

# Paperwork Reduction Act Change Worksheet

Agency/Subagency: <b>U.S. Department of Housing and Urban Development</b>	OMB Control Number: <b>2511-0001</b>
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Enter only items that change	Current Record	New Record**
Agency form number(s):		
<b>Annual reporting and keeping hour burden</b>		
Number of respondents	N/A	
Total annual responses		
Percent of these responses collected electronically	%	%
Total annual hours		
Difference		
Explanation of difference Program change Adjustment		
<b>Annual reporting and recordkeeping cost burden</b> (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 change: \*\*

The burden hours for the Generic ICR were put in using all the hours and when trying to add to the umbrella it exceeded the hours.

Signature of Senior Official or Designee:	Date:	<b>For OIRA Use</b>
X		

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