detention and certification for mercury residues. This request is based on concern that inconsistencies in sampling procedures between FDA and industry can lead to inconsistencies in analytical results between private laboratories and FDA laboratories.

These guidelines are available for review at the Dockets Management Branch (address above) between 9 a.m. and 4 p.m., Monday through Friday.

Dated: October 2, 1987.

John M. Taylor,

Associate Commissioner for Regulatory Affairs.

[FR Doc. 87-23255 Filed 10-7-87; 8:45 am] BILLING CODE 4160-01-M

### [Docket No. 87M-0304]

Premarket Approval of Sandimmune® Radioimmunoassay Kit; Sandoz Pharmaceuticals Corp.

AGENCY: Food and Drug Administration.
ACTION: Notice.

SUMMARY: The Food and Drug
Administration (FDA) is announcing its
approval of the application by Sandoz
Pharmaceutical Corp., East Hanover, NJ,
for premarket approval, under the
Medical Device Amendments of 1976, of
the Sandimmune\* Radioimmunoassay
Kit. After reviewing the
recommendation of the Clinical
Chemistry and Clinical Toxicology
Devices Panel, FDA's Center for Devices
and Radiological Health (CDRH)
notified the applicant of the approval of
the application.

DATE: Petitions for administrative review by November 9, 1987.

ADDRESS: 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, Rm. 4-62, 5600 Fishers Lane, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: Kaiser Aziz, Center for Devices and Radiological Health (HFZ-440), Food and Drug Administration, 8757 Georgia Avenue, Silver Spring, MD 20910, 301– 427–7550.

SUPPLEMENTARY INFORMATION: On November 26, 1985, Sandoz
Pharmaceutical Corp., East Hanover, NJ 07936, submitted to CDRH an application for premarket approval of the Sandimmune\* Radioimmunoassay Kit. The device is an in vitro radioimmunoassay kit for the cyclosporine drug Sandimmune. It is indicated for measuring levels of Sandimmune. in whole blood, plasma,

or serum as an aid in monitoring the dosage of the drug.

On October 27, 1986, the Clinical Chemistry and Clinical Toxicology Devices Panel, an FDA advisory committee, reviewed and recommended approval of the application. On August 31, 1987, 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.

A copy of all approved labeling is available for public inspection at CDRH—contact Kaiser Aziz (HFZ-440), address above.

## Opportunity for Administrative Review

Section 515(d)(3) of the Federal Food. Drug, and Cosmetic Act (the act) (21 U.S.C. 360e(d)(3)) authorizes any interested person to petition, under section 515(g) of the act (21 U.S.C. 360e(g)), for administrative review of CDRH's decision to approve this application. A petitioner may request either a formal hearing under Part 12 (21 CFR Part 12) of FDA's administrative practices and procedures regulations or a review of the application and CDRH's action by an independent advisory committee of experts. A petition is to be in the form of a petition for reconsideration under § 10.33(b) (21 CFR 10.33(b)). A petitioner shall identify the form of review requested (hearing or independent advisory committee) and shall submit with the petition supporting data and information showing that there is a genuine and substantial issue of material fact for resolution through administrative review. After reviewing the petition, FDA will decide whether to grant or deny the petition and will publish a notice of its decision in the Federal Register. If FDA grants the petition, the notice will state the issue to be reviewed, the form of review to be used, the persons who may participate in the review, the time and place where the review will occur, and other details.

Petitioners may, at any time on or before November 9, 1987, file with the Dockets Management Branch (address above) two copies of each petition and supporting data and information, identified with the name of the device and the docket number found in brackets in the heading of this document. Received petitions may be seen in the office above between 9 a.m. and 4 p.m., Monday through Friday.

This notice is issued under the Federal Food, Drug, and Cosmetic Act (secs. 515(d), 520(h), 90 Stat. 554–555, 571 (21 U.S.C. 360e(d), 360(h))) and under authority delegated to the Commissioner of Food and Drugs (21 CFR 5.10) and redelegated to the Director, Center for Devices and Radiological Health (21 CFR 5.53).

Dated: September 30, 1987.

John C. Villforth,

Director, Center for Devices and Radiological Health.

[FR Doc. 87-23320 Filed 10-7-87; 8:45 am] BILLING CODE 4160-01-M

## **Public Health Service**

# Office of Minority Health; Delegation of Authority

Notice is hereby given that in furtherance of the delegation by the Secretary of Health and Human Services on January 14, 1981, to the Assistant Secretary for Health, the Assistant Secretary for Health has delegated to the Director, Office of Minority Health, with authority to redelegate, all the authority delegated to the assistant Secretary for Health under Title III of the General Powers and duties of Public Health Service Act, section 301 [42 U.S.C. 241), as amended, relative to research, investigation, and testing functions, insofar as they pertain to the functions assigned to the Office of Minority Health. In addition, I hereby affirm and ratify any actions taken by the director, Office of Minority Health, and subordinates which involved the exercise of the authorities delegated herein prior to the effective date of delegation. The authorities delegated exclude the authorities to promulgate regulations and to submit reports to the Congress.

The delegation to the Director, Office of Minority Health became effective on September 29, 1987.

Date: September 29, 1987.
Robert E. Windom,
Assistant Secretary for Health.
[FR Doc. 87-23319 Filed 10-7-87; 8:45 am]
BILLING CODE 4168-17-M

## Privacy Act of 1974; New System of Records

**ACTION:** Notification of a new system of records.

SUMMARY: In accordance with the requirements of the Privacy Act, the Public Health Service (PHS) is publishing a notice of a new system of records, 09–30–0049, "Consultant Records Maintained by ADAMHA Contractors, HHS/ADAMHA/OA." We are also proposing routine uses for this new system.

pates: PHS invites interested parties to submit comments on the proposed routine uses on or before November 9, 1987. PHS has sent a Report of a New System to the Congress and to the Office of Management and Budget (OMB) on October 1, 1987. The routine uses will be effective 30 days after the date of publication unless PHS receives comments which would result in a contrary determination.

ADDRESS: Please submit comments to: Privacy Act Officer, Alcohol, Drug Abuse, and Mental Health Administration, Room 6–102, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443–4543.

Comments received will be available for inspection at this same address from 8:30 a.m. to 4 p.m., Monday through Friday.

FOR FURTHER INFORMATION CONTACT: Contract Officer, National Institute on Drug Abuse, Room 10–49, Parklawn Building, 5600 Fishers Lane, Rockville,

The numbers listed above are not toll

Maryland 20857, (301) 443-6677.

SUPPLEMENTARY INFORMATION: The Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) proposes to establish a new system of records: 09–30–0049, "Consultant Records Maintained by ADAMHA Contractors, HHS/ADAMHA/OA." This proposed umbrella system of records will comprise records generated by ADAMHA contractors who provide logistical support for review of grants and/or contracts, conferences, meetings, etc. The records will be used to obtain and pay consultants.

Records collected under this system will be organized and maintained according to the particular study which they support. Records will not be entered into a general or comprehensive data base, nor will there be any general index identifying all persons who are subjects of records in the separate studies covered by this system. However, ADAMHA will be treating the separate sets of records as a single system under the Privacy Act (1) because all of the sets of records serve the same purposes and contain similar types of data. (2) in order to apply consistent policies and practices in the maintenance of such records, and (3) to

make it easier for subject individuals to obtain notification of, or access to, their records.

Individuals will be required to supply Social Security numbers in order to receive payment. However, ADAMHA will not use records in this system to make any determination concerning rights, benefits, or privileges of the individuals.

The records in this system will be maintained in a secure manner compatible with their content and use. Access will be given only to authorized contractor staff whose official duties require access for purposes of carrying out the contract. Individually identifiable records will be kept in a locked, limited-access area. Computerized records will be maintained in accordance with Part 6, "ADP System Security," in the HHS Information Resource Management Manual.

The first routine use proposed for this system allows disclosure to the Department of Justice or a court in the event of litigation. The second routine use, permitting disclosure to a congressional office, is proposed to allow subject individuals to obtain assistance from their representatives in Congress, should they so desire. The third routine use is proposed to allow contractors to accomplish logistical work related to the projects. The fourth routine use proposes to allow disclosure to the Internal Revenue Service of customary tax information related to payment of consultants and experts.

This system notice is written in the present, rather than the future tense, in order to avoid the unnecessary expenditure of public funds to republish the notice after it becomes effective.

Dated: October 1, 1987.

### Wilford J. Forbush,

Deputy Assistant Secretary for Health Operations and Director, Office of Management.

## 09-30-0049

## SYSTEM NAME:

Consultant Records Maintained By ADAMHA Contractors, HHS/ADAMHA/OA.

## SECURITY CLASSIFICATION:

None.

#### SYSTEM LOCATION:

Records are located at various contractor sites. A list of specific contractor sites is available from the appropriate System Manager.

## CATEGORIES OF INDIVIDUALS COVERED BY THE SYSTEM:

Consultants who participate in Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) conferences, meetings, evaluation projects, or technical assistance at site locations arranged by contractors.

#### CATEGORIES OF RECORDS IN THE SYSTEM:

Names, addresses, Social Security numbers, qualifications, curricula vitae, travel records, and payment records for consultants.

## AUTHORITY FOR MAINTENANCE OF THE SYSTEM:

Public Health Service Act, as amended, Section 501, (42 U.S.C. 290aa). This section covers program authorities for ADAMHA and its three Institutes.

### PURPOSE(S):

This umbrella system of records covers a varying number of separate sets of records used in different projects. These records are established by contractors to organize programs, obtain and pay consultants, and to provide necessary reports related to payment to the Internal Review Service for these programs for ADAMHA. ADAMHA personnel may use records when a technical assistance consultant is needed for a specialized area of research, review, advice, etc.

#### ROUTINE USES OF RECORDS MAINTAINED IN THE SYSTEM, INCLUDING CATEGORIES OF USERS AND THE PURPOSES OF SUCH USE:

1. The Department of Health and Human Services (HHS) may disclose information from this system of records to the Department of Justice, or to a court or other tribunal, when (a) HHS, or any component thereof; or (b) any HHS employee in his or her official capacity; or (c) any HHS employee in his or her individual capacity where the Department of Justice (or HHS, where it is authorized to do so) has agreed to represent the employee; or (d) the United States or any agency thereof where HHS determines that the litigation is likely to affect HHS or any of its components, is a party to litigation or has an interest in such litigation, and HHS determines that the use of such records by the Department of Justice, the court or other tribunal is relevant and necessary to the litigation and would help in the effective representation of the governmental party, provided however, that in each case, HHS determines that such disclosure is compatible with the purpose for which the records were collected.

2. Disclosure may be made to a congressional office from the record of

an individual in response to a verified inquiry from the congressional office made at the written request of that individual.

3. ADAMHA proposes to contract with private firms for the purposes of handling logistics for conferences, reviews, development of training materials, and of obtaining the services of consultants. Relevant records will be disclosed to such a contractor or may be developed by the contractor for use in the project. The contractor shall be required to maintain Privacy Act safeguards with respect to such records.

4. Information in this system of records is used routinely to prepare W-2 and 1099 Forms to submit to the Internal Revenue Service and applicable State and local governments those items to be included as income to an individual.

POLICIES AND PRACTICES FOR STORING, RETRIEVING, ACCESSING, RETAINING AND DISPOSING OF RECORDS IN THE SYSTEM:

#### STORAGE:

Records may be stored in file folders, on index cards, computer tapes and disks, microfiche, microfilm.

#### RETRIEVABILITY:

Information will be retrieved by name.

#### SAFEGUARDS:

Measures to prevent unauthorized disclosures are implemented as appropriate for each location. Each site implements personnel, physical, and procedural safeguards such as the following:

1. Authorized Users: Only ADAMHA personnel working on these projects and personnel employed by ADAMHA contractors to work on these projects are authorized users as designated by the system managers.

 Physical Safeguards: Records are stored in locked rooms, locked file cabinets, and/or secured computer facilities.

3. Procedural Safeguards: Contractors who maintain records in this system are instructed to make no further disclosure of the records except as authorized by the system manager and permitted by the Privacy Act. Privacy Act requirements are specifically included in contracts and in agreements with grantees or collaborators participating in research activities supported by this system. HHS project directors, contract officers, and project officers oversee compliance with these requirements.

4. Implementation Guidelines: DHHS Chapter 45–13 and supplementary Chapter PHS.hf: 45–13 of the General Administration Manual, and Part 6, "ADP System Security" in the HHS Information Resource Management Manual.

#### RETENTION AND DISPOSAL:

Records will be destroyed 3 years after they are no longer used, or, if payment is involved, 3 years after closeout of the contract.

### SYSTEM MANAGER(S) AND ADDRESS:

The policy coordinating official for this system of records is also the System Manager for NIDA.

Contract Officer, National Institute on Drug Abuse, RM 10–49 Parklawn, 5600 Fishers Lane, Rockville, Maryland 20857

Contract Officer, National Institute of Mental Health, RM 15–81 Parklawn, 5600 Fishers Lane, Rockville, Maryland 20857

Contract Officer, National Institute on Alcohol Abuse and Alcoholism, RM 14C-06 Parklawn, 5600 Fishers Lane, Rockville, Maryland 20857

#### NOTIFICATION PROCEDURES:

To determine if a record exists, write to the appropriate System Manager at the address above. Provide notarized signature as proof of identity. The request should include as much of the following information as possible: (a) Full name; (b) title of projet individual participated in; (c) ADAMHA project officer; and (d) approximate date(s) of participation.

## RECORD ACCESS PROCEDURES:

Same as notification procedures. Requesters should also reasonably specify the record contents being sought. Individuals may also request an accounting of disclosures of their records, if any.

#### CONTESTING RECORD PROCEDURES:

Contact the official at the address specified under Notification Procedures above and reasonably identify the record, specify the information being contested, and state the corrective action sought, with supporting information to show how the record is inaccurate, incomplete, untimely, or irrelevant.

## RECORD SOURCE CATEGORIES:

Information gathered from individual consultants and from assignment or travel documents.

## SYSTEMS EXEMPTED FROM CERTAIN PROVISIONS OF THE ACT:

None.

[FR Doc. 87-23321 Filed 10-7-87; 8:45 am] BILLING CODE, 4160-20-M

## Privacy Act; Systems of Records

**AGENCY:** Public Health Service; Department of Health and Human Services.

ACTION: Notification of new system of records, 09–37–0020, "Office of Minority Health Grant Records System, HHS/ OASH/OMH."

SUMMARY: In accordance with the requirements of the Privacy Act, the Public Health Service (PHS) is publishing a notice of a proposal to create a new system of records, 09–37–0020 "Office of Minority Health Grants Records System, HHS/OASH/OMH." This new system will maintain the grant files for the Office of Minority Health. We are proposing nine routine uses for this system.

DATE: PHS invites interested persons to submit comments on the proposed routine uses on or before November 9, 1987. PHS has sent a report of the new system to the Congress and to the Office of Management and Budget (OMB) on October 1, 1987. The system of records will be effective 60 days from the date submitted to OMB, unless PHS receives comments on the routine uses which would result in a contrary determination.

ADDRESS: Please submit comments to: Mr. J. Henry Montes, Associate Director for External Programs, Office of Minority Health, PHS, Room 118F, HHH Building, 200 Independence Ave., SW., Washington, D.C. 20201.

Comments received will be available for inspection at the same address from 9:00 a.m. to 4:00 p.m., Monday through Friday.

FOR FURTHER INFORMATION CONTACT: Ralph L. Sloat, Chief, Grants Management Branch, Room 18A–10, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857, Telephone (301) 443–4033. This is not a toll free number.

### SUPPLEMENTARY INFORMATION:

The Office of Minority Health (OMH) is proposing to establish a new system of records which will contain its grant program records. The Report of the Secretary's Task Force on Black and Minority Health identified six health problems that account for 80 percent of the excess deaths among minorities. These six, listed in alphabetical order are: cancer; cardiovascular disease and stroke; chemical dependency, measured by death due to cirrhosis; diabetes; homicide, suicide, and accidents (unintentional injuries); and infant mortality. This grant program is designed to stimulate community

coalitions to work on activities aimed at reducing the risk factors associated with these six categories of disease.

There are nine routine uses of information proposed for this new system. These routine uses will permit OMH to release information in certain specified cases to other organizations or individuals for assistance in review of applications or for good administrative procedures, or to protect the government's interests.

Specifically, routine uses are proposed

for the following situations:

Routine use 1 will permit OMH to respond to a Congressional inquiry made at the request of a subject individual.

Routine use 2 will permit the DHHS to provide information to the Department of Justice or any other agency in cases where government litigation interests

require it.

Routine use 3 will permit OMH to make use of an outside consulting firm to make special analyses, if needed, on trends or data in OMH grant files and for other management purposes. Any such firms would have to certify to abide by Privacy Act requirements before being given access to any files in the system of records.

Routine use 4 will permit OMH to utilize the expertise of individuals who are not official members of a grant review committee to provide comments on particular applications as requested by the Executive Secretary of the review

committee.

Routine use 5 will permit OMH to respond to any valid request which may be received from another Federal agency for information in a particular grant file which might bear on an employment, licensing, contracting or grant award action to be taken by that agency.

Routine use 6 acknowledges that OMH will respond to any valid subpoena issued by a Federal agency which may be received requesting information in the system of records.

Routine use 7 permits OMH to assist in any requests for information by the

cognizant audit agency.

Routine use 8 permits OMH to assist with any investigation of a violation or potential violation of law by making information in a particular file in the system of records available to the appropriate Federal or State agency as requested.

Routine use 9 permits OMH to disclose information to a grantee in the grant file relevant to the administration

of that grant.

The records will be maintained in locked files with general building security. The records will be available

to staff of the Office of Minority Health for administrative purposes, other DHHS staff with a need-to-know, and to contractors for data analysis. Contractors will be bound by the same confidentiality rules that apply to staff.

This notice is written in the present tense, rather than in the future tense, in order to avoid the unnecessary expenditure of public funds to republish the notice after the system becomes effective.

Dated: October 1, 1987.

## Wilford J. Forbush,

Deputy Assistant Secretary for Health Operations and Director, Office of Management, Public Health Service.

### 09-37-0020

#### SYSTEM NAME:

Office of Minority Health Grants Records System, HHS/OASH/OMH.

## SECURITY CLASSIFICATION:

None.

#### SYSTEM LOCATION:

Office of Minority Health, Parklawn Building, Room 18A–10, 5600 Fishers Lane, Rockville, Maryland 20857.

A current list of contractor sites is available by writing to the address below under SYSTEM MANAGER.

Inactive records are located at the Federal Records Center, 4205 Suitland Road, Suitland, Maryland 20409.

## CATEGORIES OF INDIVIDUALS COVERED BY THE SYSTEM:

Project Grant Program Directors.

#### CATEGORIES OF RECORDS IN THE SYSTEM:

Grant files, including grant applications, grant award notices, summary comments of peer reviewers, salary information, staffing lists, general correspondence, and Social Security Numbers (optional).

#### AUTHORITY FOR MAINTENANCE OF THE SYSTEM:

Public Health Service Act Section 301 (42 U.S.C. 242). This section authorizes support of health-related grants.

#### PURPOSE(S):

The information in this system is used to facilitate day-to-day grants management operations and for purposes of review, analysis, planning and policy formulation by OMH staff members and by other components of DHHS.

#### ROUTINE USES OF RECORDS MAINTAINED IN THE SYSTEM, INCLUDING CATEGORIES OF USERS AND THE PURPOSES OF SUCH USES:

(1) Disclosure may be made to a congressional office from the record of an individual in response to an inquiry from the congressional office made at the request of that individual.

(2) The Department may disclose information from this system of records to the Department of Justice, to a court or other tribunal, when

(a) HHS, or any component thereof; or

(b) Any HHS employee in his or her

official capacity; or

(c) Any HHS employee in his or her individual capacity where the Department of Justice (or HHS, where it is authorized to do so) has agreed to

represent the employee; or

- (d) The United States or any agency thereof where HHS determines that the litigation is likely to affect HHS or any of its components, is a party to litigation or has an interest in such litigation, and HHS determines that the use of such records by the Department of Justice, the court or other tribunal, is relevant and necessary to the litigation and would help in the effective representation of the governmental party, provided, however, that in each case, HHS determines that such disclosure is compatible with the purpose for which the records were collected.
- (3) Disclosure may be made to a private firm for the purposes of providing services related to grant review, or for carrying out quality assessment, program evaluation, and/or management reviews. Any such contractors will be required to maintain Privacy Act safeguards with respect to such records.

(4) Disclosure may be made to qualified experts not within the definition of Department employees for opinions as a part of the application

review and award process.

- (5) Disclosure may be made to a Federal agency, in response to its request, in connection with the hiring or retention of an employee, the issuance of security clearance, the reporting of an investigation of an employee, the letting of a contract, or the issuance of a license, grant, or other benefit of the requesting agency, to the extent that the record is relevant and necessary to the requesting agency's decision on the matter.
- (6) Where Federal agencies having power to subpoena other Federal agencies' records, such as the Internal Revenue Service or Civil Rights Commission, issue a subpoena to the Department for records in this system of records, the Department will make such records available.

(7) Disclosure may be made to the cognizant Audit Agency for auditing.

(8) In the event that a system of records maintained by the Department indicates a violation or potential violation of law, whether civil, criminal, or regulatory in nature, and whether arising by statute or by regulation, rule or order issued pursuant thereto, the relevant records in the system of records may be referred as a routine use, to the appropriate agency, whether Federal (e.g., the Department of Justice), or State (e.g., the State Attorney General's office) charged with the responsibility of investigating or prosecuting such violation or charged with enforcing or implementing the statute or rule, regulation or order issued pursuant thereto for litigation.

(9) Disclosure may be made to the grantee institution in connection with performance or administration under the terms and conditions of the award.

POLICIES AND PRACTICES FOR STORING, RETRIEVING, ACCESSING, RETAINING, AND DISPOSING OF RECORDS IN THE SYSTEM:

#### STORAGE:

Manual files (files folders).

#### RETRIEVABILITY:

Retrievable by program director name and grant number.

#### SAFEGUARDS:

- 1. Authorized Users: Only staff members of the office of Minority Health (OMH) have regular access. Staff members of other DHHS components have access on a need-to-know basis only.
- Physical Safeguards: Locked file cabinets, locked offices, general building security.
- 3. Procedural Safeguards: OMH staff may inspect and review records, with the approval of Grant Management Branch staff. Other DHHS staff will be granted access by the System manager only on a need-to-know basis. Visitors will not be left unattended in the office containing the files. Grant records are either transmitted in sealed envelopes or are hand-carried.

### RETENTION AND DISPOSAL:

Approved grant applications and their respective files are retained by OMH for one year beyond the termination date of the project. Disapproved grant applications are held for six months. The grant files are then retired to a Federal Records Center and subsequently disposed of in accordance with the PHS/OASH records control schedule. The records control schedule may be obtained by writing to the System Manager at the following address.

## SYSTEM MANAGER(S) AND ADDRESS:

Mr. J. Henry Montes, Associate Director for External Programs, Office of Minority Health, PHS, Room 118F, HHH Building, 200 Independence Ave. SW, Washington, DC 20201.

## NOTIFICATION PROCEDURE:

To determine if a record exists, write to the System Manager at the above address. Specify program director's name and/or grant number.

### RECORD ACCESS PROCEDURE:

Same as notification procedures. Requesters should also reasonably specify the record contents being sought. Positive identification is required. You may also request an accounting of disclosures that have been made of your record, if any.

#### CONTESTING RECORD PROCEDURES:

Contact the official at the address specified under System Manager above and reasonably identify the record, specify the information being contested, the corrective action sought, and your reasons for requesting the correction, along with supporting information to show how the record is inaccurate, incomplete, untimely, or irrelevant.

#### RECORD SOURCE CATEGORIES:

Grant applications, reports and correspondence from organizations interested in improving minority health, summary statements from grant review committees and incoming correspondence from project staff.

## SYSTEMS EXEMPTED FROM CERTAIN PROVISIONS OF THE ACT:

None

[FR Doc. 87-23322 Filed 10-7-87; 8:45 am]

## DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

Office of Assistant Secretary for Housing—Federal Housing Commissioner

[Docket No. N-87-1739; FR-2417]

## National Manufactured Home Advisory Council; Meeting

AGENCY: Assistant Secretary for Housing-Federal Housing Commissioner, HUD.

ACTION: Notice, meeting of National Manufactured Home Advisory Council.

SUMMARY: This notice announces a meeting of the National Manufactured Home Advisory Council. The meetings will be held on October 29, and 30, 1987.

## FOR FURTHER INFORMATION CONTACT: Mabel Mishler, Compliance Branch, Manufactured Housing and Construction

Standards Division, Office of Manufactured Housing and Regulatory Functions, 451 7th Street, SW., Room 9158, Washington, DC 20410–8000; telephone: (202) 755–6584. (This is not a toll-free number).

SUPPLEMENTARY INFORMATION: The National Manufactured Housing Construction and Safety Standards Act of 1974 (hereinafter "the Act"), 42 U.S.C. 5401 et seq., requires the Secretary of the Department of Housing and Urban Development to establish Federal construction and safety standards for manufactured homes. The Act also requires that the Secretary appoint a National Manufactured Home Advisory Council composed of twenty-four members. The membership of the Council is selected equally from each of the following categories: (a) The manufactured home industry and related groups, including at least one representative of small business; (b) consumer organizations, community organizations, and recognized consumer leaders; and (c) government agencies including Federal, State and local governments. The purpose of the National Manufactured Home Advisory Council is to advise the Department, to the extent feasible, prior to the establishment, amendment or revocation of any manufactured home construction and safety standard.

In accordance with the Federal Advisory Committee Act, 5 U.S.C. App. I, section 10(a)(2), announcement is made of the following meeting:

The National Manufactured Home Advisory Council will meet on October 29 and 30, 1987. The meetings are open to the public and will convene at 1:00 p.m. on Thursday, October 29, 1987, at the Department of Housing and Urban Development, Departmental Conference Room 10233, 451 7th Street, SW., Washington, DC 20410-8000.

The Advisory Council will discuss and evaluate proposed revisions to the Federal Manufactured Home Construction and Safety Standards (FMHCSS). Revisions to the Standards are being proposed in the areas of thermal energy conservation standards and lead content in potable water lines.

The final agenda will be available at the meeting. Inquiries concerning the agenda may be made after September 30, 1987, by contacting the Office of Manufactured Housing and Construction Standards, HUD, at (202) 755-6584.

## Authority

Sec. 605 of the National Manufactured