

PAPERWORK REDUCTION ACT CHANGE WORKSHEET

| | | |
|--|---|---|
| Agency/subagency | OMB Control Number | |
| | <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> - <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | |
| <i>Enter only items that change</i> | | |
| | 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="width: 100%; border: 0; border-top: 1px solid black;"/> <hr style="width: 100%; border: 0; border-top: 1px solid black;"/> |

** This form cannot be used to extend an expiration date.