INSTRUCTIONS: Use this form when a single information collection document involves multiple TITLE OF INFORMATION COLLECTION DOCUMENT OMB NO. PAGE public reporting and recordkeeping requirements. The totals of the figures in cols. (d), (F), (H), (I) 0579and (K) should be entered in item 13 of OMB 83-1. For cols. (E), (G), & (J), the averages of the Importation of Mangoes from India, APHIS-2006-0121 totals shall be computed, as follows, and then entered on the OMB 83-1. DATE PREPARED (F) Total (H) Total (K) Total = (J) AverageOF...... 10-5-6 (D) Total (F) Total (I) Total IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT **ANNUAL BURDEN REPORTS RECORDS** FORM NO(S). NO. OF RESPONSE TOTAL **ANNUAL** TOTAL RECORD-(If "none", HOURS SECTION OF **ANNUAL** NO. OF **HOURS** TOTAL NO. OF **DESCRIPTION** so state) PER PER **KEEPING** REGULATIONS **RESPON-**RESPONSES PER **HOURS** RECORD RESPON-RECORD-HOURS (Col. D x E) DENTS **RESPONSE** (Col. F x G) **KEEPERS** DENT KEEPER (Col. I x J) (B) (E) (G) (H) (A) (D) (F) (I) (K) (C) (J) 319.56-2tt, 305.2 Phytosanitary Certificates (foreign) None 50 100 5000 0.500 2500 (h)(i) 305.31 Monitoring Inspections by NPPO's None 100 1 100 0.600 60 Trust fund for preclearance 305.31 None 1 1 80.000 80 301.51 Workplan for preclearance None 40.000 40 2 305.31 Compliance Agreement (foreign) 1 2 0.500 None 5 0.830 305.31 Records maintained of vists of inspectors None

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INSTRUCTIONS: Use this form when a single information collection document involves multiple public reporting and recordkeeping requirements. The totals of the figures in cols. (d), (F), (H), (I) and (K) should be entered in item 13 of OMB 83-1. For cols. (E), (G), & (J), the averages of the totals shall be computed, as follows, and then entered on the OMB 83-1.

(K) Total

(H) Total

(F) Total

TITLE OF INFORMATION COLLECTION DOCUMENT

Importation of Mangoes from India, APHIS-2006-0121

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DATE PREPARED

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= (J) Average 10-5-6 (D) Total (F) Total (I) Total IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT ANNUAL BURDEN **REPORTS RECORDS** FORM NO(S). NO. OF RESPONSE PER ANNUAL HOURS PER TOTAL TOTAL RECORD-(If "none", SECTION OF ANNUAL NO. OF **HOURS** TOTAL NO. OF DESCRIPTION so state) **KEEPING** REGULATIONS **RESPON-**RESPONSES PER **HOURS** RECORD RESPON-RECORD-KEEPER HOURS (Col. D x E) DENTS RESPONSE (Col. F x G) **KEEPERS** (Col. I x J) DENT (B) (D) (E) (G) (H) (K) (A) (F) (I) (C) (J) 5 154 5104 2681