**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-i. For cols. (E), (G), & (J), the averages of the totals shall be computed, as follows, and then entered on the OMB 83-i.

TITLE OF INFORMATION COLLECTION DOCUMENT

Potato Cyst Nematode; Quarantine and Regulations, APHIS 2006-0143

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DATE PREPARED

8-1-2007

..1.....OF......

(F) Total (D) Total (F) Total (F) Total (G) Average (K) Total (I) Total (I) Total (I) Total

IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT			ANNUAL BURDEN							
SECTION OF REGULATIONS	DESCRIPTION	FORM NO(S). (If "none", so state)	REPORTS					RECORDS		
			NO. OF RESPON- DENTS	NO. OF RESPONSE PER RESPON- DENT	TOTAL ANNUAL RESPONSES (Col. D x E)	HOURS PER RESPONSE	TOTAL HOURS (Col. F x G)	NO. OF RECORD KEEPERS	ANNUAL HOURS PER RECORD- KEEPER	TOTAL RECORD- KEEPING HOURS (Col. I x J)
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
301.86-5, 86-8	Federal Certificate									
	FARMERS	PPQ 540	90	18.00	1,620					
	BUSINESS		60	12.00	720	0.200	144			
301.86-5, 86-8	Federal Limited Permit									
	FARMERS	PPQ 530	30	12.00	360	0.200	72	Ì		
	BUSINESS		20	8.00	160		l .			
301.86-5	Compliance Agreements									
	FARMERS	PPQ 519	120	1.00	120	1.250	150	1		
	BUSINESS	11 & 313	80	1.00	80	1.250	100			
	BOOMESS		00	1.00	00	1.230	100			
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			400		3,060		822			

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= (G) Average (K) Total (F) Total (H) Total = (J) Average 8-1-2007 (D) Total (F) 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** DENT (Col. I x J) (B) (D) (E) (G) (H) (K) (A) (F) (I) (C) (J)

3,060

822