## Paperwork Reduction Act USITC Import Injury Investigations Generic Clearence 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

| USITC contact name  | person who can best answer questions about the content of the submission)  Mary Messer  202-205-3193 |                         |                        |                         |                                    |                             |                                |
|---|--|-------------------------|------------------------|-------------------------|------------------------------------|-----------------------------|--------------------------------|
| USITC contact phone   |  |                         |                        |                         |                                    |                             |                                |
| USITC contact email   | mary.messer@usitc.gov  |                         |                        |                         |                                    |                             |                                |
| Туре  | USITC<br>Number  | Number of responses (1) | Hours per response (2) | Cost per<br>hour<br>(3) | Total burden<br>hours<br>(1) x (2) | Cost per response (2) x (3) | Total costs<br>(1) x (2) x (3) |
| Notice of institution in Inv. No(s) 731-TA-1058<br>(Review2): Wooden bedroom furniture from China                           | 15-5-347   | 3                       | 15                     | 83.95                   | 45                                 | 1,259                       | 3,778                          |
|   |  |                         |                        |                         | 0                                  | 0                           | 0                              |
|   |  |                         |                        |                         | 0                                  | 0                           | 0                              |
|   |  |                         |                        |                         | 0                                  | 0                           | 0                              |
|   |  |                         |                        |                         | 0                                  | 0                           | 0                              |
|   |  |                         |                        |                         | 0                                  | 0                           | 0                              |
|   |  |                         |                        |                         | 0                                  | 0                           | 0                              |
| Cons aggregate hunden haums   | •  | 2                       | 15.000                 | 419.750                 | 45                                 |                             |                                |
| Case aggregate burden hours  3 15.000 419.750  Average cost per response (e.g., average of (2) x (3) across the collection) |  |                         |                        |                         | 45                                 | 1,259.250                   |                                |
| Total cost of the collection (e.g., sum of each (1) x (2) x (3))  |  |                         |                        |                         |                                    | 1,200.200                   | 3,778                          |
| Certification: The collections of information requested by this   |  | the requirement o       | f the OMB approv       | al for OMB Cont         | trol Number 3117                   | -0016.                      | -,                             |
| /   |  |                         |                        |                         |                                    |                             |                                |
| /s/ Catherine DeFilippo Signature of USITC Paperwork Clearance Officer  |  |                         |                        |                         | 10/8/2015<br>Date                  |                             |                                |
| /s/ Catherine DeFilippo<br>Signature of USITC Paperwork Clearance Officer   |  |                         |                        |                         | 10/8/2015<br>Date                  |                             |                                |
| Signature of OIRA Officer   |  |                         |                        |                         | Date                               |                             |                                |
| Date submitted to OMB   | Date approval received   |                         |                        |                         |                                    |                             |                                |