about REMS programs, understand and comply with REMS requirements, and compare requirements across REMS to minimize confusion associated with complying with multiple REMS programs.

### C. Scope of the Report

This report describes the Agency's findings concerning strategies to standardize REMS where appropriate, with the goal of reducing the burden of implementing REMS on practitioners, patients, and others in various health care settings. This report contains project plans to: (1) Increase access to REMS-related information through the use of SPL, (2) enhance the Agency's REMS Web page to better meet the needs of stakeholders, (3) assess the feasibility of using accredited CE courses for prescriber training, and (4) enhance existing tools for prescribers to communicate with patients regarding risks of drugs with REMS, and how those risks should be weighed against the potential benefits of the drug.

### III. Electronic Access

Persons with access to the Internet may obtain the document on FDA's Web site at http://www.fda.gov/ForIndustry/UserFees/PrescriptionDrugUserFee/ucm350852.htm or http://www.regulations.gov.

### IV. Comments

Interested persons may submit either electronic comments regarding this document to http://www.regulations.gov or written comments to the Division of Dockets Management (see ADDRESSES). It is only necessary to send one set of comments. Identify comments with the docket number found in brackets in the heading of this document. Received comments may be seen in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday, and will be posted to the docket at http:// www.regulations.gov. After consideration of comments, FDA will finalize the report and project plans. The Agency intends to post updates to the project plans on FDA's Web site.

Dated: September 17, 2014.

#### Leslie Kux,

Assistant Commissioner for Policy. [FR Doc. 2014–22513 Filed 9–22–14; 8:45 am]

BILLING CODE 4164-01-P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **National Institutes of Health**

Submission for OMB Review; 30-Day Comment Request: State and Community Tobacco Control Research Initiative Evaluation (NCI)

**SUMMARY:** Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH), has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the Federal Register on June 6, 2014 (79 FR 32742) and allowed 60 days for public comment. One public comment was received. The purpose of this notice is to allow an additional 30 days for public comment. The National Cancer Institute (NCI), National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, OIRA\_submission@omb.eop.gov or by fax to 202–395–6974, Attention: NIH Desk Officer.

Comment Due Date: Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

FOR FURTHER INFORMATION CONTACT: To obtain a copy of the data collection plans and instruments or request more information on the proposed project contact: Elizabeth M. Ginexi, Ph.D., Tobacco Control Research Branch, Behavioral Research Program, Division of Cancer Control and Population Sciences, National Cancer Institute, 9609 Medical Center Drive, Room 3E564 MSC 9761, Bethesda, Maryland 20892–9761 or call non-toll-free number 240–276–6765 or email your request, including your address to: LGinexi@mail.nih.gov. Formal requests for

additional plans and instruments must be requested in writing.

Proposed Collection: State and Community Tobacco Control Research Initiative Evaluation (SCTC), 0925– NEW, National Cancer Institute (NCI), National Institutes of Health (NIH).

Need and Use of Information Collection: The National Cancer Institute State and Community Tobacco Control Research Initiative is a program within the Tobacco Control Research Branch in the Behavioral Research Program of the Division of Cancer Control and Population Sciences. The program targets 4 high-priority tobacco control research areas at the state and community level in the United States: (1) Secondhand smoke policies, (2) Tobacco tax and pricing policies, (3) Mass media countermeasures and community and social norms, and (4) Tobacco industry practices. The initiative supports innovative research to yield rapid and actionable findings for state and community tobacco control programs. The purpose of the evaluation is to assess the dissemination, implementation, and community collaboration processes of the grantees and their respective state and community partners and stakeholders. The evaluation will utilize archival grant project data and archival data collected from the scientists in the first two years of the initiative. The evaluation also will collect new data to: (1) Determine relationships, interactions, and connectedness among different network partnerships over time and with policy makers; (2) assess the utility of research tools, interventions, products, and findings from the perspective of key tobacco control stakeholders; and (3) determine key indicators for broad adoption of research products. Results will address research-to-practice gaps by providing a critical window into the process of disseminating evidence-based research tools, products, and science findings in community public health settings. Intended audiences include staff at NIH Institutes and Centers interested in supporting translation/dissemination and implementation science.

OMB approval is requested for one year. There are no costs to respondents other than their time. The total estimated annualized burden hours are 112.

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Type of respondent	Data collection type	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total annual burden hours
SCTC Scientist	Web Survey	60	1	20/60	20
Affiliated Partner	Web Survey	71	1	20/60	24
	Telephone Interview	21	1	40/60	14
	Script to Schedule Telephone Interview	7	1	5/60	1
Pilot Project	Telephone Interview	6	1	40/60	4
Working Group	Telephone Interview	6	1	40/60	4
Coordinating Center	Telephone Interview	2	1	40/60	1
PI/Co-PI	Expert Panel	18	1	90/60	27
	Consent Form	18	1	5/60	2
	Telephone Script to Schedule Interview	6	1	5/60	1
	Telephone Interview	21	1	40/60	14

Dated: September 17, 2014.

### Karla Bailey,

NCI Project Clearance Liaison, National Institutes of Health.

[FR Doc. 2014-22586 Filed 9-22-14; 8:45 am]

BILLING CODE 4140-01-P

## DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. 5774-N-02]

# Promise Zones Initiative: Second Round Application Process

**AGENCY:** Office of Assistant Secretary for Housing—Federal Housing Commissioner, HUD.

**ACTION:** Notice.

**SUMMARY:** Through this notice, HUD provides notice on the selection process, criteria, and application submission for the second round of the Promise Zone initiative.

**DATES:** Application due date is 5:00 p.m. on November 21, 2014.

ADDRESSES: Interested eligible organizations are invited to submit applications for a Promise Zone designation. Questions or comments regarding the application process should be directed by email to Promisezones@hud.gov. Questions or comments may also be directed by postal mail to the Office of the Deputy Assistant Secretary for Economic Development, U.S. Department of Housing and Urban Development, 451 Seventh Street SW., Room 7244, Washington, DC 20410, ATTN: Second Round Promise Zone selections.

### FOR FURTHER INFORMATION CONTACT:

Brooke Bohnet, U.S. Department of Housing and Urban Development, 451 7th Street SW., Washington, DC 20410; telephone number 202–402–6693. This is not a toll-free number. Persons with hearing or speech impairments may access this number through TTY by calling the toll-free Federal Relay Service at (800) 877–8339.

#### SUPPLEMENTARY INFORMATION:

### **Background**

In his 2013 State of the Union address, President Obama announced the establishment of the Promise Zones initiative to partner with high-poverty communities across the country to create jobs, increase economic security, expand educational opportunities, increase access to quality, affordable housing, and improve public safety. On January 8, 2014, the President announced the first five Promise Zones, which are located in: San Antonio, TX; Philadelphia, PA; Los Angeles, CA; Southeastern Kentucky, KY; and the Choctaw Nation of Oklahoma, OK. Each of these communities (three urban, one rural, and one tribal) submitted a plan on how it will partner with local business and community leaders to make investments that reward hard work and expand opportunity. In exchange, the Federal government is helping these Promise Zone designees secure the resources and flexibility they need to achieve their goals.2 The urban designations were conferred by HUD, while the rural and tribal designations were conferred by USDA.

### **Promise Zones Benefits**

The Promise Zone designation partners the Federal government with local leaders who are addressing multiple community revitalization challenges in a collaborative way and have demonstrated a commitment to results. Further, Promise Zones will be assigned Federal staff to help navigate the array of Federal assistance and programs already available to them. In addition, eligible applicants in Promise Zones will receive any available (a) preference for certain competitive Federal programs and (b) technical assistance. Subject to enactment by Congress, businesses investing in Promise Zones or hiring residents of Promise Zones will be eligible to receive tax incentives. Altogether, this package of assistance will help local leaders accelerate efforts to revitalize their communities.

The Promise Zone designation will be for a term of 10 years and may be extended as necessary to capture the full term of availability of the Promise Zone tax incentives, if the tax incentives are enacted. During this term, the specific benefits made available to Promise Zones may vary from year to year, and sometimes more often than annually, due to changes in Federal agency policies and changes in appropriations and authorizations for relevant programs. All assistance provided to Promise Zones is subject to applicable regulations, statutes, and changes in federal agency policies, appropriations, and authorizations for relevant programs. Subject to these limitations, the Promise Zone designation commits the Federal government to partner with local leaders who are addressing multiple community revitalization challenges in a collaborative way and have demonstrated a commitment to results.

### **Response to Public Comment**

On April 17, 2014, HUD published a notice in the **Federal Register** 79 FR 21785 to solicit comments from first round applicants, interested parties, and the general public on the first round of the Promise Zones initiative and the proposed selection process for the second round of the Promise Zone initiative. The public comment period

<sup>&</sup>lt;sup>1</sup> See http://www.whitehouse.gov/the-press-office/2013/02/15/fact-sheet-president-s-plan-ensure-hard-work-leads-decent-living.

<sup>&</sup>lt;sup>2</sup> See http://www.whitehouse.gov/the-press-office/ 2014/01/08/fact-sheet-president-obama-s-promisezones-initiative