

**REQUEST FOR APPROVAL UNDER THE “GENERIC CLEARANCE FOR THE
COLLECTION OF ROUTINE CUSTOMER FEEDBACK”
OMB CONTROL NUMBER: 0690-0030**

TITLE OF INFORMATION COLLECTION: “Fishing Around Sea Turtles” Products and Services Survey

PURPOSE: The information gained from this survey will help NOAA Fisheries, Pacific Island Regional Office, Protected Resources Division understand the extent that the “Fishing Around Sea Turtle” stickers are being distributed; assess the viewership of the NOAA Fisheries “Fishing Around Sea Turtles” webpage; and learn how we can improve and potentially expand the “Fishing Around Sea Turtle” products and services.

DESCRIPTION OF RESPONDENTS: All respondents are individuals or other entities who were given “Fishing Around Sea Turtle” stickers to distribute. Fishing gear shop owners that receive the Hawaii Fishing News monthly publication; NOAA Fisheries staff; and NOAA Fisheries partners.

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: _____ Jennifer Metz

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, will any information that is collected be included in records that are subject to the

Privacy Act of 1974? Yes No

3. If Yes, has an up-to-date System of Records Notice (SORN) 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 Hours
2 – Private Sector	29	10 minutes	4 hr, 50 min
3 – State agency	2	10 minutes	20 min
4 – Federal agency	6	10 minutes	1 hr
Totals	37		6 hr, 10 min

FEDERAL COST: The estimated annual cost to the Federal government is: \$17 for postage

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?

NOAA Fisheries will be giving the survey to everyone who has helped to distribute “Fishing Around Sea Turtle” stickers. This sample will include fishing gear shop owners, and NOAA staff and partners. Since the universe of potential respondents is so small, 37 persons, the survey will be given to this entire population.

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

(NOAA Fisheries will be dropping off the surveys in person and asking the respondents to use the addressed stamped envelope that is included with the survey packet to return completed surveys to our office.)

2. Will interviewers or facilitators be used? [] Yes [x] No

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