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 CFF	R 1320.										
Inv. no. & title	Investig	gation Nos. 701-TA-476 and 731-TA-1179 (Preliminary) Multilayered Wood Flooring from China									
Agency contact (p	person who	can best answ	er questions ab	out the con	tent	of the submis	sion)				
Name	me Fred Ruggles			Phone	ne 202-205-3187 E-mail			l fred.ru	fred.ruggles@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 response (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		11-1-2911	11	11 11		50	84.18	550	4,209	13,510	
mporter questionnaire		11-2-2912	200	0 7		40	87.44	3,000	3,498	16,510	
Purchaser questionnaire		11-3-				20	80.24	0	1,605	16,510	
Foreign producer questionnaire		11-4-2913	200		50	20	67.93	1,000	1,359	17,510	
Notice of institution		11-5-					83.95	0	0	17,510	
Other questionnaire		11-						0	0	17,510	
Aggregate burden				1	36	33		4,550	3,221	17,510	
Obtain from the	Statistica	l Services Div	rision.								
Certification: The Control Number 3	117-0016.		n requested by	this submis	sion	meet the requ	airement	of the OMB	approval for	OMB	
/s/ Catherine DeFilippo Signature of Program Official Date											
/s/ Catherine DeFilippo Signature of USITC Paperwork Clearance Officer Date											
Signature of C											
Date submitted	Date approval received										

Instructions for Submission under USITC Import Injury Investigation Clearance.

- 1. Consult with the USITC Paperwork Clearance Officer to confirm that your survey meets the conditions for submission under this clearance.
- 2. If this collection or its subsequent analysis will employ statistical methods, complete Part B of the Supporting Statement for the Form 83-I.
- 3. Complete the cover sheet electronically and then print an sign it. As you enter data (or amend existing data) in columns 1 (number of responses), 2 (hours per response), and 3 (cost per hour), the form will automatically calculate the total burden hours, cost per response, and appropriate totals/averages. If you have no producer questionnaires, no importer questionnaires, no purchaser questionnaires, or no foreign producer questionnaires, please delete the hours per response value associated with the questionnaire(s) that you have no responses for. In other words, if you have no foreign producer questionnaires, delete the "20" in the hours per response column. The USITC Paperwork Clearance Officer will fill in the line marked "Cumulative Burden Hours under Program Clearance." Note: OMB will call the person listed as the Agency Contact to ask any questions about the survey.
- 4. Give the cover sheet, the answers to Part B (if appropriate), a copy of the survey, and any other helpful information to the USITC Paperwork Clearance Officer, who will review the materials, sign the cover sheet, and send the package to OIRA. You will be notified when the survey is approved under OMB Control Number 3117-0016. Do not conduct the survey until you receive this approval.