

## FOREIGN PRODUCERS'/EXPORTERS' QUESTIONNAIRE

### INVESTIGATION TITLE

This questionnaire must be received by the Commission by **DATE**  
*See last page for filing instructions.*

The information called for in this questionnaire is for use by the United States International Trade Commission in connection with its review of the **countervailing duty/antidumping duty** order concerning #abbrproduct from #ctrysubs (Inv. No. 701/731-TA-xxx (Review)). The information requested in the questionnaire is requested under the authority of the Tariff Act of 1930, title VII.

<p><b>Name of firm</b> _____</p> <p><b>Address</b> _____</p> <p><b>Website</b> _____</p> <p>Has your firm produced or exported #abbrproduct (as defined on next page) at any time since January 1, #bopyear?</p> <p><input type="checkbox"/> <b>NO</b> (Sign the certification below and promptly return <b>only</b> this page of the questionnaire to the Commission)</p> <p><input type="checkbox"/> <b>YES</b> (Complete all parts of the questionnaire, and return the entire questionnaire to the Commission)</p> <p>Data reported in this questionnaire relate to (Check one):</p> <p><input type="checkbox"/> <b>COUNTRY</b>      <input type="checkbox"/> <b>COUNTRY</b>      <input type="checkbox"/> <b>COUNTRY</b>      <input type="checkbox"/> <b>COUNTRY</b></p> <p>Return questionnaire via the Commission <i>Drop Box</i> by clicking on the following link: <a href="https://dropbox.usitc.gov/oinv/">https://dropbox.usitc.gov/oinv/</a>. (PIN: <b>XXXX</b>)</p>
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### CERTIFICATION

*I certify that the information herein supplied in response to this questionnaire is complete and correct to the best of my knowledge and belief and understand that the information submitted is subject to audit and verification by the Commission. By means of this certification I also grant consent for the Commission, and its employees and contract personnel, to use the information provided in this questionnaire and throughout this proceeding in any other import-injury proceedings or reviews conducted by the Commission on the same or similar merchandise.*

*I, the undersigned, acknowledge that information submitted in response to this request for information and throughout this proceeding or other proceeding may be disclosed to and used: (i) by the Commission, its employees and Offices, and contract personnel (a) for developing or maintaining the records of this or a related proceeding, or (b) in internal investigations, audits, reviews, and evaluations relating to the programs, personnel, and operations of the Commission including under 5 U.S.C. Appendix 3; or (ii) by U.S. government employees and contract personnel, solely for cybersecurity purposes. I understand that all contract personnel will sign appropriate nondisclosure agreements.*

\_\_\_\_\_  
**Name of Authorized Official**

\_\_\_\_\_  
**Title of Authorized Official**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Phone:**

\_\_\_\_\_  
**Email address**

**PART I.--GENERAL INFORMATION**

**Background.**--On **Date**, the **Department of Commerce ("Commerce")/the Treasury** issued a **countervailing duty order/an antidumping duty order/suspended an investigation** on imports of #abbrproduct from #ctrysubs. On **Date**, the Commission instituted a review pursuant to section 751(c) of the Tariff Act of 1930 (19 U.S.C. § 1675(c)) (the Act) to determine whether **revocation of the order/termination of the suspended investigation** would be likely to lead to continuation or recurrence of material injury to the domestic industry within a reasonably foreseeable time. If both the Commission and Commerce make an affirmative determination, the **order/suspension agreement** will remain in place. If either the Commission or Commerce makes a negative determination, Commerce will **revoke the order/terminate the suspension agreement**. Questionnaires and other information pertinent to this proceeding are available at **LINK**.

**#abbrproduct** covered by these investigations is . . . **COMMERCE SCOPE LANGAUGE**

#abbrproduct **is/are** currently imported under statistical reporting numbers **XXXX.XX.XXXX of the Harmonized Tariff Schedule of the United States (HTSUS)**. It/They may also be imported under HTSUS statistical reporting number **XXXX.XX.XXXX**. The HTSUS provisions are for convenience and customs purposes; the written description of the scope is dispositive.

**Reporting of information.**--If information is not readily available from your records, provide carefully prepared estimates. If your firm is completing more than one questionnaire (i.e., a producer, importer, purchaser and/or foreign producer questionnaire), you need not respond to duplicated questions.

**Confidentiality.**--The commercial and financial data furnished in response to this questionnaire that reveal the individual operations of your firm will be treated as confidential by the Commission to the extent that such data are not otherwise available to the public and will not be disclosed except as may be required by law (see 19 U.S.C. § 1677f). Such confidential information will not be published in a manner that will reveal the individual operations of your firm; however, general characterizations of numerical business proprietary information (such as discussion of trends) will be treated as confidential business information only at the request of the submitter for good cause shown.

**Verification.**--The information submitted in this questionnaire is subject to audit and verification by the Commission. To facilitate possible verification of data, please keep all files, worksheets, and supporting documents used in the preparation of the questionnaire response. Please also retain a copy of the final document that you submit.

**Release of information.**--The information provided by your firm in response to this questionnaire, as well as any other business proprietary information submitted by your firm to the Commission in connection with this proceeding, may become subject to, and released under, the administrative protective order provisions of the Tariff Act of 1930 (19 U.S.C. § 1677f) and section 207.7 of the Commission's Rules of Practice and Procedure (19 CFR § 207.7). This means that certain lawyers and other authorized individuals may temporarily be given access to the information for use in connection with this proceeding or other import-injury proceedings conducted by the Commission on the same or similar merchandise; those individuals would be subject to severe penalties if the information were divulged to unauthorized individuals.

**Valid number error messages.**--If you are completing this form in a country that uses periods (".") to delineate multiples of 1000 (e.g., one million would appear as \$1.000.000 rather than \$1,000,000), you may be unable to enter in numbers greater than 999 in numeric form fields. The solution to this data entry issue is to temporarily change your operating system's number formatting to be consistent with the U.S. number formatting system while you complete this form. Detailed instructions on how to resolve this issue is provided at the end of this questionnaire and is available upon request from [INVESTIGATOR \(202-xxx-xxxx, NAME@usitc.gov\)](mailto:INVESTIGATOR (202-xxx-xxxx, NAME@usitc.gov)).

I-1. **OMB statistics.**--Please report below the actual number of hours required and the cost to your firm of completing this questionnaire.

Hours	Dollars

The questions in this questionnaire have been reviewed with market participants to ensure that issues of concern are adequately addressed and that data requests are sufficient, meaningful, and as limited as possible. Public reporting burden for this questionnaire is estimated to average 30 hours per response, including the time for reviewing instructions, gathering data, and completing and reviewing the questionnaire.

We welcome comments regarding the accuracy of this burden estimate, suggestions for reducing the burden, and any suggestions for improving this questionnaire. Please attach such comments to your response or send to the Office of Investigations, USITC, 500 E St. SW, Washington, DC 20436.

I-2. **Establishments covered.**--Provide the name and address of establishment(s) covered by this questionnaire.

**"Establishment"**-- Each facility of a firm in #ctrysubs involved in the production or export of #abbrproduct, including auxiliary facilities operated in conjunction with (whether or not physically separate from) such facilities. Firms operating more than one establishment in #ctrysubs should combine the data for all establishments into a single report.

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I-3. **Stock symbol information.**-- If your firm or any of the entities reported in question I-2 are publicly traded in the United States, please specify the stock exchange and trading symbol (including American Depository Receipts, if applicable): \_\_\_\_\_.

I-4. **External counsel.**-- If your firm or parent firm is represented by external counsel in relation to this proceeding, please specify the name of the law firm and the lead attorney(s).

Law firm:	
Lead attorney(s):	

I-5. **U.S. importers.**--Please provide the names, contacts, email addresses, and telephone numbers of the **FIVE** largest U.S. importers of your firm's #abbrproduct in #termyear.

No.	Importer's name	Contact person	Email address	Area code and telephone number	Share of your firm's #termyear U.S. exports (%)
1					
2					
3					
4					
5					

I-6. **U.S. or other country production.**--Does your firm or any related firm produce, have the capability to produce, or have any plans to produce #abbrproduct in the United States or other countries?

<b>No</b>	<b>Yes</b>	<b>If yes--Please name the firm(s) and country(ies) below and, if U.S. producer(s), ensure that they complete the Commission's producer questionnaire.</b>
<input type="checkbox"/>	<input type="checkbox"/>	

I-7. **U.S. importation.**--Does your firm or any related firm import or have any plans to import #abbrproduct into the United States?

<b>No</b>	<b>Yes</b>	<b>If yes--Please name the firm(s) below and ensure that they complete the Commission's importer questionnaire.</b>
<input type="checkbox"/>	<input type="checkbox"/>	

I-8. **Business plan.**--In Parts II and III of this questionnaire we request a copy of your company's business plan. Does your company or any related firm have a business plan or any internal documents that describe, discuss, or analyze expected future market conditions for #abbrproduct?

<b>No</b>	<b>Yes</b>	<b>If yes--Please provide the requested documents. If you are not providing the requested documents, please explain why not.</b>
<input type="checkbox"/>	<input type="checkbox"/>	

**PART II.--TRADE AND RELATED INFORMATION**

Further information on this part of the questionnaire can be obtained from **INVESTIGATOR (202-xxx-xxxx, NAME@usitc.gov)**. **Supply all data requested on a calendar-year basis.**

II-1. **Contact information.**--Please identify the responsible individual and the manner by which Commission staff may contact that individual regarding the confidential information submitted in part II.

Name	
Title	
Email	
Telephone	

II-2. **Changes in operations.**--Please indicate whether your firm has experienced any of the following changes in relation to the production of #abbrproduct since January 1, #bopyear.

<i>Check as many as appropriate.</i>	<i>If checked, please describe; leave blank if not applicable.</i>
<input type="checkbox"/> Plant openings	
<input type="checkbox"/> Plant closings	
<input type="checkbox"/> Relocations	
<input type="checkbox"/> Expansions	
<input type="checkbox"/> Acquisitions	
<input type="checkbox"/> Consolidations	
<input type="checkbox"/> Prolonged shutdowns or production curtailments	
<input type="checkbox"/> Revised labor agreements	
<input type="checkbox"/> Other (e.g., technology)	

II -2b **Anticipated changes in operations.**--Does your firm anticipate any changes in in the character of its operations or organization relating to the production of #abbrproduct in the future?

<b>No</b>	<b>Yes</b>	<b>If yes, supply details as to the time, nature, and significance of such changes and provide underlying assumptions, along with relevant portions of business plans or other supporting documentations that address this issue.</b>
<input type="checkbox"/>	<input type="checkbox"/>	

**[DRAFTING NOTE: all subsequent (second and beyond) full reviews collect data for only THREE years plus any relevant interim period.]**

II-3a. **Production using same machinery.**--Please report your firm’s production of products made on the same equipment, machinery, or employees as used to produce #abbrproduct, and the combined production capacity on this shared equipment, machinery, or employees in the periods indicated.

**“Overall production capacity” or “capacity”** –The level of production that your establishment(s) could reasonably have expected to attain during the specified periods for all products manufactured in that establishment using the same manufacturing equipment. Assume normal operating conditions (i.e., using equipment and machinery in place and ready to operate; normal operating levels (hours per week/weeks per year) and time for downtime, maintenance, repair, and cleanup).

Note.--If your firm does not produce any out-of-scope merchandise on the same machinery and equipment as scope merchandise then the "overall production capacity" numbers reported in this question should be exactly equal to the "average production capacity" numbers reported in question II-11. If, however, your firm does produce out-of-scope merchandise using the same machinery and equipment as scope merchandise, then the "average production capacity" reported in question II-11 should exclude the portion of "overall production capacity" that was used to produce this out-of-scope merchandise.

**“Production”** --All production in your establishment(s) in #ctrysubs, including production consumed internally within your firm.

<b>Quantity (in #units)</b>								
<b>Item</b>	<b>Calendar year</b>						<b>January- #intmonth</b>	
	<b>2014</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2019</b>	<b>2020</b>
<b>Overall production capacity</b>								
<b>Production of:</b>								
#abbrproduct <sup>1</sup>	0	0	0	0	0	0	0	0
Other products <sup>2</sup>								
<b>Total</b>	0	0	0	0	0	0	0	0
<sup>1</sup> Data entered for production of #abbrproduct will populate here once reported in question II-11. <sup>2</sup> Please identify these products: _____.								

II-3b. **Operating parameters.**--The production capacity reported in II-3a is based on the following operating parameters:

Hours per week	Weeks per year

II-3c. **Capacity calculation.**--Please describe the methodology used to calculate overall production capacity reported in II-3a, and explain any changes in reported capacity.

II-3d. **Production constraints.**--Please describe the constraint(s) that set the limit(s) on your firm's production capacity.

II-3e. **Product shifting.**

(i). Is your firm able to switch production (capacity) between #abbrproduct and other products using the same equipment and/or labor?

No	Yes	If yes—(i.e., have produced other products or are able to produce other products) Please identify other actual or potential products:
<input type="checkbox"/>	<input type="checkbox"/>	

(ii). Please describe the factors that affect your firm's ability to shift production capacity between products (e.g., time, cost, relative price change, etc.), and the degree to which these factors enhance or constrain such shifts.

II-4. **Share of sales.**--What percentage of your firm's total sales in its most recent fiscal year was represented by sales of #abbrproduct? \_\_\_\_\_ percent.

II-5. **Firm's estimated share of production in country.**--Please estimate the percentage of total production of #abbrproduct in the country specified on the certification page accounted for by your firm's production in #termyear. \_\_\_\_\_ percent.

II-6. **Firm's estimated share of country's exports.**--Please estimate the percentage of total exports to the United States of #abbrproduct from the country specified on the certification page accounted for by your firm's exports in #termyear. \_\_\_\_\_ percent.

II-7. **Third country trade actions.**--Is the #abbrproduct exported by your firm subject to antidumping/countervailing duty/safeguard findings, remedies, or proceedings?

No	Yes	If yes— List the products(s), countries affected, and the date of such findings/remedies/proceedings
<input type="checkbox"/>	<input type="checkbox"/>	

II-8. **Other export markets.**--Identify export markets (other than the United States) that your firm has developed or where it has increased its sales of #abbrproduct since #bopyear. Please identify and discuss below.

II-9. **Significance of countervailing duty/antidumping duty order.**--Describe the significance of the existing **countervailing duty/antidumping duty** order covering imports of #abbrproduct from #ctrysubs in terms of its effect on your firm's production capacity, production, home market shipments, exports to the United States and other markets, and inventories. You may wish to compare your firm's operations before and after the imposition of the order.

II-10. **Likely impact of revocation.**--Would your firm anticipate any changes in in the character of its operations or organization, including its production capacity, production, U.S. shipments, inventories, purchases, employment, revenues, costs, profits, cash flow, capital expenditures, research and development expenditures, or asset values relating to the production of #abbrproduct in the future if the **countervailing duty/antidumping duty** orders on #abbrproduct from #ctrysubs were to be revoked?

No	Yes	If yes, supply details as to the time, nature, and significance of such changes and provide underlying assumptions, along with relevant portions of business plans or other supporting documentations that address this issue. Include in your response a specific projection of your firm's capacity to produce #abbrproduct (in #units) for <b>2017 and 2018.</b>
<input type="checkbox"/>	<input type="checkbox"/>	

- II-11. **Trade data.**--Report your firm's production capacity, production, shipments, and inventories related to the production of #abbrproduct in your establishment(s) in #ctrysubs during the specified periods. Do not include resales of #abbrproduct that your firm did not produce in this question; those data to the degree they are exported to the United States should only be reported in question II-12.

Do not submit data by manufacturing facility if they are in the same country. If your firm has multiple manufacturing establishments within one country, you are required to combine data for those establishments within one foreign producer questionnaire response.

Do not submit data on multiple countries combined. The establishments reported here should all be located in the country of the firm's address reported on the certification page. Multinational companies with production in multiple subject countries should submit separate foreign producer questionnaire responses for each subject country.

**"Average production capacity" or "capacity"** --The level of production that your establishment(s) could reasonably have expected to attain during the specified periods for all products manufactured in that establishment using the same manufacturing equipment. Assume normal operating conditions (i.e., using equipment and machinery in place and ready to operate; normal operating levels (hours per week/weeks per year) and time for downtime, maintenance, repair, and cleanup; and a typical or representative product mix).

**"Production"** --All production in your establishment(s) in #ctrysubs, including production consumed internally within your firm.

**"Shipments"** --Shipments of products produced in your establishment(s) in #ctrysubs. Quantities reported should be net of returns. Report net values (i.e., gross sales values less all discounts, allowances, rebates, prepaid freight, and the value of returned goods) in U.S. dollars, f.o.b. your point of shipment in #ctrysubs.

**"Home market commercial shipments"** --Shipments, other than internal consumption and transfers to related firms, within #ctrysubs.

**"Home market internal consumption/transfers to related firms"** --Shipments made to related firms in #ctrysubs, including product consumed internally by your firm.

**"Export shipments"** --Shipments to destinations outside #ctrysubs, including shipments to related firms.

**"Inventories"** --Finished goods inventory, not raw materials or work-in-progress.

*Note: As requested in Part I of this questionnaire, please keep all supporting documents/records used in the preparation of the trade data, as Commission staff may contact your firm regarding questions on the trade data. The Commission may also request that your company submit copies of the supporting documents/records (such as production and sales schedules, inventory records, etc.) used to compile these data.*

II-11. **Trade data.**--Continued.

Quantity (in #units) and Value (in 1,000 dollars)								
Item	Calendar year						January-#intmonth	
	2014	2015	2016	2017	2018	2019	2019	2020
<b>Average production capacity<sup>1</sup> (A)</b>								
<b>Beginning-of-period inventories (B)</b>								
<b>Production (C)</b>								
<b>Home market shipments:</b> Internal consumption/ transfers <i>Quantity (D)</i>								
<i>Value (E)</i>								
Commercial shipments <i>Quantity (F)</i>								
<i>Value (G)</i>								
<b>Export shipments:</b> to the United States: <i>Quantity (H)</i>								
<i>Value (I)</i>								
to the European Union: <sup>2</sup> <i>Quantity (J)</i>								
<i>Value (K)</i>								
to Asia: <sup>3</sup> <i>Quantity (L)</i>								
<i>Value (M)</i>								
to all other markets: <sup>4</sup> <i>Quantity (N)</i>								
<i>Value (O)</i>								
<b>Total exports (Quantity) (P)</b>	0	0	0	0	0	0	0	0
<b>Total shipments (Quantity) (Q)</b>	0	0	0	0	0	0	0	0
<b>End-of-period inventories (R)</b>								
<p><sup>1</sup> The production capacity reported is based on operating _____ hours per week, _____ weeks per year. Please describe the methodology used to calculate production capacity, and explain any changes in reported capacity: _____.</p> <p><sup>2</sup> Identify your firm's principal <i>European Union</i> export markets: _____.</p> <p><sup>3</sup> Identify your firm's principal <i>Asian</i> export markets: _____.</p> <p><sup>4</sup> Identify your firm's principal <i>other</i> export markets: _____.</p>								

II-11. **Trade data.**—Continued.

*RECONCILIATION OF SHIPMENTS, PRODUCTION, AND INVENTORY.*--Generally, the data reported for the end-of-period inventories (i.e., line R) should be equal to the beginning-of-period inventories (i.e., line B), plus production (i.e., line C), less total shipments (i.e., lines D, F, H, J, L, and N). Please ensure that any differences are not due to data entry errors in completing this form, but rather actually reflect your firm's records; and also provide any likely explanations for any differences (e.g., theft, loss, damage, record systems issues, etc.) if they exist.

Item	Calendar year						January-#intmonth	
	2014	2015	2016	2017	2018	2019	2019	2020
B + C – D – F – H – J – L – N – R= should equal zero ("0") or provide an explanation. <sup>1</sup>	0	0	0	0	0	0	0	0
<sup>1</sup> Explanation if the calculated fields above are returning values other than zero (i.e., "0") but are nonetheless accurate: _____.								

II-12. **Exports to the United States not produced by your firm.**--Report your firm's exports to the United States of #abbrproduct that was produced in #ctrysubs but not by your firm during the specified periods. Note these data should **not** be included in question II-11.

Quantity (in #units) and Value (in 1,000 dollars)								
Item	Calendar year						January-#intmonth	
	2014	2015	2016	2017	2018	2019	2019	2020
Exports of #abbrproduct to the United States not produced by your firm <sup>1</sup> .— Quantity <sup>1</sup>								
Value								
<sup>1</sup> List the producer(s). _____								

II-13. **Other explanations.**--If your firm would like to further explain a response to a question in Part II for which a narrative box was not provided, please note the question number and the explanation in the space provided below. Please also use this space to highlight any issues your firm had in providing the data in this section, including but not limited to technical issues with the MS Word questionnaire.

**PART III.--MARKET FACTORS**

Further information on this part of the questionnaire can be obtained from [\*\*Economist \(202-xxx-xxxx, NAME@usitc.gov\)\*\*](mailto:Economist (202-xxx-xxxx, NAME@usitc.gov)).

III-1. **Contact information.**--Please identify the responsible individual and how Commission staff may contact the individual regarding the confidential information submitted in part III.

Name	
Title	
Email	
Telephone	

III-2. **Contract versus spot.**--Approximately what share of your firm's sales of #abbrproduct to U.S. customers in #termyear was on a (1) short-term contract basis, (2) annual contract basis, (3) long-term contract basis, and (4) spot sales basis?

	Type of sale				Total (should sum to 100.0%)
	Short-term contracts (multiple deliveries for less than 12 months)	Annual contracts (multiple deliveries for 12 months)	Long-term contracts (multiple deliveries for more than 12 months)	Spot sales (for a single delivery)	
<b>Share of your #termyear sales</b>	%	%	%	%	0.0 %

III-3. **Contract provisions.**— Please fill out the table regarding your firm’s typical sales contracts for #abbrproduct (or check “not applicable” if your firm does not sell on a short-term, annual and/or long-term contract basis).

<b>Typical sales contract provisions</b>	<b>Item</b>	<b>Short-term contracts</b> (multiple deliveries for less than 12 months)	<b>Annual contracts</b> (multiple deliveries for 12 months)	<b>Long-term contracts</b> (multiple deliveries for more than 12 months)
Average contract duration	<i>No. of days</i>		365	
Price renegotiation (during contract period)	<i>Yes</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fixed quantity and/or price	<i>Quantity</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Price</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Both</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Indexed to raw material costs <sup>1</sup>	<i>Yes</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<sup>1</sup> Please identify the indexes used:				

III-4. **Lead times.**--What is your firm’s share of sales from inventory and produced to order and what is the typical lead time between a customer’s order and the date of delivery for your firm’s sales of #abbrproduct?

<b>Source</b>	<b>Share of #termyear sales</b>	<b>Lead time (average number of days)</b>
From inventory	%	
Produced to order	%	
<b>Total</b> (should sum to 100.0%)	0.0 %	

III-5. **Raw materials.**--Indicate how #abbrproduct raw materials prices have changed since January 1, #bopyear, and how you expect they will change in the future.

Raw materials prices	Overall increase	No change	Overall decrease	Fluctuate with no clear trend	Explain, noting how raw material price changes have affected your firm's selling prices for #abbrproduct.
Changes since January 1, #bopyear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Anticipated changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

III-6. **Changes in factors affecting supply.**--Have any changes occurred in any other factors affecting supply (e.g., changes in availability or prices of energy or labor; transportation conditions; production capacity and/or methods of production; technology; export markets; or alternative production opportunities) that affected the availability of #ctrysubs-produced #abbrproduct in the U.S. market since January 1, #bopyear?

No	Yes	If yes, please describe.
<input type="checkbox"/>	<input type="checkbox"/>	

III-7. **Availability of SUBJECT import supply.**--Do you anticipate any changes in terms of the availability of #ctrysubs-produced #abbrproduct in the U.S. market in the future?

Increase	No change	Decrease	If you anticipate changes in supply, please identify the changes, including the time period and the impact of such changes on shipment volumes and prices.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

III-8. **Product shifting.**--Describe how easily your firm can shift its sales of #abbrproduct between the U.S. market and alternative country markets. In your discussion, please describe any contracts, other sales arrangements, or other constraints (including any third-country trade barriers such as tariffs, quotas, or other non-tariff barriers) that would prevent or retard your firm from shifting #abbrproduct between the U.S. and alternative country markets within a 12-month period.

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III-9. **Product range.**--Is the product range, product mix, or marketing of #abbrproduct in your firm's home market different from that of #abbrproduct for export to the United States or to third-country markets?

No	Yes	If yes, please explain.
<input type="checkbox"/>	<input type="checkbox"/>	

III-10. **Product changes.**--Have there been any significant changes in the product range, product mix, or marketing of #abbrproduct in your firm's home market, for export to the United States, or for export to third-country markets since January 1, #bopyear? Do you anticipate any future changes?

<b>Changes in product range, product mix, or marketing</b>	<b>No</b>	<b>Yes</b>	<b>Explain</b>
Changes since January 1, #bopyear	<input type="checkbox"/>	<input type="checkbox"/>	
Anticipated changes	<input type="checkbox"/>	<input type="checkbox"/>	

III-11. **Substitutes.** --Have there been any changes in the number or types of products that can be substituted for #abbrproduct since January 1, #bopyear? Do you anticipate any future changes?

<b>Changes in substitutes</b>	<b>No</b>	<b>Yes</b>	<b>Explain</b>
Changes since January 1, #bopyear	<input type="checkbox"/>	<input type="checkbox"/>	
Anticipated changes	<input type="checkbox"/>	<input type="checkbox"/>	

III-12. **Interchangeability.**--Is the #abbrproduct produced by your firm and sold in its home market interchangeable (i.e., can be used in the same applications) with your firm's #abbrproduct sold to the United States and/or to third-country markets?

<b>Yes</b>	<b>No</b>	<b>If no, identify the market(s) and any differences in the products.</b>
<input type="checkbox"/>	<input type="checkbox"/>	

III-13. **End uses.**—

- (a) Describe the end uses of the #abbrproduct that your firm manufactures and sell to your firm's home market. If these end uses differ from those of the #abbrproduct your firm sells to the U.S. market or to third-country markets, explain.

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- (b) Have there been any changes in the end uses of #abbrproduct since January 1, #bopyear? Do you anticipate any future changes?

Changes in end uses	No	Yes	Explain
Changes since January 1, #bopyear	<input type="checkbox"/>	<input type="checkbox"/>	
Anticipated changes	<input type="checkbox"/>	<input type="checkbox"/>	

- III-14. **Demand trends.**--Indicate how demand in the following markets for #abbrproduct has changed since January 1, #bopyear, and how you anticipate demand will change in the future. Explain any trends and describe the principal factors that have affected, and that you anticipate will affect, these changes in demand.

Your firm's market	Overall increase	No change	Overall decrease	Fluctuate with no clear trend	Explanation and factors
<b>Demand since January 1, #bopyear</b>					
Home market	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
United States	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other markets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Anticipated future demand</b>					
Home market	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
United States	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

markets					
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III-15. **Price comparisons.**--Please compare market prices of #abbrproduct in your firm's home market, the United States, and third-country markets.

III-16. **Description of home market.**--Describe briefly your firm's home market for #abbrproduct, including the number of, and competition between, producers.

III-17. **Import competition.**--Does your firm face competition from imports of #abbrproduct in your firm's home market?

No	Yes	If yes, please identify the country sources of these imports.
<input type="checkbox"/>	<input type="checkbox"/>	

III-18. **Market studies.**--Please provide as a separate attachment to this request any studies, surveys, etc. that you are aware of that quantify and/or otherwise discuss #abbrproduct supply (including production capacity and capacity utilization) and demand in (1) the United States, (2) each of the other major producing/consuming countries, including #ctrysubs, and (3) the world as a whole. Of particular interest is such data from #bopyear to the present and forecasts for the future.

III-19. **Other explanations.**--If your firm would like to further explain a response to a question in Part III for which a narrative box was not provided, please note the question number and the explanation in the space provided below. Please also use this space to highlight any issues your firm had in providing the data in this section, including but not limited to technical issues with the MS Word questionnaire.

**Correcting Valid number error messages.**--If you are completing a Commission questionnaire in a country that uses periods (".") to delineate multiples of 1000 (e.g., one million would appear as \$1.000.000 instead of as \$1,000,000), you may be unable to enter in numbers greater than 999 in numeric form fields. This issues stem from your computer number formatting setting (e.g., not the MS Word document itself, but the computer from which you are opening up the document). In the United States commas (,) delineate multiples of 1000 and periods (.) delineate fractions less than one. Many EU countries use the reverse where multiples of 1000 are delineated with periods (.) and fractions less than one are delineated with commas (,). The U.S. International Trade Commission's questionnaires are set-up in the United States with the U.S. number formatting. When this formatting interacts with a computer set to EU number formatting, we believe this may cause this issue.

The solution to this data entry issue is to temporarily change your operating system's number formatting to be consistent with the U.S. number formatting system while you complete the questionnaire.

To temporarily change your computer's number settings to U.S. settings, please do the following (for Microsoft Windows Operating system):

- START
- Control Panel
- Region and Language (under Clock, Language, and Region category)
- Format tab
- Change the Format from your existing one (e.g. "Italian (Italy)") to "English (United States)" (see screen shots below)

When you do this the number "twelve million dollars and thirty five cents" would change from \$12.000.000,35 (Italy format) to \$12,000,000.35 (U.S. format), and then there will be no conflict with the USITC foreign producer questionnaire form. When you finish reporting the data then you can close the questionnaire and switch back to Italy settings.

Region and Language

Formats Location Keyboards and Languages Administrative

Format: Italian (Italy)

Date and time formats

Short date: dd/MM/yyyy

Long date: dddd d MMMM yyyy

Short time: HH:mm

Long time: HH:mm:ss

First day of week: lunedì

[What does the notation mean?](#)

Examples

Short date: 03/11/2015

Long date: martedì 3 novembre 2015

Short time: 10:35

Long time: 10:35:44

Additional settings...

[Go online to learn about changing languages and regional formats](#)

OK Cancel Apply

Region and Language

Formats Location Keyboards and Languages Administrative

Format: English (United States)

Date and time formats

Short date: M/d/yyyy

Long date: dddd, MMMM dd, yyyy

Short time: h:mm tt

Long time: h:mm:ss tt

First day of week: Sunday

[What does the notation mean?](#)

Examples

Short date: 8/6/2015

Long date: Thursday, August 06, 2015

Short time: 2:47 PM

Long time: 2:47:25 PM

Additional settings...

[Go online to learn about changing languages and regional formats](#)

OK Cancel Apply

## HOW TO FILE YOUR QUESTIONNAIRE RESPONSE

This questionnaire is available as a “fillable” form in MS Word format on the Commission’s website at: [LINK](#)

***Please do not attempt to modify the format or permissions of the questionnaire document.*** Please submit the completed questionnaire using one of the methods noted below. If your firm is unable to complete the MS Word questionnaire or cannot use one of the electronic methods of submission, please contact the Commission for further instructions.

- **Upload via Secure Drop Box.**—Upload the MS Word questionnaire along with a scanned copy of the signed certification page (page 1) through the Commission’s secure upload facility:

**Web address:** <https://dropbox.usitc.gov/oinv/>      **Pin:** XXXX

- **E-mail.**—E-mail the MS Word questionnaire to [NAME@usitc.gov](mailto:NAME@usitc.gov); include a scanned copy of the signed certification page (page 1). *Submitters are strongly encouraged to encrypt nonpublic documents that are electronically transmitted to the Commission to protect your sensitive information from unauthorized disclosure. The USITC secure drop-box system and the Electronic Document Information System (EDIS) use Federal Information Processing Standards (FIPS) 140-2 cryptographic algorithms to encrypt data in transit. Submitting your nonpublic documents by a means that does not use these encryption algorithms (such as by email) may subject your firm’s nonpublic information to unauthorized disclosure during transmission. If you choose a non-encrypted method of electronic transmission, the Commission warns you that the risk of such possible unauthorized disclosure is assumed by you and not by the Commission.*

**If your firm did not produce or export this product**, please fill out page 1, print, sign, and submit a scanned copy to the Commission.

***Parties to this proceeding.***—If your firm is a party to this proceeding, it is required to serve a copy of the completed questionnaire on parties to the proceeding that are subject to administrative protective order (see 19 CFR § 207.7). A list of such parties may be obtained from the Commission’s Secretary (202-205-1803). A certificate of service must accompany the completed questionnaire you submit (see 19 CFR § 207.7). Service of the questionnaire must be made in paper form.