

PAPERWORK REDUCTION ACT CHANGE WORKSHEET

Agency/subagency	OMB Control Number
	<div style="border: 1px solid black; width: 80px; height: 20px; margin: 0 auto;"></div> - <div style="border: 1px solid black; width: 80px; height: 20px; margin: 0 auto;"></div>

Enter only items that change

	Current record	New record
--	----------------	------------

Agency form number (s)		
------------------------	--	--

Annual reporting and recordkeeping hour burden		
Number of respondents		
Total annual responses		
Percent of these responses collected electronically	%	%
Total annual hours		
Difference		
Explanation of difference		
Program change		
Adjustment		

Annual reporting and recordkeeping cost burden (in thousands of dollars)		
Total annualized Capital/Startup costs		
Total annual costs (O&M)		
Total annualized cost requested		
Difference		
Explanation of difference		
Program change		
Adjustment		

Other changes

Signature of Senior Official or designee:	Date:	For OIRA Use
		<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/>