

**Request for Approval under the
“Generic Clearance for the Collection of Routine Customer Feedback”
OMB Control Number: 1212-0066 (expires 08/31/2017)**

TITLE OF INFORMATION COLLECTION: *Benefit Application Survey.*

PURPOSE: *To learn about participants’ benefit application experience with PBGC. Responses obtained will guide PBGC’s efforts to improve participants’ experiences and satisfaction with PBGC.*

DESCRIPTION OF RESPONDENTS: *Participants who completed PBGC benefit application during period from May through July 2016*

TYPE OF COLLECTIONS:

- | | |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input 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 checked="" type="checkbox"/> Other: email survey |

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 completed PBGC benefit applications.

Name: *Catherine B. Klion*

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

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
<i>Participants who completed benefit applications within three month period (February through April 2015)</i>	250	15 minutes	62.5 hours
Totals	250	15 minutes	62.5 hours

FEDERAL COST: The estimated annual cost to the Federal government is \$5,850 based on the following GS level staff costs:

GS Levels	Step 5 rate	Benefits	Overhead	Total	Hourly Cost (Salary/Benefits/Overhead)	Anticipated Hours of Work for Each GS Level	Total Cost
GS 14	\$121,635	\$32,841	\$14,700	\$169,176	\$81	30	\$2,430
GS 9	\$59,689	\$16,116	\$14,700	\$90,505	\$43	60	\$2,580
GS 4	\$35,213	\$9,508	\$14,700	\$59,421	\$28	30	\$840
Total							\$5,850

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.

PBGC will collect the names and email addresses of all participants who completed benefit applications for PBGC during the 90 day period from May through July 2016. From this population of approximately 7,500 participants, PBGC will randomly select 250 participants who will be contacted by email, and asked to complete a survey of their experience in completing a PBGC benefit application.

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.