

NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 01/23/2012

Department of Commerce
National Oceanic and Atmospheric Administration
FOR CERTIFYING OFFICIAL: Simon Szykman
FOR CLEARANCE OFFICER: Diana Hynek

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received 10/24/2011

ACTION REQUESTED: No material or nonsubstantive change to a currently approved collection
TYPE OF REVIEW REQUESTED: Regular
ICR REFERENCE NUMBER: 201109-0648-007
AGENCY ICR TRACKING NUMBER:
TITLE: NMFS Observer Programs' Information That Can Be Gathered Only Through Questions
LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved without change
OMB CONTROL NUMBER: 0648-0593

The agency is required to display the OMB Control Number and inform respondents of its legal significance in accordance with 5 CFR 1320.5(b).

EXPIRATION DATE: 09/30/2012

DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	20,643	26,172	1,160
New	20,643	26,172	1,160
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	0	0	0
Change due to Agency Adjustment	0	0	0
Change Due to Potential Violation of the PRA	0	0	0

TERMS OF CLEARANCE: Terms of the previous clearance remain in effect.

OMB Authorizing Official: Kevin F. Neyland
Deputy Administrator,
Office Of Information And Regulatory Affairs

List of ICs

IC Title	Form No.	Form Name	CFR Citation
		gear characteristics, Beach seine/beach anchored gillnet haul log, Clam/Quahog Dredge Haul Log, Gillnet Characteristics Log	
North Pacific Groundfish Observer Program	NA, NA, NA, NA	Safety checklist, Tagged Fish and Crab Form, Vessel/Plant Operator Comment Form, Vessel/Plant Operator Comment Card Follow-up Form	50 CFR 679.50
Alaska Marine Mammal Observer program	NA, NA	Data release form, Fishermen's comment card	50 CFR 600.746, 50 CFR 229 Subpart A
At-Sea Hake Observer Program (Northwest)	NA, NA	Fishermen's Data Request Form, Safety checklist	50 CFR 660.314
WCGOP: West Coast Groundfish Observer Program	NA, NA	Safety checklist, Fishermen's data request form	50 CFR 660.314
Pacific Islands Region Observer Program	NA, NA, NA, NA, NA	Placement meeting questions and checklist, Longline trip expenditures for Hawaiian Islands, Longline trip expenditures for American Samoa, Post cruise observer evaluation, Longline Gear Configuration	50 CFR 665.28
Southeast Shark Fishery Observer Program	NA, NA, NA, NA	Reimbursement form, Observer evaluation form, Observer notification form, Safety checklist	50 CFR 222.401
Southeast Pelagic Observer Program	NA, NA, NA, NA, NA, NA	Observer evaluation form, Reimbursement for for assistance with bluefin tuna samplin, Safety checklist, Reimbursement for insurance expenses, Reimbursement for equipment expenses, Observer Notification Form	50 CFR 622.8, 229.7, and 222.401
Gulf of Mexico Reef Fish and Shrimp Observer Program	NA, NA, NA, NA	Observer notification form_shrimp, Observer notification form_reef fish, Reef fish and shrimp observer evaluation form, Reef fish and shrimp safety checklist	50 CFR 622.8, 229.7, and 222.401

List of ICs

IC Title	Form No.	Form Name	CFR Citation
Southwest Region Observer Program - Funded	NA, NA	Drift gillnet trip expenditure form, Safety checklist	50 CFR 229 Subpart A
Southwest Region Observer Program - currently unfunded but requesting burden approval	NA, NA	Drift gillnet trip expense form, Safety checklist	50 CFR 229 Subpart A
South Atlantic Snapper-Grouper Observer Program	NA, NA, NA	Fax Notification , Safety checklist, Observer evaluation form	50 CFR 622.8

**JUSTIFICATION FOR CHANGES FOR
SOUTH ATLANTIC SNAPPER-GROUPER OBSERVER PROGRAM
OMB CONTROL NO. 0648-0593**

The purpose of this request is to create a separate information collection (IC) in ROCIS for “Observer Programs’ Information That Can Be Gathered Only Through Questions” (OMB Control No. 0648-0593), for the South Atlantic Snapper-Grouper observer burden approved through a non-substantive change request on 4/12/2011, in association with the Final Rule 0648-AW12. In that change request, these hours were included under the Southeast Region Shrimp and Reef Fish IC. We will also add the applicable regulations citations for the separate IC.

The 349 responses, 611 hours and \$25 approved in the previous change request will be transferred from the Southeast Region Shrimp and Reef Fish IC, the forms (shared with the Southeast Region Shrimp and Reef Fish program) will also be attached to the new IC, and the regulatory citation for 50 CFR 622.8 will be added.

PAPERWORK REDUCTION ACT CHANGE WORKSHEET

Agency/Subagency	OMB Control Number _____ - _____	
<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 _____ _____

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