

**Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 1652-0058)**

**TITLE OF INFORMATION COLLECTION:** *Customer Service Feedback for the Transportation Security Administration's Air Cargo Security Program.*

**PURPOSE:** *The Transportation Security Administration (TSA) will conduct this survey in order to receive feedback from users regarding their experience working with Air Cargo Management Systems and identifying and prioritizing ongoing improvements opportunities.*

**DESCRIPTION OF RESPONDENTS:** *The respondents are external (industry) Air Cargo System users such as Indirect Air Carriers (IACs), Air Carriers (ACs), Certified Cargo Screening Program (CCSP) Shippers, and Independent Cargo Screening Facilities (ICSFs).*

**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 (such as 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: Robert E. Moore *Robert E. Moore 11/24/2014*

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

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected?  Yes  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 (such as money or reimbursement of expenses, token of appreciation) provided to participants?  Yes  No

**BURDEN HOURS**

| Category of Respondent              | No. of Respondents | Participation Time | Burden   |
|-------------------------------------|--------------------|--------------------|----------|
| State, Local, or tribal governments | 150                | 10 min             | 25 hours |
| <b>Totals</b>                       | 150                |                    | 25 hours |

**FEDERAL COST:** The estimated annual cost to the Federal government is: **\$364.50**

| TSA Position and Grade                                | Average Hourly Loaded Rate of Pay | Estimated Number of Hours | Estimated Number of Annual Reviews | Estimated Annual Cost to the Federal Government |
|---|-----------------------------------|---------------------------|------------------------------------|---|
| Program Manager/<br>K-Band                            | 64.21                             | 1                         | 1                                  | 64.21   |
| Contractor/<br>Project Manager                        | 42.61                             | 1                         | 1                                  | 42.61   |
| Contractor/<br>Analyst                                | 32.21                             | 8                         | 1                                  | 257.68  |
| Total Estimated Annual Cost to the Federal Government |                                   |                           |                                    | <b>364.50</b>                                   |

**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**

- 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?

*For purposes of this collection, the universe of potential respondents is limited to the regulated entities under 49 CFR Part 1542, which are known to TSA. The survey will be posted on the TSA web board and/or individual system alerts as an opportunity for stakeholders to provide optional feedback. Regulated stakeholders regularly and routinely check the web board for new information/guidance from TSA and view the alerts page when logging into the systems for use. TSA anticipates using an online survey tool that will ensure the results are processed and stratified in an effective and efficient manner. TSA anticipates conducting the survey annually.*

**Administration of the Instrument**

- 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.**