the ''no action'' alternative, the existing facilities and their operation will remain unchanged.

Dated: February 10, 2006.

Peter G. Stamison,

Regional Administrator, Public Buildings Service, Pacific Rim Region.

Dated: February 10, 2006.

Jeffrey Neely,

Assistant Regional Administrator, Public Buildings Service, Pacific Rim Region.

[FR Doc. E6–2694 Filed 2–24–06; 8:45 am]

BILLING CODE 6820–YF–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–06–0428]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–5960 and send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an e-mail to *omb@cdc.gov*.

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 through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

PHS Supplements to the Application for Federal Assistance SF–424 (0920–0428)—Revision—Office of the Director (OD), Centers for Disease Control and Prevention (CDC) is requesting a three-year extension for continued use of the Supplements to the Request for Federal Assistance Application (SF–424).

Background and Brief Description

The Checklist, Program Narrative, and the Public Health System Impact Statement (third party notification) (PHSIS) are a part of the standard application for State and local governments and for private non-profit and for-profit organizations when applying for financial assistance from PHS grant programs. The Checklist assists applicants to ensure that they have included all required information necessary to process the application. The Checklist data helps to reduce the time required to process and review grant applications, expediting the issuance of grant awards. The PHSIS Third Party Notification Form is used to inform State and local health agencies of community-based proposals submitted by non-governmental applicants for Federal funding.

There may be some revisions made to one or more of the forms to allow the respondents easy web-base access. This should not affect the current burden. There is no cost to the respondents other than their time.

ESTIMATE OF ANNUALIZED BURDEN TABLE

Respondents	Number of respondents	Number of responses/ respondent	Average burden/ response (in hrs.)	Total burden (in hrs.)
State and local health departments; non-profit and for-profit organizations ...	7,457	1	5.7255	42,695
Total	.....	.....	.....	42,695

Dated: February 21, 2006.

Joan F. Karr,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E6–2709 Filed 2–24–06; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–06–0463]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–4766 or send an e-mail to *omb@cdc.gov.* Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–6974. Written comments should be received within 30 days of this notice.

Proposed Project

Longitudinal Surveillance for Beryllium Disease Prevention—0920–0463—Extension—National Institute for Occupational Safety and Health (NIOSH)—Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The mission of the National Institute for Occupational Safety and Health (NIOSH) is to promote safety and health at work for all people through research and prevention. The Occupational Safety and Health Act, Public Law 91–596 (section 20[a][1]) authorizes the National Institute for Occupational Safety and Health (NIOSH) to conduct research to advance the health and safety of workers. NIOSH is conducting a study of beryllium workers. Beryllium is a lightweight metal with many applications. Exposed workers may be found in the primary production, nuclear power and weapons, aerospace, scrap metal reclamation, specialty ceramics, and electronics industries, among others. The size of the U.S. workforce at risk of chronic beryllium disease (CBD), from either current or past work-related exposure to the metal, may be as high as one million. Demand for beryllium is growing worldwide, which means that increasing numbers of workers are likely to be exposed.

CBD is a chronic granulomatous lung disease mediated through an immunologic mechanism in workers who become sensitized to the metal. Sensitization can be detected with a blood test called the beryllium lymphocyte proliferation test (BeLPT), which is used by the industry as a surveillance tool. Use of this test for surveillance was first reported in 1989. Sensitized workers, identified through workplace surveillance programs, undergo clinical diagnostic tests to determine whether they have CBD. Research has indicated certain genetic determinants in the risk of CBD; follow-up studies will be invaluable for further characterizing the genetic contribution to sensitization and disease.

NIOSH is in a unique position to accomplish this research for a number of reasons: (a) It has a successful collaboration with the leading manufacturer of beryllium in the US. This has allowed us to establish well-characterized worker cohorts within the beryllium industry. (b) It is conducting industrial hygiene research that should significantly improve workplace-based exposure assessment methods. This research will allow characterization of jobs and tasks by physicochemical characteristics, leading to an estimation of dose rather than mass concentration-based exposure. (c) It has pioneered the evaluation of the dermal exposure route in the beryllium sensitization process. (d) It has developed and improved genetic research that will contribute to the understanding of risk variability in sensitization and disease, as well as discerning the underlying mechanisms. (e) NIOSH has the institutional stability to continue longitudinal evaluations of health outcomes in relation to exposure and genetic risk factors.

NIOSH has been conducting this survey of beryllium workers for three years and this extension will allow for completion of the data collection on former workers. Workers are asked to complete an interviewer administered medical and work history questionnaire and to give a blood sample. Without medical and work history data on former workers, NIOSH staff will be unable to conduct the necessary research to make recommendations for preventing beryllium sensitization and disease. Follow-up on this cohort will provide invaluable information on the natural history of disease, gene-gene, and gene-environment interactions, which can become the basis for prevention policy at both company and government levels.

There are no costs to the respondents other than their time. The only change to this previously approved project is a decrease in the burden hours because the proposed data collection is almost complete. The total estimated annualized burden hours are 50.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Former Workers	100	1	30/60