OMB CONTROL NO.					TITLE OF INFORMATION COLLECTION REQUEST									DATE PREPARED	
0579-XXXX														August 21, 2023	
TYPE OF REQUEST					Animal Welfare; Amendments to the Horse Protection Regulations									PUBLIC COMMENT DOCKET NO.	
Proposed Rule					<u>-</u>									APHIS 2022-0004	
POINT OF CONTACT														FEDERAL REGISTER NOTICE	
Aaron Rhyner														88 FR 160	
TELEPHONE NO.													FEDERAL REGISTER DATE		
	(970)	494-	7484										21-Aug-23		
	TOTAL RESPONDENTS			•	TOTAL A	ANNUAL RESPONSES	% ELECTRONIC	RESP	PONSES PER RESPOND	DENT	TOTAL E	BURDEN HOURS	HOURS PER RESPO	ONSE % SMA	ALL ENTITIES
	530					1,155	100%		3		630		0.545	1	L00%
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	nt type, and type of change if discretionary)		FORM NO.		FORMAT	ESTIMATED ANNUAL NUMBER OF RESPONDENTS or RECORDKEEPERS	ESTIMATED TOTAL ANNUAL RESPONSES	ESTIMATED HOURS PER RESPONSE or ANNUAL HOURS PER RECORDKEEPER	ESTIMATED TOTAL ANNUAL BURDEN HOURS
(A)	(B)	(C)	(D)	(E)		(F)			(G)		(H)	(1)	(J)	(K)	(L)
	P1		I	9 CF 11.13(b		Unsatisfactory Performance Notice						5	5	1.000	5
	P1	x	R	11.14(b)		Retain Records for Horse Therapeutic Treatment						50	50	1.000	50
	P1	X	_	11.16(a)		Provide Show, Exhibition, Sale, or Auction Information to APHIS w/in 30 Days						450	450	0.500	225
	P1		I	11.16(a	a)(6)	(6) Request for Variance						20	20	1.000	20
	P1		I	11.16	11.16(b) Provide Changed S Auction Information		Show, Exhibition, Sale, or to APHIS w/in 15 Days					300	300	0.500	150

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 TOTAL ANNUAL RESPONSES	ESTIMATED HOURS PER RESPONSE or ANNUAL HOURS PER RECORDKEEPER	ESTIMATED TOTAL ANNUAL BURDEN HOURS
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	P1		_	11.16(c)	Post-Show Report			300	300	0.500	150
	P1	×	Ī	11.19(a)	Authorization of HPI Applicant			30	30	1.000	30