

# REQUEST FOR FY2008 REAPPROVAL OF INFORMATION COLLECTION ACTIVITY

March 31, 2007

EPA REGION 2

COMPLIANCE ASSISTANCE SECTION

Patrick Harvey, Branch Chief, 212-637-3267

Linda Longo, Compliance Assistance Coordinator, 212-637-3565

## I. Background

Under The Government Performance and Results Act (GPRA), the region is required to report to the Office of Compliance (OC) on outcome measurements achieved from direct compliance assistance provided to regulated entities. Beginning in Fiscal Year 2006, the Region must report the percent of regulated entities that (1) increased understanding, (2) changed environmental management practices, and (3) reduced, treated or eliminated pollution as a result of EPA assistance.

The region collects compliance assistance outcome data from many programs and numerous sector initiatives. Therefore, this survey will be used by regional staff contacting sector recipients from various media and programs. The affected audience for this Information Collection Request (ICR) includes members of the regulated community and, to a lesser extent, state and local regulators and compliance assistance providers that receive EPA compliance assistance tools or services. We estimate reaching out to approximately 15,000 recipients through Fiscal Year 2008.

## II. Survey Purpose and Description

We propose to use the same survey which was approved for the FY07 reporting period for Region 2 which expires on March 31, 2008 (OMB Control # 2020-0015). The same survey was also translated into Spanish with OMB approval in February 2007 and was submitted to OMB. We will use the Spanish version for our Puerto Rico recipients.

Measurement will be collected from facility visits, facility re-visits, on-going facility specific work, response to inquiry, workshops, training courses, and presentations. Regulated entities receiving this direct assistance will be contacted several months after the event to review if knowledge of environmental requirements and best management practices was increased and acted on.

The proposed survey below does not involve fact-finding for the purposes of regulatory development or enforcement. The burden estimate in section IV below takes this into account.

## U.S. Environmental Protection Agency Region 2 Compliance Assistance Survey

**Fiscal Year 2008**

**Please check all boxes that apply. Thank you.**

1. What regulatory actions as a result of the compliance assistance activity:

<b>Did you take</b>	<b>Do you intend to take</b>
<input type="checkbox"/> File a notification <input type="checkbox"/> Obtain a permit or certification <input type="checkbox"/> Provide data to EPA, state, or local regulator <input type="checkbox"/> Submit reports to EPA, state, or local regulator <input type="checkbox"/> Comply with an environmental requirement <input type="checkbox"/> No regulatory actions will be taken Other, specify: _____	<input type="checkbox"/> File a notification <input type="checkbox"/> Obtain a permit or certification <input type="checkbox"/> Provide data to EPA, state, or local regulator <input type="checkbox"/> Submit reports to EPA, state, or local regulator <input type="checkbox"/> Comply with an environmental requirement <input type="checkbox"/> No regulatory actions will be taken Other, specify: _____

2. What process changes at your facility as a result of the compliance assistance activity:

<b>Did you make</b>	<b>Do you intend to make</b>
<input type="checkbox"/> Change the storage or handling of a waste or emission <input type="checkbox"/> Change a process or practice <input type="checkbox"/> Purchase new process equipment <input type="checkbox"/> Implement material or waste recycling system <input type="checkbox"/> Install pollution control equipment (e.g., scrubbers, control technique) <input type="checkbox"/> Install a waste treatment system <input type="checkbox"/> Switch to renewable energy <input type="checkbox"/> No process changes will be taken Other, specify: _____	<input type="checkbox"/> Change the storage or handling of a waste or emission <input type="checkbox"/> Change a process or practice <input type="checkbox"/> Purchase new process equipment <input type="checkbox"/> Implement material or waste recycling system <input type="checkbox"/> Install pollution control equipment (e.g., scrubbers, control technique) <input type="checkbox"/> Install a waste treatment system <input type="checkbox"/> Switch to renewable energy <input type="checkbox"/> No process changes will be taken Other, specify: _____

3. What management changes at your facility as a result of the compliance assistance activity:

<b>Did you take</b>	<b>Do you intend to take</b>
<input type="checkbox"/> Conduct a self audit <input type="checkbox"/> Institute an environmental management policy, system or procedure <input type="checkbox"/> Institute training or other communication to improve awareness and/or practices <input type="checkbox"/> Identify pollution prevention opportunity	<input type="checkbox"/> Conduct a self audit <input type="checkbox"/> Institute an environmental management policy, system or procedure <input type="checkbox"/> Institute training or other communication to improve awareness and/or practices <input type="checkbox"/> Identify pollution prevention opportunity

<input type="checkbox"/> No management action will be taken Other, specify:_____	<input type="checkbox"/> No management action will be taken Other, specify:_____
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4. Who (if anyone) have you contacted for further assistance as a result of the compliance assistance activity:

<b>Who have you contacted</b>	<b>Who do you intend to contact</b>
<input type="checkbox"/> A vendor	<input type="checkbox"/> A vendor
<input type="checkbox"/> A state or local regulatory agency	<input type="checkbox"/> A state or local regulatory agency
<input type="checkbox"/> A non-regulatory local source for additional compliance assistance	<input type="checkbox"/> A non-regulatory local source for additional compliance assistance
<input type="checkbox"/> No contacts will be made	<input type="checkbox"/> No contacts will be made
<input type="checkbox"/> Other, specify:_____	<input type="checkbox"/> Other, specify:_____

5. Please identify any reductions or the elimination of a pollutant(s) that resulted, or will result, from the actions taken as a result of the compliance assistance activity.

<b>Resulted</b>	<b>Will result</b>
<input type="checkbox"/> Reduced or eliminated waste (solid/hazardous)	<input type="checkbox"/> Reduced or eliminated waste (solid/hazardous)
<input type="checkbox"/> Reduced or eliminated air emissions (air, fugitive)	<input type="checkbox"/> Reduced or eliminated air emissions (air, fugitive)
<input type="checkbox"/> Reduced or eliminated pollution emissions (e.g. wastewater)	<input type="checkbox"/> Reduced or eliminated pollution emissions (e.g. wastewater)
<input type="checkbox"/> None	<input type="checkbox"/> None
<input type="checkbox"/> Don't know	<input type="checkbox"/> Don't know
Other, specify:_____	Other, specify:_____

OMB Control # 2020-0015

6. Have you realized, or expect to realize, a cost savings from actions taken as a result of the compliance assistance activity.

- Yes  
 No

The contact information below is OPTIONAL. We will contact you if we need clarification on the survey. Your contact information will not be included in any aggregated reports.

Respondent Name: \_\_\_\_\_

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Thank you very much for your time and support in helping us better serve environmental assistance to the regulated community.

Questions on the survey, please contact Linda Longo, 212-637-3565, [longo.linda@epa.gov](mailto:longo.linda@epa.gov)

**Thank you for your input!**

Patrick Harvey, Branch Chief  
Compliance Assistance & Program Support Branch  
Division of Enforcement and Compliance Assistance, Region 2

Public reporting burden for this collection is estimated to average 10 minutes per response, including time for reviewing instructions, gathering information, and completing and reviewing the information. Send comments on the Agency's need for this information, the accuracy of the provided burden estimate, and any suggestions for reducing the burden, including the use of automated collection techniques, to the Director, Office of Environmental Information, Collection Strategies Division, United States Environmental Protection Agency (mail Code 2822), 1200 Pennsylvania Ave, NW Washington, D.C. 20460; and to the Office of Information & Regulatory Affairs, Office of Management & Budget, 725 17<sup>th</sup> Street, NW, Washington D.C. 20503, Attention: Desk Officer for EPA. Include the EPA ICR 1860.03 and the OMB control number 2020-0015 in any correspondence. Approval expires 9-30-08 Do not send completed survey to the Washington, D.C address.

**Send completed surveys to the following address:**

**Linda Longo  
Environmental Assistance Coordinator  
U.S. Environmental Protection Agency, Region 2  
290 Broadway, 21<sup>st</sup> floor  
New York, NY 10007**

III. Survey Methodology and Use of Results

The region will normally notify the regulated entity at the time of compliance assistance delivery that EPA plans to follow up with them to assess the quality of the assistance. At this time regional staff will indicate the assessment method to be used (e.g., phone, letter, email). The method of survey delivery will primarily be through mailed surveys or phone conversations conducted several months after the direct assistance to determine if actual changes were made.

Results will be recorded in the Compliance Assistance Module of the Integrated Compliance Information System (ICIS) and reported to regional managers for certification to Office of Compliance at mid-year and end-of-year.

The use of these results will be accompanied by the following qualifying language:

"These performance measures are not calculated from a representative sample of the regulated entity universe. The percentages are based on the number of regulated entities that answer affirmatively to these questions on our voluntary surveys. The percentages do not account for the number of regulated entities who chose not to answer these questions or the majority of entities who chose not to answer the survey."

IV. Respondents Burden

To minimize the respondent burden, the simple and clear six (6) generic survey questions approved by Office of Management and Budget (OMB) will be used.

- a) How many respondents do you anticipate will respond to the survey?  
**15,000**
- b) How long will it take to complete the survey?  
**10 minutes**
- c) Calculate the cost per hour for the respondent. The ICR calculates \$68.63/hour

Total Burden Hours:  
 **$15,000 \times 10 \text{ min.} / 60 \text{ min.} = 2,500 \text{ hours over a three year period}$**   
 **$2,500 / 3 = 833 \text{ hours for one year}$**

Total Respondents Cost:  
 **$2,500 \times \$68.63 = \$171,575 \text{ over a three year period}$**   
 **$\$171,575 / 3 = \$57,192 \text{ for one year}$**

V. Agency Burden

Time it will take staff to review the responses and conduct analysis. The ICR calculates \$41.25/hour.

Total Agency Burden (EPA staff time in hours multiplied by cost per hour):  
 **$2,500 \text{ hours} \times \$41.25 = \$103,125 \text{ over a three year period}$**   
 **$\$103,125 / 3 = \$34,375 \text{ for one year}$**