

PAPERWORK REDUCTION ACT SUBMISSION WORKSHEET  
Part II: Information Collection Detail

**This template is intended for staff without an ICRAS account. Please fill out and submit to the appropriate Operating Division to enter into ICRAS. The form mirrors the screens available in the ICRAS 4 system. To request an account to log into ICRAS.**

**Instructions for filling out the form are available at [www.paperworkreduction.gov](http://www.paperworkreduction.gov).**

1. Title: Information Comparison with Insurance Data		
2. Is this a Common Form?  <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No	3. Obligation to respond ( <i>check one</i> )  a. <input checked="" type="checkbox"/> Voluntary  b. <input type="checkbox"/> Required to obtain or retain benefits  c. <input type="checkbox"/> Mandatory	4. Frequency of reporting ( <i>check all that apply</i> )  a. <input type="checkbox"/> Hourly (24 -7) b. <input type="checkbox"/> Hourly Bus (40 per week) c. <input type="checkbox"/> Daily (7 per week) d. <input type="checkbox"/> Daily Bus (5 per week) e. <input type="checkbox"/> Weekly (52 per year) f. <input type="checkbox"/> Monthly g. <input checked="" type="checkbox"/> Yearly h. <input type="checkbox"/> Every Decade i. <input type="checkbox"/> Quarterly j. <input type="checkbox"/> Semi-annually k. <input type="checkbox"/> Biennially l. <input type="checkbox"/> Once m. <input type="checkbox"/> occasionally
5. CFR Citation(s) for the information collection under review (if applicable).  Title _____ Part _____ Section _____ Title _____ Part _____ Section _____ Title _____ Part _____ Section _____ Title _____ Part _____ Section _____		
6. Information Collection Instruments - Send all instruments along with the Part 2 form(s). If more than one Part 2 is completed make sure to identify which instruments are associated with which Part 2 form. <b>Components of an Insurance Match Agreement</b>		
7. Federal Enterprise Architecture Business Reference Model (Select one Services for Citizens Line of Business and one Subfunction from its group)		
Services for Citizens Line of Business None	Subfunction	
Community and Social Services <input checked="" type="checkbox"/>	Homeownership Promotion _____ Community and Regional Development _____ Social Services <input checked="" type="checkbox"/> Postal Service _____ None _____	
Correctional Activities _____	Criminal Incarceration Criminal Rehabilitation	

	<b>None</b>
Defense and National Security__	<b>Strategic National and Theater Defense</b> __ <b>Operational Defense</b> __ <b>Tactical Defense</b> __ <b>None</b> __
Disaster Management__	<b>Disaster Monitoring and Predication</b> __ <b>Disaster Preparedness and Planning</b> __ <b>Disaster Repair and Restore</b> __ <b>Emergency Response</b> __ <b>None</b> __
Economic Development__	<b>Business and Industry Development</b> __ <b>Intellectual Property Protection</b> __ <b>Financial Sector Oversight</b> __ <b>Industry Sector Income Stabilization</b> __ <b>None</b> __
Education__	<b>Elementary, Secondary, and Vocational Education</b> __ <b>Higher Education</b> __ <b>Cultural and Historic Preservation</b> __ <b>Cultural and Historic Exhibition</b> __ <b>None</b> __
Energy__	<b>Energy Supply</b> __ <b>Energy Conservation and Preparedness</b> __ <b>Energy Resource Management</b> __ <b>Energy Production</b> __ <b>None</b> __
Environmental Management__	<b>Environmental Monitoring and Forecasting</b> __ <b>Environmental Remediation</b> __ <b>Pollution Prevention and Control</b> __ <b>None</b> __
General Science and Innovation__	<b>Scientific and Technological Research and Innovation</b> __ <b>Space Exploration and Innovation</b> __ <b>None</b> __
Health__	<b>Illness Prevention</b> __ <b>Immunization Management</b> __ <b>Public Health Monitoring</b> __ <b>Health Care Services</b> __ <b>Consumer Health and Safety</b> __ <b>None</b> __
Homeland Security__	<b>Border and Transportation Security</b> __ <b>Key Asset and Critical Infrastructure Protection</b> __ <b>Catastrophic Defense</b> __ <b>None</b> __
Income Security__	<b>General Retirement and Disability</b> __ <b>Unemployment Compensation</b> __ <b>Housing Assistance</b> __ <b>Food and Nutrition Assistance</b> __ <b>Survivor Compensation</b> __ <b>None</b> __
Intelligence Operations__	<b>Intelligence Planning and Direction/Needs</b> __ <b>Intelligence Collection</b> __ <b>Intelligence Analysis and Production</b> __ <b>Dissemination</b> __ <b>None</b> __
International Affairs and Commerce__	<b>Foreign Affairs</b> __ <b>International Development and Humanitarian Aid</b> __ <b>Global Trade</b> __ <b>None</b> __
Law Enforcement__	<b>Criminal Apprehension</b> __ <b>Criminal Investigation and Surveillance</b> __ <b>Citizen Protection</b> __ <b>Crime Prevention</b> __ <b>Leadership Protection</b> __ <b>Property Protection</b> __ <b>Substance Control</b> __ <b>None</b> __
Litigation and Judicial Activities__	<b>Judicial Hearing</b> __ <b>Legal Defense</b> __

	<b>Legal Investigation</b> ___ <b>Legal Prosecution and Litigation</b> ___ <b>Resolution Facilitation</b> ___ <b>None</b> ___
Natural Resources ___	<b>Water Resource Management</b> ___ <b>Conservation, Marine and Land Management</b> ___ <b>Recreational Resource Management and Tourism</b> ___ <b>Agricultural Innovation and Services</b> ___ <b>None</b> ___
Transportation ___	<b>Air Transportation</b> ___ <b>Ground Transportation</b> ___ <b>Water Transportation</b> ___ <b>Space Operations</b> ___ <b>None</b> ___
Workforce Management ___	<b>Training and Employment</b> ___ <b>Labor Rights Management</b> ___ <b>Worker Safety</b> ___ <b>None</b> ___

See <http://www.feapmo.gov> for the Business Reference Model categories and definitions.

8. Privacy Act System of Records (if applicable)

Title: \_\_\_\_\_

Federal Register Citation: Volume \_\_\_\_\_ Page number \_\_\_\_\_ Publication date \_\_\_\_/\_\_\_\_/\_\_\_\_

9. Respondents

- a. Total # 15
- b. Small Entity # \_\_\_\_\_
- c. Percent Electronic 0%

- Affected public (choose one)
- a. \_\_\_ Individuals or households
  - b. \_\_\_ Private Sector
  - c. \_\_\_ State, Local, or Tribal Governments
  - d. \_\_\_ Federal Government
- (if Private Sector check all that apply)
- a. \_\_\_ Business or other for-profits
  - b. \_\_\_ Not-for-profit institutions
  - c. \_\_\_ Farms

10. Frequency: How often on average will each respondent respond to the Information Collection?

- Number of Responses per Respondent 1  
Per (select the most appropriate time period for this collection)
- a. \_\_\_ Hour (24-7) - 8736 per year
  - b. \_\_\_ Business Hour (40 per week) - 2080 per year
  - c. \_\_\_ Day (7 per week) - 364 per year
  - d. \_\_\_ Business Day (5 per week) - 260 per year
  - e. \_\_\_ Week - 52 per year
  - f. \_\_\_ Month - 12 per year
  - g.  Year
  - h. \_\_\_ Decade .1 per year
  - i. \_\_\_ Quarter - 4 per year
  - j. \_\_\_ Half-Year - 2 per year
  - k. \_\_\_ Biennial - 0.5 per year

Calculated: Annual Frequency = 1 times a year (per respondent)

Calculated: Annual Number Of Responses = 15 a year

11. Hour and Cost Burden

Enter the hours and cost (per response) broken out by reporting, record keeping, and third-party disclosure.

	Time per Response	Hour per response	Annual Hour Burden	Cost per Response	Annual cost Burden
Reporting	.5	.5	8	0	0
Record keeping					
Third party disclosure					
Total	.5	.5	7.5	0	0

12. Allocate the change in burden

	Total Requested	Change Due to New Statute	Change Due to Agency Discretion	Due to Agency Estimate	Change Due Violation	Currently Approved
a. Annual Responses	15					
b. Annual Hour Burden	8 hours	hours	hours	hours	hours	hours
c. Annual Cost Burden	\$ 0	\$	\$	\$	\$	\$