

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. (K)Total/(I)Total = (J)Average (F)Total/(D)Total = (E)Average (H)Total/(F)Total = (G)Average			TITLE OF INFORMATION COLLECTION DOCUMENT Standardizing Phytosanitary Treatment Regulations: Approval of Cold Treatment and Irradiation Facilities; Cold Treatment Schedules; Establishment of Fumigation and Cold Treatment Compliance Agreements					OMB NO. 0579-0450		
								DATE PREPARED February 12, 2018		
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)	TOTAL RECORD-KEEPING HOURS (Col. I x J) (K)
305.5 (c) (1)	Compliance Agreements or equivalent (importer/facility operator)(business)	PPQ 519	5	1.00	5.00	0.50	3.00			0.00
305.5 (c)(2)	Compliance Agreements or equivalent (interstate Hawaii) (business)	PPQ 519	2	1.00	2.00	0.50	1.00			0.00
305.5(c)(3)	Compliance Agreements or equivalent (interstate business for fruit flies)	PPQ 519	2	1.00	2.00	0.50	1.00			0.00
305.6(a)	Facility Certification (business) (same facility respondents)	None	5	1.00	5.00	0.50	3.00			0.00
305.6(b)(1)(i)	Detailed Layout Map (business) (same facility respondents)	None	5	1.00	5.00	0.50	3.00			0.00
	SUBTOTAL		17		19.00		11.00	0.00		0.00
	TOTAL OF ALL PAGES				39.00		23.00	0.00		0.00
TOTAL - COLUMNS "F" AND "I" = OMB 831, 13 b; COLUMNS "H" AND "K" = OMB 831, 13c					39.00		23.00			

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305.6(b)(1)(ii)	State Government Written Concurrence (State)	None	5	1.00	5.00	0.50	3.00			0.00
305.6(b)(1)(x)	Facility Maps of local area (business) (same facility respondents)	None	5	1.00	5.00	0.50	3.00			0.00
305.6(b)(1)(iv)	Contingency Plan (business) (same facility respondents)	None	5	1.00	5.00	0.50	3.00			0.00
305.6 (b) (2)	Limited Permits (business) (same facility respondents)	PPQ 530	5	1.00	5.00	0.50	3.00			0.00
					0.00		0.00			0.00
					0.00		0.00			0.00
SUBTOTAL					20.00		12.00	0		0.00