ОМВ	CONT	ROLI	NO.	ŀ	TITLE OF II	NFORMATION CO	DLLECTION REQUEST							DATE PREPARE	D
	0579-0212												5/1/2020		
TYPE	TYPE OF REQUEST				Blood and Tissue Collection, and Recordkeeping, at Slaughtering, Rendering, and Approved Livestock								PUBLIC COMMENT DOCKET NO.		
	Renewal				Marketing Establishments and Facilities								APHIS-2020-0058		
POIN	POINT OF CONTACT													FEDERAL REGISTER NOTICE	
	Dr. D	Debra	Cox											Vol. 85, No. 123 PG 38108	
TELE	TELEPHONE NO.													FEDERAL REGISTER DATE	
	(301)	851-	3504											6/25/2020	
								Р	ART I - SUMMARY	′					
	TOTAL F	RESPO	NDENTS	S	TOTAL ANI	NUAL RESPONSES	% ELECTRONIC	RESI	PONSES PER RESPOND	DENT	TOTAL	BURDEN HOURS	HOURS PER RESPO	ONSE % SM	ALL ENTITIES
		791			(6,635	60%		8			1,111	0.167		17%
				'			F	ART	II - LIST OF ACTIV	ITIES			ı		
TYPE OF CHANGE	TYPE OF RESPONDENT	FIRST OCCURENCE	TYPE OF RESPONSE	AUTHORITY (U.S.C., CFR, or Manual)		ACTIVITY DESCRIPTI (title, respondent ty	ON pe, and type of change if discreti	onary)	FORM NO.	FC	DRMAT	ESTIMATED ANNUAL NUMBER OF RESPONDENTS or RECORDKEEPERS	ESTIMATED ANNUAL RESPONSES	ESTIMATED HOURS PER RESPONSE OF ANNUAL HOURS PER RECORDKEEPER	ESTIMATED ANNUAL BURDEN HOURS
(A)	(B)	(C)	(D)		(E)		(F)		(G)		(H)	(1)	(J)	(K)	(L)
E	P1	X	I	9 CFR	FR 71.20(a) Approval of Liv (Business)		estock Facility Agreement		None		DF & ctronic	138	138	1.000	138
E	S1	х	I	9 CFR	Approval of Live (State)		stock Facility Agreemer	nt	None		DF & ctronic	46	138	1.000	138
E	P1		1	9 CFR	? 71.20(a)	Schedule of Sales Days (Business)		None		DF & ctronic	2	2	0.083	1	
Е	P1		I	9 CFR	? 71.20(a)	Diseased Animal Notification (Business)		None		DF & ctronic	2	2	0.083	1	
Е	P1	Х	TP	9 CFR	? 71.20(a)	Quarantine Signs (Business) (Third Party Disclosure)		None			7	7	0.250	2	
Е	P1		ı	9 CFR (1)	? 71.20(b)	Request for Appeal of Denial of Agreement (Business)		None		DF & ctronic	1	1	0.500	1	

TYPE OF CHANGE	TYPE OF RESPONDENT	FIRST OCCURENCE	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)	(1)	(J)	(K)	(L)
E	P1		I	9 CFR 71.20(b) (2)	Request for Appeal of Withdrawal of Agreement (Business)	None	PDF	1	1	0.500	1
E	P1		I	9 CFR 71.20(b) (3)	Withdrawal of a Livestock Facility Agreement (Business)	None	PDF	1	1	0.500	1
E	P1		I	9 CFR 71.21(a)	Listing Agreement for a Slaughter Establishment Handling Livestock, Poultry, or Carcasses in Interstate Commerce (Business)	VS 10-6A	PDF & electronic	585	585	0.500	293
E	P1		I	9 CFR 71.21(a)	Listing Agreement for a Rendering Establishment Handling Livestock, Poultry, or Carcasses in Interstate Commerce (Business)	VS 10-6B	PDF & electronic	15	15	0.500	8
E	P1	Х	I	9 CFR 71.21(b)	USDA Listed Slaughter or Rendering Facility Inspection Report (Business)	VS 10-5	PDF & electronic	600	2,400	0.083	200
E	P1		Ι	9 CFR 71.21(d) (1)	Request for Appeal of Denial of Listing (Business)	None	PDF & electronic	1	1	0.500	1
E	P1		Ι	9 CFR 71.21(d) (2)	Request for Appeal of Withdrawal of Listing (Business)	None	PDF & electronic	1	1	0.500	1
Е	P1		R	9 CFR 71.20(a)	Recordkeeping, General (Business)	None			138	0.417	58
Е	P1		R	9 CFR 71.20(a)	Recordkeeping, 2-year Requirement (Business)	None			323	0.083	27
Е	P1		R	9 CFR 71.20(a)	Recordkeeping, 5-year Requirement (Business)	None			2,882	0.083	240

TYPE OF CHANGE	TYPE OF RESPONDENT	FIRST OCCURENCE	TYPE OF RESPONSE	AUTHORITY (U.S.C., CFR, or Manual)	ACTIVITY DESCRIPTION (title, respondent type, and type of change if discretionary)	FORM NO.		ESTIMATED ANNUAL NUMBER OF RESPONDENTS OF RECORDKEEPERS	ESTIMATED ANNUAL	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)

Collection Number	057	9-0212]			
Expiration Date	10/3	31/2020				
Formula Check for Information Collections	Sui	mmary	Respo	<u>Total</u>		
A = Respondents (given)		791	FG, Foreign Gover	G, Foreign Government		
B = Responses per Respondent		8 8		S1, State Government S2, Local Government		
C = Annual Responses (given)		6,635	1 '	Tribal Government		
D = Total Burden Hours (given)		1,111	P2, Farm P3, Non, Not-for-P	trofit	745 -	
Estimate of Burden (hours/ response)		0.16745	I , Individual or H	- - 791		
			! 		731	
Formula Check for Information Collections	Foreign (Government	Reporting	Record Keeping	3d Party	
A = Respondents (given)		-				
B = Responses per Respondent		#DIV/0!				
C = Annual Responses (given)		-				
D = Total Burden Hours (given)		-	-	-	-	
E1 = Estimate Adjustments (Responses)		-				
E2 = Estimate Adjustments (Hours)		-				
Formula Check for Information Collections	State, Loca	State, Local, Tribal Gov't		Record Keeping	3d Party	
A = Respondents (given)		46				
B = Responses per Respondent		3.000				
C = Annual Responses (given)		138				
D = Total Burden Hours (given)		138	138	-	-	
E1 = Estimate Adjustments (Responses)		138				
E2 = Estimate Adjustments (Hours)		138				
Formula Check for Information Collections	Pi	rivate	Reporting	Record Keeping	3d Party	
A = Respondents (given)		745				
B = Responses per Respondent		8.721				
C = Annual Responses (given)		6,497				
D = Total Burden Hours (given)		973	646	325	2	
E1 = Estimate Adjustments (Responses)		6,497				
E2 = Estimate Adjustments (Hours)		973				
Formula Check for Information Collections	Ind	ividual	Reporting	Record Keeping	3d Party	
A = Respondents (given)						
B = Responses per Respondent		#DIV/0!				
C = Annual Responses (given)						
D = Total Burden Hours (given)		_	_	_		

E1 = Estimate Adjustments (Responses)	-		
E2 = Estimate Adjustments (Hours)	-		

Question 12 calculations?