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.

Inv. no. & title	& title Inv. No. 731-TA-44 (Third Review), Sorbitol from France								
Agency contact (p	erson wh	o can best ansv	ver questions al	out the conte	nt of the submi	ission)			
Name Dana A. Lofgren			Phone 2	.02-708-4721	E-mai	l dana.	dana.lofgren@usitc.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 o responses (1)	P	Cost per hour (3)	Total burden hours (1) x (2)	Cost per response (2) x (3)	Cumulative burden hours ¹
Producer questionnaire		10-1-2848	3		3 50	84.18	150	4,209	39,740
Importer questionnaire		10-2-2849	26	2	40	87.44	800	3,498	40,540
Purchaser questionnaire		10-3-2850	30	2	40	80.24	800	3,210	41,340
Foreign producer questionnaire		10-4-2851	4		2 30	67.93	60	2,038	41,400
Notice of institution		10-5-					0	0	
Other questionnaire		40						•	
		10-					0	0	***
Aggregate burden			63	4	5 40		1,810	3,428	
¹ Obtain from ti	he Stati	stical Servi	ces Division						

Certification: The collections of information requested pproval for OMB Control Number 3117-0016.	by this submission meet the requ	irement of the OMB
/s/ Catherine DeFilippo		
Signature of Program Official	Date	•
/s/ Catherine DeFilippo		
Signature of USITC Paperwork Clearance Officer	Date	
Signature of OIRA Official	Date	
Date submitted to OMB	Date approval received	4.77 A 77

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