

INSTRUCTIONS: Use this form when a single information collection document involves multiple reporting and recordkeeping requirements. The totals of the figures in cols. should be entered in item 13 of OMB-83-1: cols. (D) &/or (I) = 13a (respondent is only counted once); cols. F & I = 13b; cols. H & K = 13c.

(F)Total/(D)Total = (E)Average (H)Total/(F)Total = (G)Average

(K)Total/(I)Total = (J)Average

NOTE: The columns will calculate automatically. If Col. E's response is something other than annually, i.e., 1/6 years, list as "1/6" & decimal will display.

TITLE OF INFORMATION COLLECTION DOCUMENT

Federally Recognized State Managed Phytosanitary Program

OMB NO.

0579-0365

DATE PREPARED

Marc

IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT			ANNUAL BURDEN						
SECTION OF REGS. (A)	DESCRIPTION (B)	FORMS NO (S) (If "none" so state) (C)	REPORTS					RECORDS	
			NO. OF RESPONDENTS (D)	NO OF RESPONSES PER RESPONDENT (E)	TOTAL ANNUAL RESPONSES (Col. D x E) (F)	HOURS PER RESPONSE (G)	TOTAL HOURS (Col. F x G) (H)	NO. OF RECORD-KEEPERS (I)	ANNUAL HOURS PER RECORD-KEEPER (J)
371.3	Petition for Protocol for Quarantine Pests of Concern (State)	None	1	2.00	2.00	80.00	160.00		
371.3	Petition for Regulated Non-Quarantined Pests (State) (same respondent)	None	1	1.00	1.00	80.00	80.00		
371.3	State Cooperative Arrangement (State) (same respondent)	None	1	2.00	2.00	0.50	1.00		
371.3	Audit Review Annual Accomplishment Report (State) (same respondent)	None	1	2.00	2.00	1.00	2.00		
					0.00		0.00		
	SUBTOTAL				7.00		243.00	0.00	
	TOTAL OF ALL PAGES		1		7.00		243.00	0.00	
	TOTAL - COLUMNS "F" AND "I" = OMB 831, 13 b; COLUMNS "H" AND "K" = OMB 831, 13c				7.00		243.00		

RED
h 1, 2017
TOTAL RECORD- KEEPING HOURS (Col. I x J)
(K)
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00