## **US EPA Fee Form**

Help and EPA Instructions

\* Required Field

General Information	
Date: 03/11/2022	
Process Code *	
Submit Correction/Revision to Previous Fee Fili	ing Form \$
Manufacturer Code *	
Manufacturer Name *	
Contact Name *	
Contact Email Address *	Contact Phone *
Engine Family / Evaporative Family / Test Group	
*	
Revised Engine Family / Evaporative Family /	
Test Group	

Original Payment Information	
Payment Date *	
MM/DD/YYYY	
Amount Paid *	
Check#/Wire/ACH/Pay.gov Tracking Number *	
Reason for Correction	
Reason For Correction *	
Typographical error in original Engine Family / Evaporative Family / Test Group	
Overpayment for original family name, please apply the overpayment to the revised Engine Family / Evaporative Family / Test Group	
Other (explain in comments box)	
omments	

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OMB Control No. 2060-0545

Approval expires 12/31/2022

The public reporting and recordkeeping burden for this collection of information is estimated to average 12 minutes per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed forms to this address.

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