

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0581-0269)

TITLE OF INFORMATION COLLECTION:

2016 COOL Survey

PURPOSE:

Country of Origin Labeling (COOL) requires retailers to notify their customers of the country of origin and method of production of covered commodities. The law allows for COOL to enter into partnership with states to conduct enforcement and assist in the administration of the requirements. These roles include State Manager who serves as the primary contact, State Reviewers who are trained to conduct new and follow up retail review surveillance, and Invoice Representatives who accounts for store reviews completed for and subsequent payments owed by the COOL Division.

COOL will conduct a survey to all State Cooperators to determine customer satisfaction with service, communication, training, and invoicing requirements. The responses will be used to improve services provided by COOL Division and assist in the allocation of fiscal funds to better serve our customers. Additionally, the survey will help determine if training methods are effective or should be improved for this current fiscal year.

DESCRIPTION OF RESPONDENTS:

Survey respondents include State Cooperators for which the COOL Division has an active cooperative agreement. The State Cooperators consist of Managers, Reviewers and Invoice Representatives.

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: _____

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 [X] No

Gifts or Payments:

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

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
State Cooperators	329	.5	165
Totals	329		165

FEDERAL COST: The estimated annual cost to the Federal government is \$0.

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?
[X] 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?

Survey respondents include all of the State Cooperators who currently have access to our COOL Functional Analysis for Compliance Trends System (FACTS). COOL FACTS is used to assign, submit, and invoice retail reviews. Respondents will be contacted via email with instructions on how to access and complete the survey using Survey Monkey hyperlink https://www.surveymonkey.com/collect/?collector_id=80048126. They will be given 2 weeks to complete the survey. Attached is a copy of the survey in PDF format.

Administration of the Instrument

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