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.	
1. Agency/Subagency originating request	2. OMB control number
U.S. Nuclear Regulatory Commission	√ a. 3150 - 0015 b. None
3. Type of information collection (check one)	4. Type of review requested (check one)
a. New collection	J 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
d. Reinstatement, without change, of a previously approved	significant economic impact on a substantial number of small entities?
collection for which approval has expired e. Reinstatement, with change, of a previously approved	
collection for which approval has expired	6. Requested expiration date
f. Existing collection in use without an OMB control number	b. Other (Specify):
7. Title	
10 CFR Part 33, Specific Domestic Licenses of Broad Scope for ByProduct Material	
8. Agency form number(s) (if applicable)	
N/A	
9. Keywords	
Byproduct Material, Reporting and Recordkeeping Requirements	
10. Abstract	
10 CFR Part 33 contains requirements for the issuance of a broad scope license authorizing the use of byproduct material and specific requirements for obtaining a broad scoope license. The requirements include equipment, facilities, personnel, and procedures to protect health and minimize danger to life or property.	
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11. Affected public (Mark primary with "P" and all others that apply with "X")	12. Obligation to respond (Mark primary with "P" and all others that apply with "X")
a. Individuals or households d. Farms	a. Voluntary
X b. Business or other for-profit X e. Federal Government	b. Required to obtain or retain benefits
X c. Not-for-profit institutions X f. State, Local or Tribal Government	X c. Mandatory
13. Annual reporting and recordkeeping hour burden	14. Annual reporting and recordkeeping cost burden (in thousands of dollars)
a. Number of respondents	a. Total annualized capital/startup costs \$ 0 0
b. Total annual responses	b. Total annual costs (O&M) S 0
1. Percentage of these responses collected electronically0.0_%	c. Total annualized cost requested \$ 0 d. Current OMB Inventory \$ 0
c. Total annual hours requested 1	d. Current OMB Inventory <u>\$ 0</u> e. Difference <u>\$ 0</u>
d. Current OMB inventory 1	
e. Difference 0	f. Explanation of difference
f. Explanation of difference 0	1. Program change\$02. Adjustment\$0
1. Program change 0 2. Adjustment 0	
15. Purpose of information collection	16. Frequency of recordkeeping or reporting <i>(check all that apply)</i>
15. Purpose of Information collection (Mark primary with "P" and all others that apply with "X")	a. Recordkeeping D. Third-party disclosure
15. Purpose of information collection (Mark primary with "P" and all others that apply with "X") a. Application for benefits e. Program planning or management	a. Recordkeeping b. Third-party disclosure J c. Reporting
15. Purpose of information collection (Mark primary with "P" and all others that apply with "X") a. Application for benefits b. Program evaluation	a. Recordkeeping b. Third-party disclosure J c. Reporting J 1. On occasion 2. Weekly 3. Monthly
15. Purpose of Information collection (Mark primary with "P" and all others that apply with "X") a. Application for benefits e. Program planning or management	a. Recordkeeping b. Third-party disclosure J c. Reporting
15. Purpose of information collection (Mark primary with "P" and all others that apply with "X") a. Application for benefits b. Program evaluation c. General purpose statistics P g. Regulatory or compliance	a. Recordkeeping b. Third-party disclosure Image: C. Reporting b. Third-party disclosure Image: C. Reporting c. Reporting Image: C. Reporting
15. Purpose of Information collection (Mark primary with "P" and all others that apply with "X") a. Application for benefits b. Program evaluation c. General purpose statistics P g. Regulatory or compliance d. Audit	a. Recordkeeping b. Third-party disclosure ✓ c. Reporting b. Third-party disclosure ✓ 1. On occasion 2. Weekly 3. Monthly 4. Quarterly 5. Semi-annually 6. Annually 7. Biennially ✓ 8. Other (describe) 18. Agency contact (person who can best answer questions regarding the content of this submission)
 15. Purpose of information collection (Mark primary with "P" and all others that apply with "X") a. Application for benefits b. Program evaluation c. General purpose statistics P g. Regulatory or compliance d. Audit 17. Statistical methods Does this information collection employ statistical methods? 	a. Recordkeeping b. Third-party disclosure Image: C. Reporting b. Third-party disclosure Image: C. Reporting c. Reporting Image: C. Reporting
 15. Purpose of information collection (Mark primary with "P" and all others that apply with "X") a. Application for benefits b. Program evaluation c. General purpose statistics P g. Regulatory or compliance d. Audit 17. Statistical methods 	a. Recordkeeping b. Third-party disclosure Image: C. Reporting b. Third-party disclosure Image: C. Reporting c. Reporting Image: Report of this submission c. Report of this submission Name: C. Report of this submission c. Report of this submission
 15. Purpose of information collection (Mark primary with "P" and all others that apply with "X") a. Application for benefits b. Program evaluation c. General purpose statistics P g. Regulatory or compliance d. Audit 17. Statistical methods Does this information collection employ statistical methods? 	a. Recordkeeping b. Third-party disclosure Image: C. Reporting b. Third-party disclosure Image: C. Reporting c. Reporting Image: C. Reporting

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 Senior Official or designee

Brenda Jo. Shelton, NRC Clearance Officer, Office of Information Services

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Date