

Paperwork Reduction Act Submission

Please read the instruction before completing this form. For additional forms or assistance in completing this forms, contact your agency's Paperwork Reduction 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 Seventeenth St. NW, Washington, DC 20503.

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|--|--|----|---------------------------|----|--|----|---------------------------------|----|--------------------------|---|---------------------|-----|-------------------------------|--|--------------------|-----|----------------|--|--|
| <p>1. Agency/Subagency Originating Request: U.S. Department of Housing and Urban Development Office of Single Family Housing, Office of Single Family Asset Management, Asset Management and Disposition Division</p> | <p>2. OMB Control Number: a. <input type="checkbox"/> None b. <input checked="" type="checkbox"/> 2502</p> | | | | | | | | | | | | | | | | | | |
| <p>3. Type of information collection: (check one)</p> <p>a. <input checked="" type="checkbox"/> New Collection b. <input type="checkbox"/> Revision of a currently approved collection c. <input type="checkbox"/> Extension of a currently approved collection d. <input type="checkbox"/> Reinstatement, without change, of previously approved collection for which approval has expired e. <input type="checkbox"/> Reinstatement, with change, of previously approved collection for which approval has expired f. <input type="checkbox"/> Existing collection in use without an OMB control number</p> <p>For b-f, note item A2 of Supporting Statement instructions.</p> | <p>4. Type of review requested: (check one)</p> <p>a. <input checked="" type="checkbox"/> Regular b. <input type="checkbox"/> Emergency - Approval requested by c. <input type="checkbox"/> Delegated</p> <p>5. Small entities: Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>6. Requested expiration date: a. <input checked="" type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other (specify)</p> | | | | | | | | | | | | | | | | | | |
| <p>7. Title: REVITALIZATION AREA DESIGNATION AND MANAGEMENT</p> | | | | | | | | | | | | | | | | | | | |
| <p>8. Agency form number(s): (if applicable) None</p> | | | | | | | | | | | | | | | | | | | |
| <p>9. Keywords: Housing, revitalization area; property disposition.</p> | | | | | | | | | | | | | | | | | | | |
| <p>10. Abstract: The Department accepts requests from local governments or interested nonprofit organizations to designate specified geographic areas as revitalization areas. A request must describe the nominated area in terms of census block groups. No direct benefit accrues to the requester. Requests are initiated voluntarily.</p> | | | | | | | | | | | | | | | | | | | |
| <p>11. Affected public: (mark primary with "P" and all others that apply with "X")</p> <p>a. Individuals or households e. Farms b. Business or other for-profit f. <input checked="" type="checkbox"/> Federal Government c. <input checked="" type="checkbox"/> Not-for-profit institutions g. <input checked="" type="checkbox"/> State, Local or Tribal Government</p> | <p>12. Obligation to respond: (mark primary with "P" and all others that apply with "X")</p> <p>a. <input checked="" type="checkbox"/> Voluntary b. <input checked="" type="checkbox"/> Required to obtain or retain benefits c. <input type="checkbox"/> Mandatory</p> | | | | | | | | | | | | | | | | | | |
| <p>13. Annual reporting and recordkeeping hour burden:</p> <table style="width: 100%; border: none;"> <tr><td>a. Number of respondents</td><td style="text-align: right;">12</td></tr> <tr><td>b. Total annual responses</td><td style="text-align: right;">12</td></tr> <tr><td> Percentage of these responses collected electronically</td><td style="text-align: right;">0%</td></tr> <tr><td>c. Total annual hours requested</td><td style="text-align: right;">24</td></tr> <tr><td>d. Current OMB inventory</td><td style="text-align: right;">0</td></tr> <tr><td>e. Difference (+,-)</td><td style="text-align: right;">+24</td></tr> <tr><td>f. Explanation of difference:</td><td></td></tr> <tr><td> 1. Program change:</td><td style="text-align: right;">+24</td></tr> <tr><td> 2. Adjustment:</td><td></td></tr> </table> | a. Number of respondents | 12 | b. Total annual responses | 12 | Percentage of these responses collected electronically | 0% | c. Total annual hours requested | 24 | d. Current OMB inventory | 0 | e. Difference (+,-) | +24 | f. Explanation of difference: | | 1. Program change: | +24 | 2. Adjustment: | | <p>14. Annual reporting and recordkeeping cost burden: (in thousands of dollars) Do not include costs based on the hours in item 13.</p> <p>a. Total annualized capital/startup costs b. Total annual costs (O&M) c. Total annualized cost requested d. Total annual cost requested e. Current OMB inventory f. Explanation of difference: 1. Program change: 2. Adjustment:</p> |
| a. Number of respondents | 12 | | | | | | | | | | | | | | | | | | |
| b. Total annual responses | 12 | | | | | | | | | | | | | | | | | | |
| Percentage of these responses collected electronically | 0% | | | | | | | | | | | | | | | | | | |
| c. Total annual hours requested | 24 | | | | | | | | | | | | | | | | | | |
| d. Current OMB inventory | 0 | | | | | | | | | | | | | | | | | | |
| e. Difference (+,-) | +24 | | | | | | | | | | | | | | | | | | |
| f. Explanation of difference: | | | | | | | | | | | | | | | | | | | |
| 1. Program change: | +24 | | | | | | | | | | | | | | | | | | |
| 2. Adjustment: | | | | | | | | | | | | | | | | | | | |
| <p>15. Purpose of Information collection: (mark primary with "P" and all others that apply with "X")</p> <p>a. <input checked="" type="checkbox"/> Application for benefits e. <input checked="" type="checkbox"/> Program planning or management b. Program evaluation f. Research c. General purpose statistics g. <input checked="" type="checkbox"/> Regulatory or compliance d. Audit</p> | <p>16. Frequency of recordkeeping or reporting: (check all that apply)</p> <p>a. <input type="checkbox"/> Recordkeeping b. <input type="checkbox"/> Third party disclosure c. <input checked="" type="checkbox"/> Reporting: 1. <input checked="" type="checkbox"/> On occasion 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly 4. <input type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input type="checkbox"/> Annually 7. <input type="checkbox"/> Biennially 8. <input checked="" type="checkbox"/> Other (describe)</p> | | | | | | | | | | | | | | | | | | |
| <p>17. Statistical methods: Does this information collection employ statistical methods? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> | <p>18. Agency contact: (person who can best answer questions regarding the content of this submission) Name: James C. Everett, Policy Specialist/Team Leader Phone: (202) 708-0614 x2133</p> | | | | | | | | | | | | | | | | | | |

19. Certification for Paperwork Reduction Act Submissions

On behalf of the U.S. Department of Housing and Urban Development, 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) appears 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 collections 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 the information;
 - (iii) Burden estimate;
 - (iv) Nature of response (voluntary, required for a benefit, or mandatory);
 - (v) Nature and 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 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 Program Official:

Date:

X
Kevin B. Perkins, Director, Organizational Policy, Planning and Analysis Division, HROA

Signature of Senior Officer or Designee:

Date:

X
Lillian Deitzer, Departmental Reports Management Officer,
Office of the Chief Information Officer

Supporting Statement for Paperwork Reduction Act Submissions

Revitalization Area Designation And Management

A. Justification

1. The Secretary is authorized to sell any properties conveyed to him in exchange for debentures and certificates of claim (12 U.S.C. 1710(g)). The Secretary is required to carry out a program under which eligible assets shall be made available for sale in a manner that promotes the revitalization, through expanded homeownership opportunities, of revitalization areas (12 U.S.C. 1710(h)(1)). The Secretary is required to designate areas as revitalization areas after consulting with affected units of general local government and interested nonprofit organizations. The Secretary may designate as revitalization areas only areas that meet one of the following requirements: (a) very low-income area; (b) high concentration of eligible assets; or low home ownership rate (12 U.S.C. 1710(h)(3)). The program is operating under a Housing Notice with regulatory development pending.

The requesting entity receives no benefit from approval of its request for designation. Individual citizens may receive a benefit resulting from the operation of special property disposition programs in an approved area. For example, HUD's Officer Next Door and Teacher Next Door Sales programs offers homes for purchase to law enforcement officers and teachers at a fifty percent discount. The homes must be located in a revitalization area to be eligible for sale at the discount rate.

2. A local government or interested nonprofit may submit a request for designation of a described geographic area by the Department as a Revitalization Area. Requests are generally stated in a one to two page letter on the requester's stationery. A request must describe the area using census block group designations. No other form of submission is required. The underlying research to by the requester to identify an area of interest for designation is likely to be performed in the general course of the entity's community development interests and work such that the principal effort will be discussing and formulating the actual request. HUD's review is limited by legislation to determining or verifying that the nominated area meets at least one of three legislatively established criteria. Deliberation is not required, as any nominated area meeting at least one criterion must be approved. HUD must examine and consider any area proposed by an entity. The entity is not required to justify the request. HUD uses the information to determine whether or not a property meets the requirements for that designation.

HUD is mandated to review the eligibility of all designated revitalization areas at least annually. HUD accomplishes this by requiring each of the four Homeownership Center to review the eligibility of designated areas within its jurisdiction and report the results to Headquarters.

3. The information is not generally collected electronically, although HUD will accept requests and related attachments to email. Requests are generally stated in a one to two page letter on the requester's stationery. The local government or interested nonprofit initiates a request to the Department through a regional Homeownership Center administrative office to designate a geographic area as a revitalization area. The requester identifies the nominated area by census block group listings. The Department utilizes geographic information systems to determine if the proposed area meets revitalization area designation criteria. Automation for the small number of responses would not be cost-efficient.

Federal field officials are required to review existing designated areas at least annually to determine the continuing appropriateness of a Revitalization Area designation for a geographic area. The review process

relies solely on geographic mapping tools for the review and does not request or require submissions by the original requesting party.

4. The information is not collected elsewhere.
5. Governmental and non-profit entities making the requests may be small entities. The information required is the minimum possible for HUD to review the request.
6. Collection of proposed designation information is necessary in order to have a revitalization area program. Designated revitalization areas are, in turn, the basis for selecting FHA foreclosed properties for sale through various discount sales program. Selection of inappropriate areas may result in the inappropriate sale of certain properties at substantial discounts resulting in a consequent loss of revenue to the FHA insurance funds.
7. There are no special circumstances required in this collection.
8. In accordance with 5 C.F.R. 1320.8(d), a notice inviting public comments was published in the *Federal Register* on April 28, 2006 (Vol. 71, No. 82, page 25206). An inquiry has been made to three parties who have submitted requests for designation of revitalization areas as described in this filing. No objection was raised to the information collection, which is required by statute (12 USC 1710(g)) as a prerequisite for approving a request.
9. No payments or gifts to respondents are involved in this program.
10. No assurance of confidentiality is provided to respondents and there is no basis for assurance in statute, regulation, or agency policy.
11. There are no questions of a sensitive nature.
12. The following are the estimates of the burden hours of the collection of information.

| Information Collection | Number of Respondents | Frequency of Response | Total Annual Responses | Hours per Response | Total Annual Hours | Cost per Hour | Total Annual Cost |
|----------------------------------|-----------------------|-----------------------|------------------------|--------------------|--------------------|---------------|-------------------|
| Preparation of requesting letter | 12 | 1 | 12 | 2 | 24 | \$26 | \$624 |

Hourly rate based on an estimated salary for local government employees of approximately \$54,000 annually.

13. There are no additional costs to the respondents.

14. Cost to the Federal Government.

| Information Collection | Total Annual Responses | Review / Completion by HUD Staff | Hours per Response | Total Annual Hours | Cost per Hour | Total Annual Cost |
|--|------------------------|----------------------------------|--------------------|--------------------|---------------|-------------------|
| Request for designation of a specific geographic area as a revitalization area | 12 | 12 | 3 | 36 | \$26 | \$ 432 |
| Annual review of designated areas (by 4 HOC offices) | 4 | 4 | 8 | 32 | \$26 | \$ 832 |
| Grand Totals | 12 | 12 | 3 | 36 | \$26 | \$1,264 |

HUD staff costs are based on GS-12-1, \$54,221 annually or approximately \$26 per hour.

15. This is a new collection, due to the increased popularity of the GNND and Dollar Home Sales Programs. The information is submitted voluntarily.
16. The information is not published.
17. A request not to display the expiration date is not being made.
18. There are no exceptions to the certification statement.

B. Collections of Information Employing Statistical Methods

Information is not collected employing statistical methods.