OMB CONTROL NUMBER	TITLE	
0607 - 0350	Survey of Residential Building or Zoning Permit Systems	
19. CERTIFICATION FOR PAPERWORK REDUCTION ACT SUBMISSIONS		
a. PROGRAM OFFICIAL CERTIFICA	TION (Internal DOC Use Only)	
Type name	Maney Color	Date
Nancy A. Potok, Deputy Director and Chief Operating Office Mark E. Doms, Under Secretary for Economic Affairs		
On behalf of this Federal agency, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9.		
NOTE : The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320.8(b)(3), appear at the end of the instructions. The certification is to be made with reference to those regulatory provisions as set forth in the instructions.		
The following is a summary of the topics, regarding the proposed collection of information, that the certification covers:		
(a) It is necessary for the proper performance of agency functions;		
(b) It avoids unnecessary duplication;		
(c) It reduces burden on small entities;		
(d) It uses plain, coherent, and unambiguous language that is understandable to respondents;		
(e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;		
(f) It indicates the retention periods for recordkeeping requirements;		
(g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3) about:		
(i) Why the information is being collected;		
(ii) Use of information;		
(iii) Burden estimate;		
(iv) Nature of response (voluntary, required for a benefit, or mandatory);		
(v) Nature and extent of confidentiality; and		
(vi) Need to display currently valid OMB control number;		
(h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected (see note in Item 19 of the instructions);		
(i) If applicable, it uses effective and efficient statistical survey methodology; and		
(j) It makes appropriate use of information technology.		
If you are unable to certify compliance with any of these provisions, identify the item below and explain the reason in Item 18 of the Supporting Statement.		
* NOTE: LEMOVE REFERENCE TO 13 OSC 9(8) FROM SUPPORTING STATEMENT — IT IS NOT PUTABLITY FOR THIS COLLECTION IN ORDER TO SUPPORT SEE PARAGRAPH (a)		
STATEMENT - IT IS NOT PUTHORITY FOR THIS		
COLLECTION WORVER TO SUPPORT SEE PARABLANTY (a)		
ABOVE.		
b. SENIOR OFFICIAL OR DESIGNEE C	ERTIFICATION	if
Type name		Date
Jennifer Jessup, Departmental Paper	work Clearance Officer	