Public service impacts are, therefore, considered less than significant.

Mitigation Measures: None required.

Transportation and Parking. In the EIS, traffic growth was estimated using a two percent annual growth rate. This growth rate was applied to the existing traffic counts to estimate future background traffic conditions. In addition, eight projects in the Downtown area were identified by City of Phoenix staff and included in the evaluation of cumulative traffic growth. These projects include: Arizona Museum of Science and Technology, Phoenix Museum of History, Heritage and Science Parking Garage, Downtown Phoenix Transit Center, Maricopa County Office Complex, City of Phoenix Office Development, the Baseball Stadium, and the Parking Facility located between 6th and 7th Avenues and between Washington and Jefferson Streets.

The sum of existing traffic volumes, growth in existing traffic volumes due to general background development occurring in the area by the year 2000 (for one scenario) and year 2010 (for a second scenario), and incremental traffic increases related to the eight specific development projects identified in the study area represents projected year 2000 and year 2010 traffic conditions without the proposed courthouse project. The year 2000 and year 2010 analyses presented in the EIS assumes recommended mitigation measures are incorporated. No assumptions have been made regarding responsibility for implementation of the recommended mitigation measures. The LOS levels contained in the EIS represent operating conditions in year 2000 and year 2010 with necessary improvements in place.

Because project implementation would affect the closure of both 5th and 6th Avenues between Washington and Jefferson Streets, the project would generate a substantial increase in afternoon peak hour traffic at the intersections of 3rd/Jefferson and 3rd/Washington, resulting in an unacceptable level of service for the 3rd/Jefferson intersection and therefore an unavoidable significant impact.

Existing signal cycle lengths are fixed at 60 seconds for the inter-connected signal system along Jefferson and Washington. The setting of signal cycle lengths are influenced by a number of factors. The magnitude and distribution of peak period traffic flows at the individual intersection approaches and the signal phases required to accommodate the various traffic movements contribute to the determination of the optimum cycle length which results in the lowest average delay for vehicles being served by the intersection. In the case of the individual intersection of Jefferson Street and Third Avenue, GSA believes that the optimum signal cycle length in the future analysis years would be within the range of 95 to 100 seconds.

The result of not being able to use the signal cycle time in an efficient manner at the Jefferson/Third Avenue intersection is an afternoon peak hour Level of Service ''F'' for both the 2000 and 2010 forecast years with the Proposed Action project scenario. Future service levels for the Washington/Third Avenue intersection were found to be ''C'' or better. The analysis assumes that GSA will provide a double left turn at the eastbound Jefferson Street approach to Third Avenue and at the northbound Third Avenue approach to Washington Street. Mitigation opportunities provided within the EIS would not be not sufficient to improve the future traffic service level to ''D'' or better with the Proposed Action scenario (the City of Phoenix considers LOS D the limit of tolerable traffic congestion during peak traffic periods).

Mitigation Measures: Short-term impacts in the project area (during construction) would be reduced through implementation of the following mitigation measures:

- Heavy construction equipment such as bulldozers and large loaders would be moved onsite prior to construction and realignment activities and remain until the equipment is no longer needed;
- Some minor disruption of traffic flows would occur at this time; however, the short duration of activity would minimize impacts;
- Movement of construction vehicles and equipment onto and off of the site would be scheduled in a manner that would avoid the peak traffic periods on the adjacent street network;
- Construction employees traveling to and from the site on a daily basis will be scheduled to occur prior to the morning and evening traffic peak.

Long-term impacts would be reduced through implementation of the following mitigation measures:

- GSA will develop a transportation management plan which would reduce impacts to the local circulation system by reducing the number of new motor vehicle trips generated by the project.
- GSA will work with the City to provide a double left turn at the eastbound Jefferson Street approach to Third Avenue and at the northbound Third Avenue approach to Washington Street.

As stated previously, however, the above mitigation measures will not be sufficient to improve the 3rd/Jefferson intersection to an acceptable Level of Service.

Significant Unavoidable Impacts

The following impacts associated with the Proposed Action are considered significant and unavoidable:

- Development of the project would result in an increase in long-term pollutant emissions within the project area, thus exacerbating the existing inability of the air basin to attain the national standards for ozone, carbon monoxide, and PM–10.
- Construction activities would result in short-term noise increases in excess of acceptable levels.
- The project will result in an afternoon peak hour Level of Service F at the Jefferson/Third Avenue intersection.

The General Services Administration believes that there are no additional outstanding issues to be resolved with respect to the proposed project. Additional information regarding the new Federal Building—United States Courthouse—may be directed to Mr. Alan Campbell, Portfolio Management Division (9PT), U.S. General Services Administration, 450 Golden Gate Avenue, San Francisco, CA 94102, (415) 522–3491.

Dated: August 6, 1996.

Kenn N. Kojima,

Regional Administrator (9A).

[FR Doc. 96–20667 Filed 8–13–96; 8:45 am]

BILLING CODE 6820–23–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

[ATSDR–107]

Policy on Government-to-Government Relations With Native American Tribal Governments

AGENCY: Agency for Toxic Substances and Disease Registry (ATSDR), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: This notice announces the final ATSDR policy on conducting government-to-government relationships with federally recognized tribal governments. The draft policy was published for public comment in the Federal Register on August 1, 1995 [60 FR 39176]. The public comment period

ended August 31, 1995. Comments were received from 5 individuals representing tribal governments and intertribal councils. This document reflects finalization of the ATSDR policy after consideration of those comments.

FOR FURTHER INFORMATION CONTACT: Dr. Mark M. Bashor, Associate Administrator for Federal Programs, Office of Federal Programs, Agency for Toxic Substances and Disease Registry, 1600 Clifton Road, NE., Mailstop E–28, Atlanta, Georgia 30333, telephone (404) 639–0730.

SUPPLEMENTARY INFORMATION: The Agency for Toxic Substances and Disease Registry issues the following policy statement related to its Government-to-Government Relations with Native American Tribal Governments:

The mission of ATSDR is to prevent exposure and adverse human health effects and diminished quality of life associated with exposure to hazardous substances from waste sites, unplanned releases, and other sources of pollution present in the environment. In carrying out its programs, ATSDR works with other Federal, State, and local government agencies, and tribal organizations to protect public health.

The U.S. Government has a unique government-to-government relationship with tribal governments as established by the U.S. Constitution, by treaties, by statute, by court decisions, and by Executive Orders. This relationship respects the U.S. Government's trust responsibility to American Indians and Alaskan Natives and their rights of self-government because of their sovereign status. ATSDR is strongly committed to building a more effective day-to-day working relationship with tribal governments.

In fulfilling the commitment to establish and maintain government-to-government relations with federally recognized tribal governments, ATSDR will be guided by:

(1) Section 126 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) and the principles set forth in the President's ''Memorandum for the Heads of Executive Departments and Agencies Regarding: Government-to-Government Relations with Native American Tribal Governments'' (April 29, 1994). In particular, ATSDR will:

- In a manner consistent with the protection of public health, consult with tribal governments to ensure that tribal rights and concerns are considered before ATSDR takes actions, makes decisions, or implements programs that may affect tribes; and
- Establish procedures to work directly and effectively with tribal governments.

(2) The needs and culture of individual tribal governments;

(3) ATSDR's prior and ongoing experience with tribal governments, and recognized organizations associated with such governments; and

(4) The need to enhance coordination with other agencies with related areas of responsibility.

Dated: August 8, 1996.

Claire V. Broome,

Deputy Administrator, Agency for Toxic Substances and Disease Registry.

[FR Doc. 96–20702 Filed 8–13–96; 8:45 am]

BILLING CODE 4163–70–P

Centers for Disease Control and Prevention

[INFO–96–22]

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 the CDC Reports Clearance Officer on (404) 639–7090.

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 for other forms of information technology. Send comments to Wilma Johnson, CDC Reports Clearance Officer, 1600 Clifton Road, MS–D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Projects

1. Surveillance and Evaluation of Blood Donors Positive for Human Immunodeficiency Virus (HIV) Antibody or HIV Antigen (0920–0329). In 1987, the President directed the Department of Health and Human Services (DHHS) to determine the nationwide incidence of, to predict the future of, and to determine the extent to which human immunodeficiency virus (HIV) is present in various segments of our population. In response, CDC formed an epidemiologic team to summarize existing information. An extensive review of published and unpublished data led to the conclusion that even though there is information suggesting a very large number of Americans were infected, there was no substitute for carefully and scientifically obtained incidence and prevalence data. The need to monitor HIV seroprevalence existed on the national and at the state and local levels for public health management: targeting and evaluating prevention programs, planning future health care needs and determining health policy.

On a national basis, HIV seroprevalence projects in 1987 consisted of monitoring the HIV status of: Civilian applicants for military service; blood donors, including follow-up risk factor evaluation in seropositives; and Job Corps entrants. HIV prevalence was studied in settings of special public health interest including selected colleges and prisons, among health care workers in hospital emergency rooms and among Native Americans and homeless persons. Other national data sources were examined, such as cohort studies of groups at risk, including homosexual and bisexual men and IV drug users, providing information on knowledge of AIDS and risk behaviors, changes in behavior, and incidence of HIV infection.

In 1987, OMB approved the ''Family of HIV Seroprevalence Surveys'' (0920–0232). These surveys included seven seroprevalence surveys which involved interaction with individuals (non-blinded surveys). One of these surveys was the surveillance and evaluation of blood donors positive for Human Immunodeficiency Virus (HIV) Antibody.

In 1993, OMB again approved for 3 years the surveillance and evaluation of blood donors who test positive for Human Immunodeficiency Virus (HIV) Antibody and their needle-sharing and sexual partners (0920–0329). This request is for an additional 3-year approval. The total cost to respondents is estimated at $3,784.