

**Request for Approval under the "Generic Clearance for the Collection of  
Routine Customer Feedback" (OMB Control Number: 2132-0572)**

**TITLE OF INFORMATION COLLECTION:** Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery

**PURPOSE:** FTA's public website is the face of the agency and one of the most important communication tools. The survey will be conducted to capture customer satisfaction with FTA's response and timeliness to visitors' questions submitted via the Contact Us Tool application. The information collected from the survey will assist FTA in assessing customer needs, determining how well the agency is responding to those needs, and taking steps to improve service, if needed.

**DESCRIPTION OF RESPONDENTS:** FTA's Contact Us Tool Customer Satisfaction Survey will be completed by individuals who use FTA's public website. Their responses will be used to measure customer service and satisfaction.

**TYPE OF COLLECTION:** (Check one)

- |  |  |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group                  |
| <input type="checkbox"/> Focus Group                                   | <input type="checkbox"/> Other: _____                            |

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name:                     *Christell Fawcett*                    

To assist review, please provide answers to the following question:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes [X] No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No
3. If Applicable, has a System or Records Notice been published? [ ] Yes [ ] No

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?  Yes  No

**BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time	Burden
Private Sector	300	.08	24
<b>Totals</b>	300	.08	24

**FEDERAL COST:** The estimated annual cost to the Federal government is \$500,00.

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents**

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?  
 Yes  No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)
  - Web-based or other forms of Social Media
  - Telephone
  - In-person
  - Mail
  - Other, Explain
2. Will interviewers or facilitators be used?  Yes  No

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**