

OMB CONTROL NO. 0579-0192	TITLE OF INFORMATION COLLECTION REQUEST  Infectious Salmon Anemia (ISA) Payment of Indemnity	DATE PREPARED June 14, 2021
TYPE OF REQUEST Renewal		PUBLIC COMMENT DOCKET NO. APHIS-2020-0110
POINT OF CONTACT Teresa Robinson		FEDERAL REGISTER NOTICE 85 FR 74312
TELEPHONE NO. (207) 319-6703		FEDERAL REGISTER DATE November 20, 2020

**PART I - SUMMARY**

TOTAL RESPONDENTS <b>13</b>	TOTAL ANNUAL RESPONSES <b>191</b>	% ELECTRONIC <b>0%</b>	RESPONSES PER RESPONDENT <b>14.6923077</b>	TOTAL BURDEN HOURS <b>549</b>	HOURS PER RESPONSE <b>2.87435</b>	% SMALL ENTITIES <b>0%</b>
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**PART II - LIST OF ACTIVITIES**

TYPE OF CHANGE	TYPE OF RESPONDENT	FIRST OCCURRENCE	TYPE OF RESPONSE	AUTHORITY (U.S.C., CFR, or Manual)	ACTIVITY DESCRIPTION (title, respondent type, and type of change if discretionary)	FORM NO.	FORMAT	ESTIMATED ANNUAL NUMBER OF RESPONDENTS or RECORDKEEPERS	ESTIMATED TOTAL ANNUAL RESPONSES	ESTIMATED HOURS PER RESPONSE or ANNUAL HOURS PER RECORDKEEPER	ESTIMATED TOTAL ANNUAL BURDEN HOURS
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	P2		I	9 CFR 53.10	ISA Program Enrollment Form	VS 1-22		1	1	0.250	1
	P2		I	9 CFR 53.8	All Species Appraisal and Indemnity Claim Form and Continuation Sheet	VS 1-23 and 1-23A		1	1	1	1
D	P2		R	9 CFR 53.8	All Species Appraisal and Indemnity Claim Form and Continuation Sheet	VS 1-23 and 1-23A		1	1	2	2
	P2		I	9 CFR 53.10(e)(3)	Biosecurity Protocols	None		1	1	3	3
	P2		I	9 CFR 53.10(e)(8)	Biosecurity Audits	None		1	13	2	26
	P2		I	9 CFR 53.10(e)(4)	ISA Action Plan	None		1	13	3	39
	P2		I	9 CFR 53.10(e)(6)	Fish Inventory	None		1	1	3	3
	P2		I	9 CFR 53.10(e)(7)	Mortality Data	None		1	1	3	3
	P2		R	9 CFR 53.10(e)(7)	Mortality Data	None		1	1	1	1
	P2	X	I	9 CFR 53.10(e)(2)	Disease Surveillance	None		13	156	3	468
	P2		I	9 CFR 53.2(b)	Proceeds from Animals Sold for Slaughter	VS 1-24		1	1	1	1
	P2		I	9 CFR 53.2(b)	Appraisal Request for Affected Premises Using Contract Growers	VS 1-26		1	1	1	1