



PAPERWORK REDUCTION ACT (PRA) EXECUTIVE SUMMARY FORM

RED Areas (*) = required field

TITLE OF COLLECTION*: Annual Survey of Manufactures
OMB CONTROL NUMBER*: 0607-0449
DIVISION/PROGRAM OFFICE*: EWD
Agency Contact*: Julius Smith Jr
PRA Liaison*: Thomas J Smith

Alternate PRA Liaison:

TYPE OF INFORMATION COLLECTION REQUEST*

Reinstatement, with change, of a previously approved collection for which approval has expired

PURPOSE OF COLLECTION/OPSP SUMMARY*

The Census Bureau has conducted the Annual Survey of Manufactures (ASM) since 1949 to provide key measures of manufacturing activity during intercensal periods. The ASM furnishes up-to-date estimates of employment and payroll, hours and wages of production workers, value added by manufacture, cost of materials, value of shipments by product class, inventories, and expenditures for both plant and equipment and structures. The survey also provides valuable information to private companies, research organizations, and trade associations.

Enter abstract. The abstract should cover the agency's need for the information, uses to which it will be put, and a brief description of the respondents.

PLANNING DATES:

Collection Frequency: Annual **Planned 60-day FRN Publication Date:** 7/13/2018 **Planned ICR Submission to DOC Date:** 12/17/2018

Planned ICR Submission to OMB Date: 1/17/2019 **Request OMB Approval Date:** 3/15/2019 **Current Expiration Date:**

Data Collection Start Date: [Click here to enter collection start date](#)

REQUESTED OMB EXPIRATION DATE: Three years from approval date **Other Date:**
 3/14/2022

60-DAY FEDERAL REGISTER CITATION: 83, 32627 volume **DATE PUBLISHED:** 7/13/2018 FR page number

MANDATORY OR VOLUNTARY COLLECTION? Mandatory Voluntary N/A

IS THIS A REIMBURSABLE COLLECTION CONDUCTED BY CENSUS ON BEHALF OF ANOTHER AGENCY/ENTITY?

Yes [Specify agency/entity: _____]

No

Shared Sponsorship [Specify agency/entity: _____]

LEGAL AUTHORITY(IES) FOR INFORMATION COLLECTION:

Title 13 U.S.C., Sections 131 and 182.

Enter legal authority(ies). Please confirm with Legal and provide a list of all of the specific citation(s) for each statute and/or regulation mandating or authorizing the collection. Include relevant authorities for Census and sponsoring agencies, as appropriate. Ensure these authorities are cited consistently throughout all documentation and respondent materials.

Survey Information:

What is the source of the sampling frame for this collection? Business Register

What are the mode(s) for collection? Internet

Public Burden:

Average Estimated Time per Response: **3** 30

Hours Minutes

ANNUAL REPORTING AND RECORDKEEPING HOUR BURDEN:

Number of Respondent:	55,000	Requested Annual Burden Hours:	192,500
Number of Responses:	55,000	Current Annual OMB Inventory:	0
Difference (+, -)	192,500 <small>(enter difference)</small>		

Reason for Difference in Burden Hours:

Program Change Adjustment No Difference

Explanation of Difference (if applicable): This collection is being submitted as a reinstatement.

PRIVACY ACT (PA):

Is this collection a Privacy Act System of Records? Check box for Yes
 - If yes, a Privacy Act Statement that identifies the appropriate Systems of Records Notice (SORN) is required.

TITLE 13 CONFIDENTIALITY:

Is this collection of information confidential under Title 13, Section 9? Check box for Yes

If yes, has the confidentiality pledge been updated per the Federal Cybersecurity Enhancement Act of 2015^[1]? Check box for Yes

Has the respondent messaging been reviewed and updated in the collection materials per the "Updates to Census Bureau Confidentiality Messaging and PRA Required Language" memo, if applicable? Check box for Yes

Placement of Required Paperwork Reduction Act and Privacy Act Language: In the table below, please indicate where the following PRA/PA statement requirements are located in the respondent materials:

<p>Reason/purpose for the information collection, including the way the information will be used. (Required by the Paperwork Reduction Act and the Privacy Act)</p>	<input checked="" type="checkbox"/> Invitation letter <input checked="" type="checkbox"/> Collection Instrument
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Other:

<p>For Reason/Purpose, Legal Authority that authorize the collection of information. (Required by the Paperwork Reduction Act and the Privacy Act)</p>	<input checked="" type="checkbox"/> Invitation letter <input checked="" type="checkbox"/> Collection Instrument
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Other:

<p>Whether responses are mandatory or voluntary (citing the authority) (Required by the Paperwork Reduction Act and the Privacy Act)</p>	<input checked="" type="checkbox"/> Invitation letter <input checked="" type="checkbox"/> Collection Instrument
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Other:

The nature and extent of confidentiality to be provided (if any) citing authority
 (Required by the Paperwork Reduction Act)

- Invitation letter
- Collection Instrument

Other:

An estimate of the average respondent burden together with a request that the public direct to the agency any comments concerning the accuracy of this burden estimate and any suggestions for reducing this burden
 (Required by the Paperwork Reduction Act)

- Invitation letter
- Collection Instrument

Other:

OMB control number
 (Required by the Paperwork Reduction Act)

- Invitation letter
- Collection Instrument

Other:

A statement that an agency may not conduct (and a person is not required to respond to) an information collection request unless it displays a currently valid OMB control number.
 (Required by the Paperwork Reduction Act)

- Invitation letter
- Collection Instrument

Other:

Published routine use for which information is subject and citation to relevant SORN
 (Required by the Privacy Act)

N/A

Other:

The effects on the individual for not providing the requested information
 (Required by the Privacy Act)

N/A

Other:

Comments:

ADDITIONAL INFORMATION:

Please include any special circumstances or other information that would help expedite the review of this package (ex. if the collection is at the request of a congressional inquiry).

^[1]Please refer to the "[Updates to Census Bureau Confidentiality Messaging and PRA Required Language](#)" Memo

Create PRA Package? Yes

Create 60-Day FRN Template? No

Print