Washington, DC 20503, Attn: Ms. Wendy Taylor.

Dated: June 10, 1996.

Larry Guerrero,

Acting Director, Office of Information Resource Management Services.

[FR Doc. 96-15219 Filed 6-18-96; 8:45 am]

BILLING CODE 4184-01-M

Food and Drug Administration [Docket No. 96F-0101]

General Electric Co.; Filing of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that General Electric Co. has filed a petition proposing that the food additive regulations be amended to provide for the safe use of triisopropanolamine as a component of phosphorous acid, cyclic butylethyl propanediol, 2,4,6-tri-tert-butylphenyl ester, a stabilizer for olefin polymers intended for use in contact with food.

DATES: Written comments on petitioner's environmental assessment by July 19, 1996.

ADDRESSES: Submit written comments to the Dockets Management Branch (HFA–305), Food and Drug Administration, 12420 Parklawn Dr., rm. 1–23, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: Vir D. Anand, Center for Food Safety and Applied Nutrition (HFS-216), 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 6B4507) has been filed by General Electric Co., 1 Lexan Lane, Mt. Vernon, IN 47620–9364. The petition proposes to amend the food additive regulations in § 178.2010 Antioxidants and/or stabilizers for polymers (21 CFR 178.2010) to provide for the safe use of triisopropanolamine as a component of phosphorous acid, cyclic butylphenyl propanediol, 2,4,6-tri-tert-butylphenyl ester, a stabilizer for olefin polymers intended for use in contact with food.

The potential environmental impact of this action is being reviewed. To encourage public participation consistent with regulations promulgated under the National Environmental Policy Act (40 CFR 1501.4(b)), the agency is placing the environmental assessment submitted with the petition

that is the subject of this notice on display at the Dockets Management Branch (address above) for public review and comment. Interested persons may, on or before July 19, 1996, submit to the Dockets Management Branch (address above) written comments. Two copies of any comments are to be submitted, except that individuals may submit one copy. Comments are to be identified with the docket number found in brackets in the heading of this document. Received comments may be seen in the office above between 9 a.m. and 4 p.m., Monday through Friday. FDA will also place on public display any amendments to, or comments on, the petitioner's environmental assessment without further announcement in the Federal Register. If, based on its review, the agency finds that an environmental impact statement is not required and this petition results in a regulation, the notice of availability of the agency's finding of no significant impact and the evidence supporting that finding will be published with the regulation in the Federal Register in accordance with 21 CFR 25.40(c).

Dated: June 4, 1996. Alan M. Rulis, Director, Office of Premarket Approval, Center for Food Safety and Applied Nutrition. [FR Doc. 96–15467 Filed 6–18–96; 8:45 am] BILLING CODE 4160–01–F

Health Care Financing Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Health Care Financing Administration, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summaries of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

- 1. Type of Information Collection Request: Reinstatement, without change, of previously approved collection for which approval has expired; Title of Information Collection: Authorization Agreement for Electronic Funds Transfer; Form No.: HCFA-588; Use: This information is needed to allow providers to receive funds electronically in their bank; Frequency: On occasion; Affected Public: Business or other for profit, not for profit institutions; Number of Respondents: 78,550; Total Annual Responses: 78,550; Total Annual Hours: 9,819. Number of Respondents: 16,000; Total Annual Responses: 16,000; Total Annual Hours: 20,000.
- 2. Type of Information Collection Request: Reinstatement, without change, of previously approved collection for which approval has expired; Title of Information Collection: Application for Health Insurance Under Medicare for Individuals with Chronic Renal Disease; Form No.: HCFA-43; Use: This form is used as a standard method of eliciting information necessary to determine entitlement to Medicare under the end stage renal disease provision of the law; Frequency: On occasion; Affected Public: Individuals and households, Federal government; Number of Respondents: 80,000; Total Annual Responses: 80,000; Total Annual Hours: 34,400.
- 3. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Clinical **Laboratory Improvement Amendments** Application Form; Form No.: HCFA-116; Use: This application is completed by entities performing laboratory testing on human specimens for health purposes; *Frequency:* Biennially; Affected Public: Business or other for profit, not for profit institutions, Federal government and State, local or tribal governments; Number of Respondents: 16,000; Total Annual Responses: 16,000; Total Annual Hours: 20,000.
- 4. Type of Information Collection Request: Reinstatement, without change, of previously approved collection for which approval has expired; Title of Information Collection: Post Laboratory Survey Questionnaire-Surveyor; Form No.: HCFA-668A; Use: This survey provides the surveyor with an opportunity to evaluate the survey process. The form is completed in conjunction with the HCFA form 668B. This information with help HCFA evaluate the entire survey process from the surveyor's prospective; Frequency: Biennially; Affected Public: Business or other for profit, not for profit institutions, Federal government and

State, local or tribal governments; Number of Respondents: 1,560; Total Annual Responses: 1,560; Total Annual Hours: 390.

5. Type of Information Collection Request: Reinstatement, without change, of previously approved collection for which approval has expired; Title of Information Collection: Post Laboratory Survey Questionnaire-Laboratory; Form No.: HCFA-668B; Use: This survey provides the laboratory with an opportunity to evaluate the survey process. The form is completed in conjunction with the HCFA form 668A. This information will help HCFA evaluate the entire survey process from the laboratory's prospective; Frequency: Biennially; Affected Public: Business or other for profit, not for profit institutions, Federal government and State, local or tribal governments; Number of Respondents: 1,560; Total Annual Responses: 1,560: Total Annual Hours: 390.

Total Annual Hours: 390.

To obtain copies of the supporting statement for the proposed paperwork collections referenced above, access HCFA's WEB SITE ADDRESS at [http:/ /www.hcfa.gov], or to obtain the supporting statement and any related forms, E-mail your request, including your address and phone number, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to **HCFA Paperwork Clearance Officer** designated at the following address: HCFA, Office of Financial and Human Resources, Management Planning and Analysis Staff, Attention: John Burke, Room C2-26-17, 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: June 13, 1996. Kathleen B. Larson.

Director, Management Planning and Analysis Staff, Office of Financial and Human Resources, Health Care Financing Administration.

[FR Doc. 96–15612 Filed 6–18–96; 8:45 am] BILLING CODE 4120–03–P

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Health Care Financing Administration, HHS.

In compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.), the Health Care Financing Administration (HCFA), Department of Health and Human Services, has

submitted to the Office of Management and Budget (OMB) the following proposals for the collection of information. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection

1. Type of Information Collection Request: Revision of a currently approved collection; Title of Information Collection: Medicare Current Beneficiary Survey: Round-16; Form No.: HCFA-P-15A; Use: The Office of the Actuary, HCFA, proposes to supplement the questionnaire and sample for the September, 1996 Round-16 of the Medicare Current Beneficiary Survey (MCBS) to facilitate comparisons of the experiences of beneficiaries using managed care and those in the fee-forservice medical care delivery system. The MCBS, is a national survey of persons served by Medicare, used to support policy and research by measuring use and cost of services, sources of payment, insurance coverage, health status, access, satisfaction and other information; Frequency: Annually; Affected Public: Individuals and households; Number of Respondents: 1,900; Total Annual Hours: 1,900.

To obtain copies of the supporting statement and any related forms, E-mail your request, including your address and phone number, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections should be sent within 30 days of this notice directly to the OMB Desk Officer designated at the following address: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: June 13, 1996.

Kathleen B. Larson,

Director, Management Planning and Analysis Staff, Office of Financial and Human Resources, Health Care Financing Administration.

[FR Doc. 96–15613 Filed 6–18–96; 8:45 am] BILLING CODE 4120–03–P

[R-106]

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Health Care Financing Administration (HCFA), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding the burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection

Type of Information Collection Request: Reinstatement, with change, of a previously approved collection for which approval has expired; Title of Information Collection: Criteria for Medicare Coverage of Heart Transplants; Form No.: HCFA-R-106; Use: Medicare participating hospitals must file an application to be approved for coverage and payment of heart transplants performed on Medicare beneficiaries. Frequency: Annually: Affected Public: Business or other for-profit; Number of Respondents: 5; Total Annual Responses: 5; Total Annual Hours Requested: 500.

To request copies of the proposed paperwork collections referenced above, call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections should be sent within 60 days of this notice directly to the HCFA Paperwork Clearance Officer designated at the following address: HCFA, Office of Financial and Human Resources, Management Planning and Analysis Staff, Attention: Louis Blank, Room C2–26–17, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: June 11, 1996.

Kathleen B. Larson,

Director, Management Planning and Analysis Staff, Office of Financial and Human Resources.

[FR Doc. 96–15515 Filed 6–18–96; 8:45 am] BILLING CODE 4120–03–P