USDA-RHS		Title of Information Document						OMB No. <b>0575-0091</b>		
SUMMAR	RY OF INFORMATION COLLECTION		Date Prepared 05/31/22							
INSTRUCTIONS				>	(f) TOTAL		(h) TOTAL	•	(k) TOTAL	
Use this form w	hen a single information collection document involves multiple	e reporting and		>		= (e) Average		= (g) Average		= (j) Average
eeping require	ments.			>	(d) TOTAL		(f) TOTAL		(i) TOTAL	
IDENTIFICATION OF REPORTING AND RECORDKEEPPING REQUIREMENTS		ANNUAL BURDEN								
		FORM			REPORTS				RECORDS	
		NO(s)	NO. OF	NO. OF	TOTAL	HOURS	TOTAL	Wage Class* \$/per hour	Total Cost to the Public	TOTAL
SECTION OF		(If "none"	RESPON-	Reports Filed Annually	ANNUAL	PER	HOURS			RECORD-
REGULATIONS	DESCRIPTION	so state)	DENTS		RESPONSES	RESPONSE	(Col. f & g)			KEEPING
					(Col. d & e)					HOURS
										(Col. i & j)
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
	FORMS APPROVED UNDER THIS OMB DOCKET									
7 CFR, HB-1- 3550, Chapter 4	Applicant Reference Letter	Form RD 410-8 OMB No. 0575-0091	1	1	1	1	1	\$20.39	\$20.39	
	GRAND TOTAL FOR THIS COLLECTION:			1	1	1	1		\$20.39	
					_		_		, , , , ,	
									Page 1	of 1

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