

## BILLING CODE 4162-20-C

**Instructions for Completing the Federal Drug Testing Custody and Control Form**

*When Making Entries Use Black or Blue Ink Pen and Press Firmly*

Collector ensures that the name and address of the HHS-certified Instrumented Initial Test Facility (IITF) or HHS-certified laboratory are on the top of the Federal CCF and the Specimen identification (I.D.) Number on the top of the Federal CCF matches the Specimen I.D. number on the label(s)/seal(s).

**STEP 1:**

- Collector ensures that the required information is in STEP 1. Collector enters a remark in STEP 2 if donor refuses to provide his/her SSN or Employee I.D. number.
- Collector gives collection container to Donor and instructs Donor to provide a specimen. Collector notes any unusual behavior or appearance of Donor in the remarks line STEP 2. If the Donor's conduct at any time during the collection process clearly indicates an attempt to tamper with the specimen, Collector notes the conduct in the remarks line in STEP 2 and takes action as required.

**STEP 2:**

- Collector checks specimen temperature within 4 minutes after receiving the specimen from Donor, and marks the appropriate temperature box in STEP 2. If the temperature is outside the acceptable range, Collector enters a remark in STEP 2 and takes action as required.

- Collector inspects the specimen and notes any unusual findings in the remarks line in STEP 2 and takes action as required. Any specimen with unusual physical characteristics (e.g., unusual color, presence of foreign objects or material, unusual odor) cannot be sent to an IITF and must be sent to an HHS-certified laboratory for testing, as required.

- Collector determines the volume of specimen in the collection container. If the volume is acceptable, Collector proceeds with the collection. If the volume is less than required by the Federal Agency, Collector takes action as required, and enters remarks in STEP 2. If no specimen is collected by the end of the collection process, Collector checks the *None Provided* box, enters a remark in STEP 2, discards Copy 1, and distributes remaining copies as required.

- Collector checks the Split or Single specimen collection box. If the collection is observed, Collector checks the Observed box and enters a remark in STEP 2.

**STEP 3:**

- Donor watches Collector pour the specimen from the collection container into the specimen bottle(s), place the cap(s) on the specimen bottle(s), and affix the label(s)/seal(s) on the specimen bottle(s).

- Collector dates the specimen bottle label(s) after placement on the specimen bottle(s).

- Donor initials the specimen bottle label(s) after placement on the specimen bottle(s).

- Collector turns to Copy 2 (Medical Review Officer Copy) and instructs the Donor to read and complete the certification statement in STEP 5 (signature, printed name, date, phone numbers, and date of birth). If Donor refuses to sign the certification statement, Collector enters a remark in STEP 2 on Copy 1.

**STEP 4:**

- Collector completes STEP 4 on Copy 1 (signature, printed name, date, time of collection, and name of delivery service), places the sealed specimen bottle(s) and Copy 1 in a leak-proof plastic bag, seals the bag, prepares the specimen package for shipment, and distributes the remaining CCF copies as required.

**Privacy Act Statement: (For Federal Employees Only)**

Submission of the requested information on the attached form is voluntary. However, incomplete submission of the requested information, refusal to provide a urine specimen, or substitution or adulteration of a specimen may result in delay or denial of your application for employment/appointment or may result in removal from the Federal service or other disciplinary action.

The authority for obtaining the urine specimen and identifying information contained herein is Executive Order 12564 ("Drug-Free Federal Workplace"), 5 U.S.C. Sec. 3301 (2), 5 U.S.C. Sec. 7301, and Section 503 of Public Law 100-71, 5 U.S.C. Sec. 7301 note. Under provisions of Executive Order 12564 and 5 U.S.C. 7301, test results may only be disclosed to agency officials on a need-to-know basis. This may include the agency Medical Review Officer, the administrator of the Employee Assistance Program, and a supervisor with authority to take adverse personnel action. This information may also be disclosed to a court where necessary to defend against a challenge to an adverse personnel action.

Submission of your SSN is not required by law and is voluntary. Your refusal to furnish your number will not result in the denial of any right, benefit,

or privilege provided by law. Your SSN is solicited, pursuant to Executive Order 9397, for purposes of associating information in agency files relating to you and for purposes of identifying the urine specimen provided for testing for the presence of illegal drugs. If you refuse to indicate your SSN, a substitute number or other identifier will be assigned, as required, to process the specimen.

**Public Burden Statement**

*Public Burden Statement:* An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0158. Public reporting burden for this collection of information is estimated to average 5 minutes/donor, 4 minutes/collector, 3 minutes/test facility and 3 minutes/Medical Review Officer. Send comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 7-1044, Rockville, Maryland 20857.

[FR Doc. E9-27371 Filed 11-16-09; 8:45 am]

BILLING CODE 4162-20-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Food and Drug Administration**

[Docket No. FDA-2009-N-0664]

**Thermal Aspects of Radio Frequency Exposure; Public Workshop**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice of public workshop.

The Food and Drug Administration (FDA) is announcing a public workshop entitled "Thermal Aspects of Radio Frequency Exposure." The purpose of the workshop is to discuss thermal sensitivity and heating effects of different tissues.

*Date and Time:* The public workshop will be held on January 11 and 12, 2010, from 8:30 a.m. to 5 p.m.

*Location:* The public workshop will be held at the Gaithersburg Hilton, 620 Perry Pkwy., Gaithersburg, MD 20877.

*Contact Person:* Victoria Wagman, Center for Devices and Radiological Health, Food and Drug Administration, 10903 New Hampshire Ave., Silver Spring, MD 20993, 301-796-6581, FAX: 301-796-5428, e-mail: victoria.wagman@fda.hhs.gov.

**Registration:** Mail or fax your registration information (including name, title, firm name, address, telephone and fax numbers) to the contact person by December 15, 2009. There is no registration fee for the public workshop. Early registration is recommended because seating is limited. Registration on the day of the public workshop will be provided on a space available basis beginning at 8 a.m.

If you need special accommodations due to a disability, please contact Victoria Wagman by November 4, 2009.

**Transcripts:** Transcripts of the public workshop may be requested in writing from the Freedom of Information Office (HFI-35), Food and Drug Administration, 5600 Fishers Lane, rm. 6-30, Rockville, MD 20857, approximately 15 working days after the public workshop at a cost of 10 cents per page. A transcript of the public workshop will be available on the Internet at <http://www.fda.gov/BiologicsBloodVaccines/NewsEvents/WorkshopsMeetingsConferences/TranscriptsMinutes/default.htm>.

Dated: November 6, 2009.

**Jeffrey Shuren,**

Acting Director, Center for Devices and Radiological Health.

[FR Doc. E9-27513 Filed 11-16-09; 8:45 am]

**BILLING CODE 4160-01-S**

## DEPARTMENT OF HOMELAND SECURITY

### Federal Emergency Management Agency

[Docket ID FEMA-2009-0001]

#### Agency Information Collection

#### Activities: Proposed Collection; Comment Request, 1660-0017; Public Assistance Program

**AGENCY:** Federal Emergency Management Agency, DHS.

**ACTION:** Notice; 60-day notice and request for comments; revision of a currently approved information collection; OMB No. 1660-0017; Public Assistance Program; FEMA Form 90-49, Request for Public Assistance; FEMA Form 90-91, Project Worksheet (PW); FEMA Form 90-91A, Project Worksheet—Damage Description and Scope of Work Continuation Sheet; FEMA Form 90-91B, Project Worksheet—Cost Estimate Continuation Sheet; FEMA Form 90-91C Project Worksheet—Maps and Sketches Sheet; FEMA Form 90-91D, Project Worksheet—Photo Sheet; FEMA Form 90-120, Special Considerations Questions; FEMA Form 121, PNP

Facility Questionnaire; FEMA Form 90-123, Force Account Labor Summary Record; FEMA Form 90-124, Materials Summary Record; FEMA Form 90-125, Rented Equipment Summary Record; FEMA Form 90-126, Contract Work Summary Record; FEMA Form 90-127, Force Account Equipment Summary Record; and FEMA Form 90-128, Applicant's Benefits Calculation Worksheet.

**SUMMARY:** The Federal Emergency Management Agency, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on a proposed revision of a currently approved information collection. In accordance with the Paperwork Reduction Act of 1995, this Notice seeks comments concerning the information collected by FEMA to make determinations for Public Assistance payments.

**DATES:** Comments must be submitted on or before January 19, 2010.

**ADDRESSES:** To avoid duplicate submissions to the docket, please use only one of the following means to submit comments:

(1) *Online.* Submit comments at [www.regulations.gov](http://www.regulations.gov) under docket ID FEMA-2009-0001. Follow the instructions for submitting comments.

(2) *Mail.* Submit written comments to Office of Chief Counsel, Regulation and Policy Team, DHS/FEMA, 500 C Street, SW., Room 835, Wash, DC 20472-3100.

(3) *Facsimile.* Submit comments to (703) 483-2999.

(4) *E-mail.* Submit comments to [FEMA-POLICY@dhs.gov](mailto:FEMA-POLICY@dhs.gov). Include docket ID FEMA-2009-0001 in the subject line.

All submissions received must include the agency name and docket ID. Regardless of the method used for submitting comments or material, all submissions will be posted, without change, to the Federal eRulemaking Portal at <http://www.regulations.gov>, and will include any personal information you provide. Therefore, submitting this information makes it public. You may wish to read the Privacy Act notice that is available on the Privacy and Use Notice link on the Administration Navigation Bar of <http://www.regulations.gov>.

**FOR FURTHER INFORMATION CONTACT:** Contact Clifford Brown, Program Specialist, Public Assistance Grant Program at (202) 646-4136 for additional information. You may contact the Records Management Branch for copies of the proposed collection of information at facsimile

number (202) 646-3347 or e-mail address: [FEMA-Information-Collections@dhs.gov](mailto:FEMA-Information-Collections@dhs.gov).

**SUPPLEMENTARY INFORMATION:** The information collected is required for the Public Assistance (PA) Program eligibility determinations, grants management, and compliance with other Federal laws and regulations. The Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121-5207 (the Stafford Act), authorizes financial and other forms of assistance to State and local governments and certain Private Nonprofit (PNP) organizations to support the response, recovery, and mitigation efforts following Presidentially declared major disasters and emergencies. 44 CFR Part 206 specifies the information collections necessary to facilitate the provision of assistance under the PA Program.

Pursuant to 44 CFR 206.202(c), the Grantee is required to submit a completed Request, FEMA Form 90-49 for each applicant who requests Public Assistance. Section 206.202(d) requires the applicant to submit a Project Worksheet (FEMA Forms 90-91, 90-91A, 90-91B, 90-91C, and 90-91D) for each project. The Project Worksheet must identify the eligible scope of work and must include a quantitative estimate for the eligible work. As a supplement to the Project Worksheet, FEMA also requires a Special Considerations form, FEMA Form 90-120, and an Applicant's Benefits Calculation Worksheet, FEMA Form 90-128. There are also various optional forms to aid the applicant in preparing and submitting the Project Worksheet.

Pursuant to 44 CFR 206.207, States are required to develop a State Administrative plan to administer the PA Program. The submission of the State Administrative Plan is required as a condition of receiving PA funding. FEMA must approve a State Administrative Plan before awarding any project grant assistance to a community or State applicant. The State must submit a revised plan annually. In addition, FEMA will request that the State amend its plan to meet current policy guidance in each disaster for which Public Assistance is included.

Pursuant to 44 CFR 206.204(c), the Grantee may to approve time extensions for the completion of projects for an additional six months for debris clearance and emergency work and an additional 30 months for permanent work. Time extensions beyond the Grantee's authority (i.e., beyond the extensions available under section 206.204(c)), must be submitted by the Grantee to FEMA, pursuant to 44 CFR