

**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 101002 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 CRF 1320

Inv. No. & title: Inv. No. 731-TA-1020 (Second Review): Barium Carbonate from China

Agency contact (person who can best answer questions about the content of the submission):

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Burden hour estimates of the actual burden imposed (i.e., the number of completed 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.

Type	USITC Number	Number of questionnaires to be mailed	Number of responses (1)	Hours per response (2)	Cost per hour (3)	Total burden hours (1) x (2)	Cost per response (2) x (3)	Cumulative burden hours
Producer questionnaire	14-1- 3287	2	2	50	84.18	100	4,209	101,380
Importer questionnaire	14-2- 3288	2	2	40	87.44	80	3,498	101,460
Purchaser questionnaire	14-3- 3289	15	5	20	80.24	100	1,605	101,560
Foreign producer questionnaire	14-4- 3290	8	3	20	67.93	60	1,359	101,620
Notice of institution	14-5-				83.95	0	0	101,620
Other questionnaire: _____	14-					0	0	101,620
Aggregate burden			12	28.33333333		340	3,221	101,620

Certification: The collections of information requested by this submission meet the requirement of the OMB approval for OMB Control Number 3117-0016

/s/ Catherine DeFilippo
Signature of USITC Paperwork Clearance Officer _____ Date _____

/s/ Catherine DeFilippo
Signature of USITC Paperwork Clearance Officer _____ Date _____

Signature of OIRA Officer _____ Date _____

Date submitted to OMB		Date approval received	
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