

**PAPERWORK REDUCTION ACT
CHANGE WORKSHEET**

Agency/Subagency	OMB control number <div style="text-align: center;"> — _ _ _ _ _ </div>
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<i>Enter only items that change</i>		
	Current record	New record

Agency form number(s)		
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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**		
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Signature of Senior Official or designee:	Date:	For OIRA Use <div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>
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