PAPERWORK REDUCTION ACT SUBMISSION

Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the Supporting Statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.			
Agency/Subagency originating request	2. OMB control number		
U.S. Nuclear Regulatory Commission	a. 3 1 5 0 - 0 0 0 1 b. None		
3. Type of information collection (check one)	4. Type of review requested (check one)		
a. New collection	✓ a. Regular c. Delegated		
b. Revision of a currently approved collection	b. Emergency - Approval requested by (date):		
c. Extension of a currently approved collection	5. Will this information collection have a a. Yes significant economic impact on a		
d. Reinstatement, without change, of a previously approved collection for which approval has expired	substantial number of small entities?		
e. Reinstatement, with change, of a previously approved collection for which approval has expired	Requested		
f. Existing collection in use without an OMB control number	6. expiration date b. Other (Specify):		
7. Title			
10 CFR Part 32, Specific Domestic Licenses to Manufacture or Transfer Certain Items Containing Byproduct Material			
8. Agency form number(s) (if applicable)			
Not applicable			
9. Keywords			
Byproduct Material, Radiation Protection, Reporting and I	Recordkeening Requirements		
10. Abstract	recording requirements		
10 CFR 32 establishes requirements for specific licensees for the introduction of byproduct material into products or materials and initial transfer of the products or materials containing byproduct material to general licensees or persons exempt from licensing.			
11. Affected public (Mark primary with "P" and all others that apply with "Y")	12 Obligation to respond (Mark primary with "P" and all others that apply with "		
11. Affected public (Mark primary with "P" and all others that apply with "X") a. Individuals or households d. Farms	12. Obligation to respond (Mark primary with "P" and all others that apply with "X		
11. Affected public (Mark primary with "P" and all others that apply with "X") a. Individuals or households P b. Business or other for-profit X e. Federal Government	a. Voluntary		
a. Individuals or households d. Farms			
a. Individuals or households P b. Business or other for-profit X c. Not-for-profit institutions X f. State, Local or Tribal Government 13. Annual reporting and recordkeeping hour burden	 a. Voluntary b. Required to obtain or retain benefits P c. Mandatory 14. Annual reporting and recordkeeping cost burden (in thousands of dollar) 		
a. Individuals or households P b. Business or other for-profit X c. Not-for-profit institutions X f. State, Local or Tribal Government Annual reporting and recordkeeping hour burden a. Number of respondents	a. Voluntary b. Required to obtain or retain benefits c. Mandatory 14. Annual reporting and recordkeeping cost burden (in thousands of dollar a. Total annualized capital/startup costs \$\$ 0\$		
a. Individuals or households P b. Business or other for-profit X c. Not-for-profit institutions X f. State, Local or Tribal Government 13. Annual reporting and recordkeeping hour burden a. Number of respondents b. Total annual responses 4.187	a. Voluntary b. Required to obtain or retain benefits c. Mandatory 14. Annual reporting and recordkeeping cost burden (in thousands of dollar a. Total annualized capital/startup costs b. Total annual costs (O&M) \$\frac{1}{2}\$\$		
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a. Individuals or households b. Business or other for-profit X c. Not-for-profit institutions X f. State, Local or Tribal Government f. State, Local or Tribal	a. Voluntary b. Required to obtain or retain benefits c. Mandatory 14. Annual reporting and recordkeeping cost burden (in thousands of dollar a. Total annualized capital/startup costs b. Total annual costs (O&M) c. Total annualized cost requested d. Current OMB inventory e. Difference f. Explanation of difference 1. Program change		
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a. Individuals or households b. Business or other for-profit X c. Not-for-profit institutions X f. State, Local or Tribal Government f. State, Local or Tribal	a. Voluntary b. Required to obtain or retain benefits c. Mandatory 14. Annual reporting and recordkeeping cost burden (in thousands of dollar a. Total annualized capital/startup costs b. Total annual costs (O&M) c. Total annualized cost requested d. Current OMB inventory e. Difference f. Explanation of difference 1. Program change 2. Adjustment \$ 8 16. Frequency of recordkeeping or reporting (check all that apply) vig. 16. Third-party disclosure		
a. Individuals or households b. Business or other for-profit X c. Not-for-profit institutions X f. State, Local or Tribal Government f. State, Local or Tribal	a. Voluntary b. Required to obtain or retain benefits c. Mandatory 14. Annual reporting and recordkeeping cost burden (in thousands of dollar a. Total annualized capital/startup costs b. Total annual costs (O&M) c. Total annualized cost requested d. Current OMB inventory e. Difference f. Explanation of difference 1. Program change 2. Adjustment 16. Frequency of recordkeeping or reporting (check all that apply) 17. A Recordkeeping 18. Third-party disclosure 19. Third-party disclosure 19. Weekly 19. A Quarterly 19. Semi-annually 19. Annually 19. Annuall		
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a. Individuals or households b. Business or other for-profit X c. Not-for-profit institutions X f. State, Local or Tribal Government f. State, Local or Tribal	a. Voluntary b. Required to obtain or retain benefits c. Mandatory 14. Annual reporting and recordkeeping cost burden (in thousands of dollar a. Total annualized capital/startup costs b. Total annual costs (O&M) c. Total annualized cost requested d. Current OMB inventory e. Difference f. Explanation of difference 1. Program change 2. Adjustment 16. Frequency of recordkeeping or reporting (check all that apply) 17. A Recordkeeping 18. Third-party disclosure 19. Third-party disclosure 19. Weekly 19. A Quarterly 19. Semi-annually 19. Annually 19. Annuall		
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a. Individuals or households b. Business or other for-profit X c. Not-for-profit institutions X c. Not-for-profit institutions X f. State, Local or Tribal Government f. State, Local or Tribal Gove	a. Voluntary b. Required to obtain or retain benefits c. Mandatory 14. Annual reporting and recordkeeping cost burden (in thousands of dollar a. Total annualized capital/startup costs b. Total annual costs (O&M) c. Total annualized cost requested d. Current OMB inventory e. Difference f. Explanation of difference 1. Program change 2. Adjustment 16. Frequency of recordkeeping or reporting (check all that apply) a. Recordkeeping c. Reporting 1. On occasion 2. Weekly 3. Monthly 4. Quarterly 7. Biennially 7. Biennially 18. Agency contact (person who can best answer questions regarding the content of this submission)		

19. Certification for Paperwork Reduction Act Submissions

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 terminology 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):
 - (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 of 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) 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.

Signature of Authorized Agency Official	Date
Signature of Senior Official or designee	Date
(Original signed by Beth C. St. Mary for Brenda Shelton)	
Brenda Jo. Shelton, NRC Clearance Officer, Office of the Chief Information Officer	07/01/2002

OMB 83-I 10/95