

OMB CONTROL NO. 0579-0332	TITLE OF INFORMATION COLLECTION REQUEST Standardizing Phytosanitary Treatment Regulations: Approval of Cold Treatment and Irradiation Facilities; Cold Treatment Schedules; Establishment of Fumigation and Cold Treatment Compliance Agreements	DATE PREPARED 03/03/2021
TYPE OF REQUEST Renewal		PUBLIC COMMENT DOCKET NO. APHIS-2020-0103
POINT OF CONTACT Mr. Rory Carolan		FEDERAL REGISTER NOTICE Vol. 85, No. 223 PG 78113
TELEPHONE NO. (301) 851-3558		FEDERAL REGISTER DATE 12/3/2020

PART I - SUMMARY

TOTAL RESPONDENTS 332	TOTAL ANNUAL RESPONSES 18,500	% ELECTRONIC 60%	RESPONSES PER RESPONDENT 56	TOTAL BURDEN HOURS 8,608	HOURS PER RESPONSE 0.465	% SMALL ENTITIES 70%
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PART II - LIST OF ACTIVITIES

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)	(I)	(J)	(K)	(L)
E	P1	X	I	88.2	Business Information - Drivers of Transport Vehicles (Business)	None		100	100	0.030	3
E	P1		I	88.4(a)(3)	Owner/Shipper Certificate of Fitness to Travel to a Slaughter Facility (Business)	VS 10-13	PDF	170	2,550	0.500	1,275
E	I	X	I	88.4(a)(3)	Owner/Shipper Certificate of Fitness to Travel to a Slaughter Facility (Individual)	VS 10-13	PDF	30	450	0.500	225
E	FG	X	I	88.4(a)(3)	Owner/Shipper Certificate of Fitness to Travel to a Slaughter Facility (Foreign Government)	VS 10-13	PDF	2	3,000	0.100	300
E	P1		I	88.4(a)(3)	Owner/Shipper Certificate of Fitness to Travel to a Slaughter Facility Continuation Sheet (Business)	VS 10-13A	PDF	170	2,550	0.500	1,275
E	I		I	88.4(a)(3)	Owner/Shipper Certificate of Fitness to Travel to a Slaughter Facility Continuation Sheet (Individual)	VS 10-13A	PDF	30	450	0.500	225

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)	(I)	(J)	(K)	(L)
E	FG		I	88.4(a)(3)	Owner/Shipper Certificate of Fitness to Travel to a Slaughter Facility Continuation Sheet (Foreign Government)	VS 10-13A	PDF	2	3,000	0.100	300
E	P1		I	88.4	Certificate of Veterinary Inspection (Business)	None		200	3,200	1.500	4,800
E	P1		R	88.4(f)	Recordkeeping (Business)				200	1.000	200
E	P1	X	TP	88.4(a)(1)	Application of backtags (Business) (third party disclosure)	None		200	3,000	0.002	5
											0
											0
											0

Collection Number	0579-0332
Expiration Date	04/30/2021
Formula Check for Information Collections	Summary
A = Respondents (given)	332
B = Responses per Respondent	56
C = Annual Responses (given)	18,500
D = Total Burden Hours (given)	8,608
Estimate of Burden (hours/ response)	0.46530

	<u>Respondents</u>	<u>Total</u>
FG, Foreign Government		2
S1, State Government		-
S2, Local Government		-
S3, Tribal Government		-
P1, Business		300
P2, Farm		-
P3, Non, Not-for-Profit		-
I, Individual or Household		30
		<u>332</u>

Formula Check for Information Collections	Foreign Government	Reporting	Record Keeping	3d Party
A = Respondents (given)	2			
B = Responses per Respondent	3,000.00000			
C = Annual Responses (given)	6,000			
D = Total Burden Hours (given)	600	600	-	-
E1 = Estimate Adjustments (Responses)	6,000			
E2 = Estimate Adjustments (Hours)	600			

Formula Check for Information Collections	State, Local, Tribal Gov't	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	Private	Reporting	Record Keeping	3d Party
A = Respondents (given)	300			
B = Responses per Respondent	38.667			
C = Annual Responses (given)	11,600			
D = Total Burden Hours (given)	7,558	7,353	200	5
E1 = Estimate Adjustments (Responses)	11,600			
E2 = Estimate Adjustments (Hours)	7,558			

Formula Check for Information Collections	Individual	Reporting	Record Keeping	3d Party
A = Respondents (given)	30			
B = Responses per Respondent	30.000			
C = Annual Responses (given)	900			
D = Total Burden Hours (given)	450	450	-	-

E1 = Estimate Adjustments (Responses)		900			
E2 = Estimate Adjustments (Hours)		450			

Question 12 calculations?