

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State, tribal, local, territorial health departments and wastewater utilities.	- Attachment 03 Component 1 Wastewater Master Reference Guide v4–2–2.xlsx. - Attachment 04 Component-1 BioSample ww_template v1.9 NWSS.xlsx. - Attachment 05-Component-1_SRA_ww_template v5.8 nwss.xlsx. - Attachment 06 Component 1 NCBI DCIPHER Crosswalk DataDictionary New.xlsx. - Attachment 07 Component 1 2 NWSS DCIPHER BulkUploadTool_screenshot_NEW.pdf. - Attachment 08 Component 1 NWSS 1CDP Wastewater Data_CSV_Template v4 All_Fields_NEW.csv. - Attachment-10 Component-1_CDC_seq_manifest_data_dict.xlsx.	213	1	155/60
	Component 2 Forms: - Sewershed spatial files, no form required - Attachment 07 Component 1 2 NWSS DCIPHER BulkUploadTool_screenshot_NEW.pdf. - Attachment 09-Component-2 NWSS DCIPHER Sewershed Name Crosswalk CSV Upload_Template_NEW.xlsx.			

Jeffrey M. Zirger,

Lead, Information Collection Review Office,
Office of Public Health Ethics and
Regulations, Office of Science, Centers for
Disease Control and Prevention.

[FR Doc. 2026–20351 Filed 10–2–26; 8:45 am]

BILLING CODE 4163–18–P

**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

**Centers for Disease Control and
Prevention**

[60Day–26–0286; Docket No. CDC–2026–
1618]

**Proposed Data Collection Submitted
for Public Comment and
Recommendations**

AGENCY: Centers for Disease Control and
Prevention (CDC), Department of Health
and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease
Control and Prevention (CDC), as part of
its continuing effort to reduce public
burden and maximize the utility of
government information, invites the
general public and other federal
agencies the opportunity to comment on
a proposed information collection, as
required by the Paperwork Reduction
Act of 1995. This notice invites
comment on a proposed information
collection project titled Public Health

Crisis Response (PHCR) Cooperative
Agreement. The Public Health Crisis
Response (PHCR) Cooperative
Agreement provides rapid funding to
help existing public health programs
respond to major public health
emergencies and crises.

DATES: CDC must receive written
comments on or before December 4,
2026.

ADDRESSES: You may submit comments,
identified by Docket No. CDC–2026–
1618 by either of the following methods:

- *Federal eRulemaking Portal:*
www.regulations.gov. Follow the
instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information
Collection Review Office, Centers for
Disease Control and Prevention, 1600
Clifton Road NE, MS H21–8, Atlanta,
Georgia 30329.

Instructions: All submissions received
must include the agency name and
Docket Number. CDC will post, without
change, all relevant comments to
www.regulations.gov.

Please note: Submit all comments
through the Federal eRulemaking portal
(www.regulations.gov) or by U.S. mail to
the address listed above.

FOR FURTHER INFORMATION CONTACT: To
request more information on the
proposed project or to obtain a copy of
the information collection plan and
instruments, contact Jeffrey M. Zirger,
Information Collection Review Office,
Centers for Disease Control and

Prevention, 1600 Clifton Road NE, MS
H21–8, Atlanta, Georgia 30329;
Telephone: 404–639–7570; Email: omb@cdc.gov.

SUPPLEMENTARY INFORMATION: Under the
Paperwork Reduction Act of 1995 (PRA)
(44 U.S.C. 3501–3520), federal agencies
must obtain approval from the Office of
Management and Budget (OMB) for each
collection of information they conduct
or sponsor. In addition, the PRA also
requires federal agencies to provide a
60-day notice in the **Federal Register**
concerning each proposed collection of
information, including each new
proposed collection, each proposed
extension of existing collection of
information, and each reinstatement of
previously approved information
collection before submitting the
collection to the OMB for approval. To
comply with this requirement, we are
publishing this notice of a proposed
data collection as described below.

The OMB is particularly interested in
comments that will help:

1. Evaluate whether the proposed
collection of information is necessary
for the proper performance of the
functions of the agency, including
whether the information will have
practical utility;

2. Evaluate the accuracy of the
agency's estimate of the burden of the
proposed collection of information,
including the validity of the
methodology and assumptions used;

3. Enhance the quality, utility, and clarity of the information to be collected;

4. Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submissions of responses; and

5. Assess information collection costs.

Proposed Project

Public Health Crisis Response (PHCR) Cooperative Agreement—New—Office of Readiness and Response (ORR), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Public Health Crisis Response (PHCR) Cooperative Agreement (CDC–RFA–TU–27–0020) is designed to strengthen the nation’s ability to respond quickly to public health emergencies. It establishes a list of approved but unfunded (ABU) jurisdictions and organizations that may receive rapid funding when federal funds become available for a public

health emergency or when CDC determines one is imminent. Congress must provide emergency appropriations to CDC, or a CDC program must have available funds to support a public health response that exceeds the resources of a jurisdiction or organization. When funding becomes available, CDC will notify eligible jurisdictions and organizations on the ABU list and provide instructions for requesting and receiving funds.

This cooperative agreement includes two funding components:

- Component A supports initial emergency response activities to begin emergency response activities, hire surge staff, activate Emergency Operations Centers (EOCs), and conduct a rapid assessment to identify response needs.

- Component B supports emergency-specific response activities.

Depending on the emergency and the availability of funds, CDC may award Component A, Component B, or both. Depending on the emergency and the availability of funds, CDC may award Component A, Component B, or both.

CDC proposes collecting information from eligible applicants on how they

intend to implement the following strategies, if awarded:

Component A—Initial Emergency Response:

- Strategy 1—Legal and Administrative Readiness, Strategy 2—Incident Management, and Strategy 3—Information Management

Component B—Emergency Response Activities:

- Strategy 4—Countermeasures and Mitigation, Strategy 5—Surge Management and Strategy 6—Bio surveillance

If CDC activates this cooperative agreement, emergency revisions may be requested to this ICR, as needed. CDC will collect information through *Grants.gov* as part of the application for the Public Health Crisis Response (PHCR) Cooperative Agreement (CDC–RFA–TU–27–0020). CDC requests a three-year approval for this information collection request. The total estimated annualized burden for all data collection is estimated as 565 hours. There is no cost to the respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
PHCR Applicants	Strategies and Activities	113	1	5	565
Total					

Jeffrey M. Zirger,

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Office of Public Health Ethics and
Regulations, Office of Science, Centers for
Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–26–0728]

Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled “National Notifiable Diseases Surveillance System” to the Office of Management

and Budget (OMB) for review and approval. CDC previously published a “Proposed Data Collection Submitted for Public Comment and Recommendations” notice on April 7, 2026 to obtain comments from the public and affected agencies. CDC received five comments related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information,

including the validity of the methodology and assumptions used;

(c) Enhance the quality, utility, and clarity of the information to be collected;

(d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses; and

(e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570. Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular