

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.

<p>1. Agency/Subagency Originating Request: U.S. Department of Housing and Urban Development Office of Public and Indian Housing</p>	<p>2. OMB Control Number: a. 2577-0266 b. <input type="checkbox"/> None</p>																																		
<p>3. Type of information collection: (check one)</p> <p>a. <input type="checkbox"/> New Collection</p> <p>b. <input type="checkbox"/> Revision of a currently approved collection</p> <p>c. <input type="checkbox"/> Extension of a currently approved collection</p> <p>d. <input type="checkbox"/> Reinstatement, without change, of previously approved collection for which approval has expired</p> <p>e. <input checked="" type="checkbox"/> Reinstatement, with change, of previously approved collection for which approval has expired</p> <p>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</p> <p>b. <input type="checkbox"/> Emergency - Approval requested by</p> <p>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: Enterprise Income Verification (EIV) System - Debts Owed to PHAs and Terminations</p>																																			
<p>8. Agency form number(s): (if applicable) HUD-52675</p>																																			
<p>9. Keywords: Housing, Debts Owed to PHAs, Terminations, Public Housing, Section 8, Enterprise Income Verification (EIV) System</p>																																			
<p>10. Abstract: This information collection is required to identify families who no longer participate in a HUD rental assistance program due to adverse termination of tenancy and/or assistance, and owe a debt to a Public Housing Agency (PHA). The information is used by PHAs to determine a family's suitability for rental assistance, and avoid providing limited Federal housing assistance to families who have previously demonstrated an inability to comply with HUD program requirements or who have an unpaid debt to a PHA.</p>																																			
<p>11. Affected public: (mark primary with "P" and all others that apply with "X")</p> <p>a. <input checked="" type="checkbox"/> Individuals or households e. Farms</p> <p>b. Business or other for-profit f. Federal Government</p> <p>c. 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. Voluntary</p> <p>b. <input checked="" type="checkbox"/> Required to obtain or retain benefits</p> <p>c. Mandatory</p>																																		
<p>13. Annual reporting and recordkeeping hour burden:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. Number of respondents</td> <td style="text-align: right;">3,974</td> </tr> <tr> <td>b. Total annual responses</td> <td style="text-align: right;">47,688</td> </tr> <tr> <td> Percentage of these responses collected electronically</td> <td style="text-align: right;">100%</td> </tr> <tr> <td>c. Total annual hours requested</td> <td style="text-align: right;">23,268</td> </tr> <tr> <td>d. Current OMB inventory</td> <td style="text-align: right;">29,688</td> </tr> <tr> <td>e. Difference (+,-)</td> <td style="text-align: right;">-6,420</td> </tr> <tr> <td>f. Explanation of difference:</td> <td></td> </tr> <tr> <td> 1. Program change:</td> <td style="text-align: right;">0</td> </tr> <tr> <td> 2. Adjustment:</td> <td style="text-align: right;">0</td> </tr> </table>	a. Number of respondents	3,974	b. Total annual responses	47,688	Percentage of these responses collected electronically	100%	c. Total annual hours requested	23,268	d. Current OMB inventory	29,688	e. Difference (+,-)	-6,420	f. Explanation of difference:		1. Program change:	0	2. Adjustment:	0	<p>14. Annual reporting and recordkeeping cost burden: (in thousands of dollars) Do not include costs based on the hours in item 13.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">a. Total annualized capital/startup costs</td> <td style="text-align: right;">0</td> </tr> <tr> <td>b. Total annual costs (O&M)</td> <td style="text-align: right;">0</td> </tr> <tr> <td>c. Total annualized cost requested</td> <td style="text-align: right;">0</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;">0</td> </tr> <tr> <td>f. Explanation of difference:</td> <td></td> </tr> <tr> <td> 1. Program change:</td> <td style="text-align: right;">0</td> </tr> <tr> <td> 2. Adjustment:</td> <td style="text-align: right;">0</td> </tr> </table>	a. Total annualized capital/startup costs	0	b. Total annual costs (O&M)	0	c. Total annualized cost requested	0	d. Current OMB inventory	0	e. Difference	0	f. Explanation of difference:		1. Program change:	0	2. Adjustment:	0
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<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. Program planning or management</p> <p>b. Program evaluation f. Research</p> <p>c. General purpose statistics g. Regulatory or compliance</p> <p>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</p> <p>c. <input checked="" type="checkbox"/> Reporting:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">1. <input type="checkbox"/> On occasion</td> <td style="width: 33%;">2. <input type="checkbox"/> Weekly</td> <td style="width: 33%;">3. <input checked="" type="checkbox"/> Monthly</td> </tr> <tr> <td>4. <input type="checkbox"/> Quarterly</td> <td>5. <input type="checkbox"/> Semi-annually</td> <td>6. <input type="checkbox"/> Annually</td> </tr> <tr> <td>7. <input type="checkbox"/> Biennially</td> <td colspan="2">8. <input type="checkbox"/> Other (describe)</td> </tr> </table>	1. <input type="checkbox"/> On occasion	2. <input type="checkbox"/> Weekly	3. <input checked="" 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 type="checkbox"/> Other (describe)																										
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<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: Victoria Alston Phone: (202) 475-7993</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). appear 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.

N/A

Signature of Program Official: X Delton Nichols, Deputy Director Office of Public and Indian Housing, Real Estate Assessment Center	Date:
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Signature of Senior Officer or Designee: X Colette Pollard, Departmental Reports Management Officer, Office of the Chief Information Officer	Date:
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Supporting Statement for Paperwork Reduction Act Submissions

A. Justification

1. Explain the circumstances that make the collection of information necessary. Identify any legal or administrative requirements that necessitate the collection. Attach a copy of the appropriate section of each statute and regulation mandating or authorizing the collection of information.

Public housing agencies (PHAs) administering federal assisted housing programs (i.e., public housing, Section 8 Housing Choice Voucher and Moderate Rehabilitation programs) using federal funds are required to solicit demographic, family profile, income and housing information on the entire nationwide population of tenants residing in assisted housing. With this information the programs can be monitored and evaluated as required under the following:

- The United States Housing Act of 1937 (42 U.S.C 1437 et seq.)
- Housing and Community Development Act of 1987 (42 U.S.C. 3543(a) – authorizes PHAs to collect social security data)
- Title VI of the Civil Rights Act of 1964 (42 U. S. C. 2000d)
- The Fair Housing Act (42 U. S. C. 3601-19)
- Quality Housing and Work Responsibility Act of 1998 (Public Law 105-276 Title V)
- HUD Appropriations Act of 1996 (Public Law 104-134 Section 204)
- “Electronic Transmission of Required Family Data for Public Housing, Indian Housing, and the Section 8 Rental Certificate, Rental Voucher, and Moderate Rehabilitation Programs” (24 CFR Part 908)
- 24 CFR Part 5 (5.210 through 5.240)

In addition, pursuant to 24 CFR 5.233 (See Exhibit A), these PHAs are required to use HUD’s Enterprise Income Verification (EIV) system to verify employment and income information of program participants and to reduce administrative and subsidy payment errors. PHAs also use the information in the Debts Owed module, which identifies families who no longer participate in assisted housing programs due to adverse termination of tenancy and/or assistance, and owe a debt to a PHA, in determining eligibility for assistance and continued program participation pursuant to 24 CFR 982.552 and 960.203.

2. Indicate how, by whom, and for what purpose the information is to be used. Except for a new collection, indicate the actual use the agency has made of the information received from the current collection.

The EIV Debts Owed module is a national repository of families that owe a debt to a PHA and/or have been terminated from a federally assisted housing program. Only PHA authorized EIV users access the information in the module when determining a family’s suitability for rental assistance. PHAs, in accordance with their policies, may deny Federal housing assistance to families who either: 1) owe a debt to a PHA; or 2) have previously been unable to comply with HUD program requirements.

At the end of a family’s participation in a Federal housing assistance program (EOP), PHAs enter the following information in the Debts Owed module, as applicable:

1. Amount of debt owed by the former tenant to a PHA;

2. Indication of executed repayment agreement;
3. Indication of bankruptcy filing;
4. The reason for an adverse termination of the family from a Federally assisted housing program.

The Debts Owed module is the only means by which PHAs can report this information.

3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses, and the basis for the decision for adopting this means of collection. Also describe any consideration of using information technology to reduce burden.

This information is collected electronically from PHAs via HUD's EIV system. The PHA logs into the EIV system and accesses the Debts Owed to PHAs & Termination module and identifies the family and enters any amount owed, checks a checkbox if the PHA has entered into a repayment agreement for the outstanding debt, checks a checkbox if the PHA has been notified of a bankruptcy filing, and if applicable, select a reason, from a pre-populated list, for adverse termination from Federally assisted housing. Once the PHA has entered or selected the applicable information, the PHA clicks on the submit button and then confirms submission by clicking on the OK button.

4. Describe efforts to identify duplication. Show specifically why any similar information already available cannot be used or modified for use for the purposes described in Item 2 above.

There is no similar information collected or available under previous collections of information. As such, there is no duplication.

5. If the collection of information impacts small businesses or other small entities (Item 5 of OMB Form 83-I), describe any methods used to minimize burden.

The information being collected has not significant impact on small businesses.

6. Describe the consequence to Federal program or policy activities if the collection is not conducted or is conducted less frequently, as well as any technical or legal obstacles to reducing burden.

If this information is not collected, the Department is at risk of paying limited Federal dollars on behalf of families who should not be eligible to receive such assistance. Furthermore, if this information is not collected, the public will perceive that there are no consequences for a family's failure to comply with HUD program requirements.

7. Explain any special circumstances that would cause an information collection to be conducted in a manner:

*** Requiring respondents to report information to the agency more often than quarterly;**

None – at a minimum, the respondent would have to report information within 15 months of the date the family moved out of Federally assisted housing.

*** Requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it;**

None

*** Requiring respondents to submit more than an original and two copies of any document;**

None

*** Requiring respondents to retain records, other than health, medical, government contract, grant-in-aid, or tax records, for more than three years;**

None

*** In connection with a statistical survey, that is not designed to produce valid and reliable results that can be generalized to the universe of study;**

None

*** Requiring the use of a statistical data classification that has not been reviewed and approved by OMB;**

None

***That includes a pledge of confidentiality that is not supported by authority established in statute or regulation, that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use; or**

A pledge of confidentiality is supported by the statutory authority established at 42 USC 1437d(q)(5) .

*** Requiring respondents to submit proprietary trade secrets, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.**

None

8. If applicable, provide a copy and identify the date and page number of publication in the Federal Register of the agency's notice, required by 5 CFR 1320.8(d), soliciting comments on the information collection prior to submission to OMB. Summarize public comments received in response to that notice and describe actions taken by the agency in response to these comments.

The Notice of Proposed Information Collection was published in the Federal Register on March 3, 2013, at 78 FR 14106 (See Exhibit C). The public was given until May 3, 2013, to comment. HUD received no comments.

9. Explain any decision to provide any payment or gift to respondents, other than remuneration of contractors or grantees.

No payment or gifts are provided to respondents.

10. Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statute, regulation, or agency policy.

Section 3544 of the Housing and Community Development Act of 1987 requires the confidential treatment of personally identifiable information (PII), subject to civil and criminal penalties, as do HUD regulations at 24 CFR part 5. The form HUD 50058, Family Report (OMB approval number 2577-0083, expiring 9/30/2013), on which families provide the confidential information that respondents may use when entering data in the EIV Debts Owed module, includes a Privacy Act statement advising the family that the information on the form (PII) is confidential and protected by the Privacy Act of 1974 (5 USC 552a). The Privacy Act statement also informs the family that the collection is mandatory and the information requested is required to obtain and retain benefits pursuant to 24 CFR part 5 subpart B.

11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private. This justification should include the reasons why the agency considers the questions necessary, the specific uses to be made of the information, the explanation to be given to persons from whom the information is requested, and any steps to be taken to obtain their consent.

The PII may be used by the PHA respondent to identify the former program participant when the PHA is recording a debt owed by that person to that PHA or the applicable termination information. The debt owed and termination information in this module is then used by other PHAs when determining program eligibility.

12. Provide estimates of the hour burden of the collection of information. The statement should:

*** Indicate the number of respondents, frequency of response, annual hour burden, and an explanation of how the burden was estimated. Unless directed to do so, agencies should not conduct special surveys to obtain information on which to base hour burden estimates. Consultation with a sample (fewer than 10) of potential respondents is desirable. If the hour burden on respondents is expected to vary widely because of differences in activity, size, or complexity, show the range of estimated hour burden, and explain the reasons for the variance. Generally, estimates should not include burden hours for customary and usual business practices.**

Estimate of the Hour Burden of the Collection of Information	
Number of respondents	3974
Frequency of Response	Monthly
Annual Hour Burden	23,268
Estimated Annual Cost to Respondents	\$461,424

Families end participation in HUD rental assistance programs each month. As a part of the PHA’s monthly occupancy processes, PHAs enter, as applicable, debts owned and termination information in the EIV Debts Owed Module, as described in Question 1 above.

The total number of annual responses was determined as follows:

Number of Respondents	X	Frequency of Responses	=	Annual Number of
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		(Monthly)		Responses
3974*		12		47,688

*The number of respondents is from the list of active PHAs in HUD's Public and Indian Housing Information Center (PIC) system.

The annual burden hours were determined as follows:

1. The number of families that ended participation in all PIH programs from February 1, 2012 through January 31, 2013, which equals 279,334. This number was derived from the PIC EOP information as of January 31, 2013.
2. The amount of time for the PHA to retrieve information from tenant file, access EIV system, and enter information into EIV, which equals 0.0833 hours (or 5 minutes per family).
3. The product of items 1 and 2, above, which equals 23,268 hours.

The estimated annual cost to respondents is determined by multiplying the annual hour burden by \$19.83 per hour, which is the 2011, median rate of pay for community and social service occupations, according to the Department of Labor's Bureau of Labor Statistics. By multiplying the annual hour burden rate of \$19.83 and annual hour burden of 23,269, the estimated annual cost to respondents is determined to be **\$461,424**.

The number of families a PHA reports depends on the PHA's size (i.e. the number of families assisted). The national average of families that end participation in a PIH program is 10% of the number of families the PHA assists. Smaller PHAs report fewer families than larger PHAs. As such the variation of estimated burden hours and annual costs to respondents for PHAs based on their size and applying the 10% national end of participation (EOP) rate is:

Number of Families	PHA Size	Number of PHAs Reporting	Average Number of EOP Families Per PHA (Annually)	Average Annual Hour Burden Per PHA	Estimated Annual Cost Per PHA Respondent	Estimated Annual Cost for PHA Respondents
1 - 49	Very Small	739	3	0.25	\$ 4.96	\$ 3,665.44
50 – 249	Small	1,522	10	0.83	\$ 16.46	\$ 25,052.12
250 – 499	Medium-Low	614	13	1.08	\$ 21.42	\$ 13,151.88
500 – 1,249	Medium-High	586	38	3.16	\$ 62.66	\$ 36,718.76
1,250 – 9,999	Large	462	438	36.48	\$ 723.40	\$334,210.80
10,000+	Extra Large	51	1,000+	83.3+	\$1,651.84	\$ 84,243.84

13. Provide an estimate for the total annual cost burden to respondents or record keepers resulting from the collection of information. (Do not include the cost of any hour burden shown in Items 12 and 14).

Notwithstanding HUD's request to collect this information, PHAs already collect and maintain this information. As such, there is no annual cost burden to respondents or record keepers resulting from this collection of information.

14. Provide estimates of annualized costs to the Federal government. Also, provide a description of the method used to estimate cost, which should include quantification of hours, operational expenses (such as equipment, overhead, printing, and support staff), and any other expense that would not have been incurred without this collection of information. Agencies may also aggregate cost estimates from Items 12, 13, and 14 in a single table.

There is no additional cost to HUD for the collection of this information.

15. Explain the reasons for any program changes or adjustments reported in Items 13 or 14 of the OMB Form 83-I.

The number of respondents has decreased.

16. For collections of information whose results will be published, outline plans for tabulation and publication. Address any complex analytical techniques that will be used. Provide the time schedule for the entire project, including beginning and ending dates of the collection of information, completion of report, publication dates, and other actions.

The information collected by PHAs is not published or made available to the public.

17. If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons that display would be inappropriate.

Not applicable. HUD displays the OMB control number and expiration date with EIV's Debts Owed to PHAs and Terminations module; as well as on electronic and paper documents that pertain to this information collection effort. (See Exhibit D)

18. Explain each exception to the certification statement identified in Item 19, "Certification for Paperwork Reduction Act Submissions," of OMB Form 83-I.

There are no exceptions to the certification statement.

B. Collections of Information Employing Statistical Methods

This collection of information does not employ statistical methods.