PAPERWORK REDUCTION ACT USITC IMPORT INJURY INVESTIGATIONS GENERIC CLEARANCE SUBMISSION OMB CONTROL NUMBER 3117-0016

This form should only be used if you are submitting a collection of information for approval under the USITC import injury investigation clearance assigned OMB Control Number 3117-0016. Submit this form, responses to the supplemental questions (if necessary), the collection instrument, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, D.C. 20503.

If the collection does not satisfy the requirements of the program clearance, you should follow the regular PRA clearance procedures described in 5 CFR 1320.

described in 5 CF	R 1320.										
Inv. no. & title	701-TA	701-TA-460-461 (Preliminary): Ni-Resist Piston Inserts from Argentina and Korea									
Agency contact (person who	o can best answ	er questions ab	out the con	tent	of the submis	sion)				
Name	Joshua	Kaplan	Phone 202-205-3184 E-mail joshua.kaplan@usitc.gov					sitc.gov			
Туре		USITC number ¹	Number of question- naires to be mailed	Burden hour estimates of the <u>actual</u> burden imposed (i.e., the number of <u>completed</u> questionnaires EXPECTED to be returned and the hours per response for a firm to (1) review instructions, (2) search data sources, and (3) complete and review its questionnaire response). Do NOT include anticipated certifications of non-applicability here.							
				Number respons (1)	-	Hours per response (2)	Cost per hour (3)	Total burden hours (1) x (2)	Cost per response (2) x (3)	Cumulative burden hours ¹	
Producer questionnaire		09-1-2735	2	1		50	84.18	50	4,209	30,090	
mporter questionnaire		09-2-2736	16	4		40	87.44	160	3,498	30,250	
Purchaser questionnaire		09-3-				20	80.24	0	1,605	30,250	
Foreign producer questionnaire		09-4-2737	7	3		20	67.93	60	1,359	30,310	
Notice of institution		09-5-					83.95	0	0	30,310	
Other questionnaire		09-						0	0	30,310	
Aggregate burden					8	34		270	3,221	30,310	
Obtain from the	Statistica	l Services Div	rision.								
Certification: The Control Number 3	117-0016.	s of informatio	n requested by	this submis	sion	meet the requ	irement	of the OMB	approval for	OMB	
/s/ John Ascienzo Signature of Program Official					Date						
/s/ John Asc Signature of U	<u>ienzo</u> USITC Pap	perwork Cleara	nce Officer		L	Pate					
Signature of C		\overline{D}	ate								
Date submitted to OMB				Date approval received							