

SNAP: Waivers Under Section 6(o) of the Food and Nutrition Act

Respondent Category	Type of respondents* (see below)	Instruments	Form	Number of respondents* (see below)	Frequency of response	Total Annual responses** (see below)	Hours per response	Annual burden (hours)	Hourly Wage Rate	Total Annualized Cost of Respondent Burden
State Agency	State Program Managers	ABAWD Waiver Request (All Types)	N/A	36	1	36	1	36	\$ 34.07	\$1,226.52
State Agency	State Program Staff	ABAWD Waiver Request (Based on market data)	N/A	34	1	34	34	1,156	\$ 23.56	\$27,235.36
State Agency	State Program Staff	ABAWD Waiver Request (Based on LSA designation or DOL trigger notice)	N/A	2	1	2	3	6	\$ 23.56	\$141.36
TOTAL						43	27.86	1,198		\$28,603.24
TOTAL (minus 50% Federal reimbursement)										\$14,301.62