lender sells or transfers the servicing rights to another servicer?

Answer: No. The obligation of the lender to notify the Director or the Director's designee of the identity of the servicer transfers to the new servicer. The duty to notify the Director or the Director's designee of any subsequent sale or transfer of the servicing rights and responsibilities belongs to that servicer. For example, First Financial Institution makes and services the loan. It then sells the loan in the secondary market and also sells the servicing rights to First Financial Mortgage Company. First Financial Institution notifies the Director's designee of the identity of the new servicer and the other information requested by FEMA so that FEMA can track the loan. If First Financial Mortgage Company later sells the servicing rights to another firm, First Financial Mortgage Company is responsible for notifying the Director's designee of the identity of the new servicer, not First Financial Institution.

6. In the event of a merger of one lending institution with another, what are the responsibilities of the parties for notifying the Director's designee?

Answer: If an institution is acquired by or merges with another institution, the duty to provide notice for the loans being serviced by the acquired institution will fall to the successor institution in the event that notification is not provided by the acquired institution prior to the effective date of the acquisition or merger.

X. Appendix A to the Regulation—Sample Form of Notice of Special Flood Hazards and Availability of Federal Disaster Relief Assistance

1. Is use of the sample form of notice mandatory? Can it be revised to accommodate a lender's needs?

Answer: Although lenders are required to provide a notice to a borrower who is purchasing property secured by an improved structure located in an SFHA, use of the sample form of notice provided in Appendix A is not mandatory. It should be noted that the sample form includes other information in addition to what is required by the Act and the Regulation. Lenders may personalize, change the format of, and add information to the sample form if they choose. However, a lender-revised form must provide the borrower with at least the minimum information required by the Regulation. Therefore, lenders should consult the Regulation to determine the information needed.

Federal Financial Institutions Examination Council.

Dated at Washington, DC this 16th day of July 1997.

Joe M. Cleaver,

Executive Secretary.

[FR Doc. 97–19133 Filed 7–22–97; 8:45 am]

BILLING CODE 6210–01–P, 6720–01–P, 6714–01–P, 4810–01–P, 7535–01–P

FEDERAL MARITIME COMMISSION

Notice of Agreement(s) Filed

The Commission hereby gives notice of the filing of the following agreement(s) under the Shipping Act of 1984.

Interested parties can review or obtain copies of agreements at the Washington, DC offices of the Commission, 800 North Capitol Street, N.W., Room 962. Interested parties may submit comments on an agreement to the Secretary, Federal Maritime Commission, Washington, DC 20573, within 10 days the date of this notice appears in the **Federal Register**.

Agreement No.: 203–011330–012.

Title: Information System Agreement.

Parties: P&O Nedlloyd Limited, American President Lines, Ltd., Sea-Land Service, Inc., A. P. Moller-Maersk Line, Crowley Maritime Corporation, Hapag-Lloyd Container Linie GmbH, Orient Overseas Container Line, Inc., Lykes Bros. Steamship Co., Inc., P&O Nedlloyd B.V., Kawasaki Kisen Kaisha, Ltd., Yang Ming Marine Transport Corp., Mitsui O.S.K. Lines, Ltd.

Synopsis: The proposed modification revises procedures for the payment of admission fees and annual dues, provides for the suspension of voting privileges for the delinquent payment of annual dues and expulsion from the Agreement for the non-payment of annual dues, provides for the admission of associate members under specified conditions, and provides that P&O Nedlloyd B.V. and P&O Nedlloyd Limited be considered as one member and be entitled to only a single representative and one vote.

By Order of the Federal Maritime Commission.

Dated: July 18, 1997.

Ronald D. Murphy,

Assistant Secretary.

[FR Doc. 97–19335 Filed 7–22–97; 8:45 am]

BILLING CODE 6730–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY–15–97]

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 Office on (404) 639–7090. Send written comments to CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503. Written comments should be received within 30 days of this notice.

Proposed Project

1. Examination of Barriers to Participant Compliance in a Flexible Sigmoidoscopy Screening Program. Kaiser Foundation, Oakland—New—This is a revision and resubmission of a previously submitted information collection. With colorectal cancer comprising the second highest mortality rate among all U.S. cancers and ranked as the fourth most common form of cancer, the active promotion of population-based screening and early detection is becoming increasingly important. Recognizing the importance of screening, American Cancer Society guidelines and the new US Preventive Services Task Force guidelines recommend colorectal cancer screening for individuals over the age of 50. Still, although early detection of colorectal neoplasms has been effectively demonstrated to significantly reduce morbidity and mortality and associated economic costs, compliance is very low. This three-year study involving investigators at one of the nation's largest Health Maintenance Organizations' research foundation (Kaiser Foundation of Northern California) seeks to identify barriers associated with low compliance in a colorectal cancer screening program utilizing flexible sigmoidoscopy.

Phase I will target and recruit participants from an existing pool of Health Maintenance Organization enrollees who are at a relatively high age-related risk (ages 50–64) for developing colorectal cancers via short survey and invitation to screening. In Phase II, investigators will conduct a telephone survey to identify the relative

impact of economic, psychological, and related factors on participation and non-participation in the mass screening programs. In phase III, investigators will analyze and widely disseminate results of the study via publication in the professional literature. Results will also be made available to participants upon request. Interventions designed to mitigate the barriers identified through this study will be incorporated into future screening efforts and general health education/health promotion efforts.

Participation in this study is voluntary and subsequent follow-up and treatment, if indicated, will be provided at no cost to participants. Informed consent will be obtained where appropriate and oversight will be provided by federal and institutional review. The total annual burden hours are 2,141.

Respondents	No. of respondents	No. of responses/respondent	Average burden/response (in hrs.)
HMO Enrollees	6165	1	.3473

Dated: July 16, 1997.

Wilma G. Johnson,

Acting Associate Director for Policy Planning And Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 97–19325 Filed 7–22–97; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 97M–0256]

LaserVision Centers, Inc.; Premarket Approval of LaserVision®/VISX Excimer Laser System Model C for Phototherapeutic Keratectomy (PTK) and Photorefractive Keratectomy (PRK)

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing its approval of the application by LaserVision Centers, Inc., St. Louis, MO, for premarket approval, under the Federal Food, Drug, and Cosmetic Act (the act), of the stationary LaserVision®/VISX Excimer Laser System Model C for Phototherapeutic Keratectomy (PTK) and Photorefractive Keratectomy (PRK). The device is to be manufactured under an agreement with VISX, Inc., Santa Clara, CA, which has authorized LaserVision Centers, Inc., to incorporate information contained in its approved premarket approval applications (PMA's) for the VISX Excimer Laser System Model C for PTK and for the VISX Excimer Laser System Model C for PRK. FDA's Center for Devices and Radiological Health (CDRH) notified the applicant, by letter of November 15, 1996, of the approval of the application.

DATES: Petitions for administrative review by August 22, 1997.

ADDRESSES: Written requests for copies of the summary of safety and effectiveness data and petitions for administrative review to the Dockets Management Branch (HFA–305), Food and Drug Administration, 12420 Parklawn Dr., rm. 1–23, Rockville, MD 20857. For more information on the data which supported this application, please refer to the summary of safety and effectiveness and labeling for the VISX Excimer Laser System Model C for PTK (under Docket Number 96M–0486) and for the VISX Excimer Laser System Model C for PRK (under Docket Number 97M–0084).

FOR FURTHER INFORMATION CONTACT: Morris Waxler, Center for Devices and Radiological Health (HFZ–460), Food and Drug Administration, 9200 Corporate Blvd., Rockville, MD 20850, 301–594–2018.

SUPPLEMENTARY INFORMATION: On June 3, 1996, LaserVision Centers, Inc., St. Louis, MO 63141, submitted to CDRH an application for premarket approval of the stationary LaserVision®/VISX Excimer Laser System Model C for PTK and PRK. The device is a stationary excimer laser which delivers pulses at 193 nanometers wavelength. The device is indicated for PTK in patients with decreased best corrected visual acuity and/or with disabling pain that are the result of superficial corneal epithelial irregularities or stromal scars in the anterior one-third of the cornea. The patients must have failed with alternative treatment options. For safety, the immediate postoperative corneal thickness must not be less than 250 microns. Examples of those conditions that warrant PTK are: (1) Corneal scars and opacity (from trauma and inactive infections), (2) dystrophies (Reis-Buckler's granular and lattice), (3) Thygeson's superficial keratitis, (4) irregular corneal surfaces associated with filamentary keratitis and Salzmann's nodular degeneration, (5) residual band keratopathy after unsuccessful ethylene-diamine-tetra-acetic-acid (EDTA) treatment, and (6) scars subsequent to previous (not concurrent) pterygium excision. In addition, the device is indicated for PRK for a 6.0 ablation zone in patients who are myopic and meet all of the following criteria: (1) 1.0 to 6.0 diopters of myopia with astigmatism of < 1.0 diopters, (2) refractive change is within + 0.5 diopter for 1 year prior to the laser treatment, and (3) 18 years of age or older.

The application includes authorization from VISX, Inc., Santa Clara, CA 95051–0703, to incorporate information contained in its approved PMA's for VISX Excimer Laser System Model C for PTK and for the VISX Excimer Laser System Model C for PRK.

In accordance with the provisions of section 515(c)(2) of the act (21 U.S.C. 360e(c)(2)) as amended by the Safe Medical Devices Act of 1990, this PMA was not referred to the Ophthalmic Devices Panel of the Medical Devices Advisory Committee, an FDA advisory committee, for review and recommendation because the information in the PMA substantially duplicates information previously reviewed by this panel.

On November 15, 1996, CDRH approved the application by a letter to the applicant from the Director of the Office of Device Evaluation, CDRH.

A summary of the safety and effectiveness data on which CDRH based its approval is on file in the Dockets Management Branch (address above) and is available from that office upon written request. Requests should be identified with the name of the device and the docket number found in brackets in the heading of this document.

Opportunity for Administrative Review

Section 515(d)(3) of the act authorizes any interested person to petition, under section 515(g) of the act, for administrative review of CDRH's decision to approve this application. A petitioner may request either a formal