

included in the alternative upon completion. Because all suppliers are expected to have adequate capacity to serve the future demands resulting from the Master Plan Alternative, there would not be any significant adverse impacts on utilities. By correcting potential deficiencies in the water distribution system and other utilities on campus, the Master Plan Alternative would have a net beneficial impact on these services.

Air Quality

Air emissions at the Chamblee Campus are currently covered under a Title V permit. For the No-Action Alternative, there would be no changes in emissions that would affect the existing permit. For the Master Plan Alternative, construction equipment would generate emissions of CO, NO₂, various hydrocarbons, PM-10, and small amounts of SO₂; however, the impact of these additional emissions would be highly localized and limited to periods of construction. Short-term impacts would be minimal, and no long-term impacts would occur as a result of construction activities. After completion of Master Plan elements, site-generated traffic would increase and result in additional congestion on area streets. The associated pollutant emissions would have minor adverse impacts on air quality. However, the increases in air pollutant emissions would be minimal on a regional basis and would not be expected to cause any violations of NAAQS. In addition, as each development activity within the Master Plan Alternative is funded; the Title V permit is reviewed and updated.

Noise

For the Master Plan Alternative, noise levels in the nearby residential areas from construction activity on campus would fall within background sound levels and be masked by the intervening traffic noise. Potential short-term noise impacts will be reduced by maintaining construction equipment in good working condition with standard muffling apparatus installed, by limiting demolition and construction activities to daytime hours, and by complying with the noise restrictions of the Chamblee Code of Ordinances. Increased traffic noise after full Master Plan build-out would not have a significant impact on surrounding communities.

Rationale for Decision:

1. As part of environmental review completed for CDC, GSA conducted Public Scoping Meetings and consultations with the local community

to identify potential impacts and concerns that would result from proceeding with the proposed CDC Master Plan Alternative.

2. The community, through two Public Meetings and correspondence and consultation, identified no issues.

3. GSA consulted with other government agencies including local, State, and Federal Agencies, to solicit their input on the proposed Master Plan Alternative. All issues identified and responses provided are presented in the Draft and Final EIS documents.

4. GSA consulted with the State Historic Preservation Officer and received reconfirmation the proposed action would have no effect on historic properties.

5. Potential impacts that were identified during the NEPA process will be mitigated with additional NEPA documentation if necessary as individual projects are funded. CDC will institute the mitigation measures identified in the EIS and will consult with the appropriate groups and agencies at the appropriate time to insure that the identified mitigation measures are implemented.

6. Should potentially significant impacts be later identified in the future development of the Master Plan, CDC will conduct additional NEPA documentation before proceeding with the implementation of the Master Plan. In this event, CDC will supplement this EIS with additional documentation identifying the mitigation measures as required by the National Environmental Policy Act.

Therefore, having given consideration to all of the factors discovered during the 16-month environmental review process, the NEPA process is completed with the execution of this document for the CDC Proposed Action is the implementation of the Master Plan Alternative at the CDC Campus in Chamblee, Georgia, and is outlined in the Final Environmental Impact Statement Dated July 6, 2002, and this Record of Decision.

Dated: February 20, 2003.

Philip B. Youngberg,

Environmental Manager, Southeast Sunbelt Region, General Services Administration.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY-31-03]

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) 498-1210. 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: Test of Four Intimate Partner Violence (IPV) Measurement—New—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Intimate partner violence (IPV) is considered by many to be a serious problem that cuts across cultures, socioeconomic status and gender. The Centers for Disease Control and Prevention (CDC) considers IPV to be a "substantial public health problem for Americans that has serious consequences and costs for individuals, families, communities and society." The past 20 years have witnessed an extraordinary growth in research on the prevalence, incidence, causes and effects of IPV. Various disciplines have contributed to the development of research on the subject including psychology, epidemiology, criminology and public health.

Still, there is a lack of reliable information on the extent and prevalence of IPV. Estimates vary widely regarding the magnitude of the problem. This variance is due in large part to the different contexts, instruments, and methods that are used to measure IPV. Thus, the CDC is engaged in work to improve the quality of data, and hence knowledge, about violence against women. Part of this process includes identifying the strengths and limitations of different scales used to measure IPV and to determine the appropriateness of each of the scales for use with individuals of different racial/ethnic backgrounds.

The purpose of this project is to administer and test the statistical properties of four scales, via telephone

interviews, that measure both victimization from and perpetration of intimate partner violence (IPV). The scales will be administered to a random sample of women ages 18–50, from five racial/ethnic backgrounds: African-American, American Indian, Asian, Caucasian and Hispanic.

The four scales are: the Sexual Experiences Survey (SES), the Conflict

Tactics Scale 2 (CTS2), the Index of Spouse Abuse (ISA) and the Women's Experience with Battering (WEB) scale. The survey instrument will contain each of these scales and introductory and transitional text developed specifically for this study.

The overall benefit of this project is to increase knowledge about the reliability and validity of these scales, which have

been used in previous studies. Ultimately, this knowledge will assist the CDC in establishing an on-going data collection system for monitoring IPV. The National Center for Injury Prevention and Control (NCIPC) intends to contract with an agency to conduct the survey. The estimated annualized burden is 2,035 hours.

Data collection instrument	Number of respondents	Number of responses/ respondent	Average burden/respondent (in hours)
Pilot Test	50	1	42/60
Screening Interviews	12,000	1	3/60
IPV Measurement Scales	2,000	1	42/60

Dated: February 25, 2003.

Thomas Bartenfeld,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY–28–03]

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) 498–1210. 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: Reader Evaluation of ATSDR Agency Profile and Annual Report—New—The Agency for Toxic Substances and Disease Registry (ATSDR) publishes an agency profile and annual report every fiscal year to highlight the agency's major activities and findings. The report provides a record of the agency's significant accomplishments in meeting its mandates under the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), as amended, and other federal statutes. The annual report gives a snapshot of the agency's activities for the fiscal year. It is distributed to our partners in state, Federal, and other agencies; to researchers; schools of public health; and other interested

groups. It is also available on the ATSDR Internet Web site and by request.

ATSDR staff has developed a reader survey to get readers' opinions and suggestions about the agency annual report. The survey will be inserted and mailed with each annual report. An online version of the reader survey will be available on the ATSDR Web site. The survey will collect information on the readability and effectiveness of the report, the affiliation of the readers, and any suggestions on improving readability or content.

It is anticipated that the reader survey will provide important feedback that will enable ATSDR staff to better tailor future reports to the needs of its readers. Gathering reader feedback will ensure that appropriate information is included in the document to provide a good overview of the agency's activities. The information will be used to improve customer satisfaction related to the annual report. The annualized estimated burden is 41 hours.

Respondents	Number of respondents	Number of responses/ respondent	Avg. burden/response (in hours)
Academia	100	1	5/60
State and Local Government Staff	100	1	5/60
General Public	300	1	5/60

Dated: February 25, 2003.

Thomas A. Bartenfeld,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY–29–03]

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) 498–1210. Send written comments to CDC, Desk Officer, Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503. Written