

OMB CONTROL NO. 0579-0159	TITLE OF INFORMATION COLLECTION REQUEST Plum Pox Compensation	DATE PREPARED April 27, 2020
TYPE OF REQUEST Renewal		PUBLIC COMMENT DOCKET NO. APHIS-2019-0087
POINT OF CONTACT Lynn Evans-Goldner		FEDERAL REGISTER NOTICE 85 FR 8542
TELEPHONE NO. (301) 851-2286		FEDERAL REGISTER DATE February 14, 2020

PART I - SUMMARY

TOTAL RESPONDENTS 2	TOTAL ANNUAL RESPONSES 5	% ELECTRONIC 0%	RESPONSES PER RESPONDENT 3	TOTAL BURDEN HOURS 5	HOURS PER RESPONSE 1.000	% SMALL ENTITIES 100%
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PART II - LIST OF ACTIVITIES

TYPE OF CHANGE	TYPE OF RESPONDENT	FIRST OCCURRENCE	TYPE OF RESPONSE	AUTHORITY (U.S.C., CFR, or Manual)	ACTIVITY DESCRIPTION (title, respondent type, and type of change if discretionary)	FORM NO.	FORMAT	ESTIMATED ANNUAL NUMBER OF RESPONDENTS or RECORDKEEPERS	ESTIMATED ANNUAL RESPONSES	ESTIMATED HOURS PER RESPONSE or ANNUAL HOURS PER RECORDKEEPER	ESTIMATED ANNUAL BURDEN HOURS
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	P1	X	I	7 CFR 301.74-5	Application for Plum Pox Compensation with Supplemental Claim Statement (Business)	PPQ 651		1	1	1.000	1
					Application for DUNS Number (Business)						
					Request for Direct Deposit (Business)	SF 1199A or similar					
	P1		I	301.74.5(a)(1)	Emergency Action Notification Form (Business)	PPQ 523		1	1	0.500	1
	P1		R	301.74-5(a)(1)	Orchard Owner Records (Business)			1	1	0.250	1
	P1		I	301.74-5	Destruction Verification Documents (Business)			1	1	1.000	1
	S1	X	I	301.74-5	State Compensation (State)			1	1	1.000	1