# Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: XXXX-YYYY)

TITLE OF INFORMATION COLLECTION: "Qualitative Feedback on U.S. Fire Administration's Analytical Reports" (FEMA Form 519-0-2)

### **PURPOSE:**

The U.S. Fire Administration (USFA) National Fire Data Center (NFDC) collects data from a variety of sources to provide information and analyses on the status and scope of the fire problem in the United States. USFA's NFDC uses these data to compose and disseminate analytical/statistical reports that highlight current and emerging trends in fires, including what causes fires, where they occur, and who is impacted most by fire. USFA's NFDC has developed a feedback form in order to evaluate the usefulness and quality of the analytical/statistical reports. This feedback form will be web-based and made available on-line to readers of our reports via USFA's website (readers will be asked to voluntarily complete the form).

### **DESCRIPTION OF RESPONDENTS:**

TYPE OF COLLECTION: (Check one)

A link to the qualitative feedback form will be found in each of USFA's analytical/statistical reports. On a voluntary basis, readers of the reports will be able to click on a link which will take them to a webpage where they can complete the form. Readers of the reports come from a variety of backgrounds (State, Local or Tribal Government, Individuals or households, Business or other for-profit, Farms, Not-for-profit institutions, or Federal Government) and have many different reasons for the use of data contained in the reports (personal use to public education/safety to fire code enforcement).

[] Usability Testing (e.g., Website or Software	Customer Satisfaction Survey Small Discussion Group Country Other: Qualitative Feedback Form

#### **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 <u>not</u> raise issues of concern to other federal agencies.
- 4. The results are <u>not</u> intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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 <u>:</u>	Meredith L. Lawler		levell	H	7	Tawl	, II
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To assis	t review, please provide	answers to	the following	ng ones	tion.		

<ol> <li>Personally Identifiable Information:</li> <li>Is personally identifiable information (PII) collected? [ ] Yes [X] No</li> <li>If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No</li> <li>If Yes, has an up-to-date System of Records Notice (SORN) been published? [ ] Yes [ ] No</li> </ol>							
Gifts or Payments: Is an incentive (e.g., money or reimbursement of e participants? [ ] Yes [X] No	expenses, token o	f appreciation) pro	ovided to				
BURDEN HOURS			220				
Category of Respondent	No. of Respondents	Participation Time	Burden				
Readers of USFA's analytical/statistical reports	75	7 minutes	8.75 hrs				
Totals	75	7 minutes	9.0 hrs (rounded)				
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 [X] 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?							
On a voluntary basis, any reader of USFA's analytical/statistical reports will have the opportunity to click on a link which will take them to a webpage where they can complete the Qualitative Feedback Form (FEMA form 519-0-2). It is solely up to each reader to determine whether he/she chooses to complete the form.							
Administration of the Instrument  1. How will you collect the information? (Check a [X] Web-based or other forms of Social Me [] Telephone [] In-person [] Mail [] Other, Explain  2. Will interviewers or facilitators be used? [] Y	edia						

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

## Instructions for completing Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback"

**TITLE OF INFORMATION COLLECTION:** Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

**PURPOSE:** Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

**DESCRIPTION OF RESPONDENTS**: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

**TYPE OF COLLECTION:** Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

**CERTIFICATION:** Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

**Personally Identifiable Information:** Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

#### **BURDEN HOURS:**

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households;(2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row. No. of Respondents: Provide an estimate of the Number of respondents.

Participation Time: Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

**Burden:** Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

## 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. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

**Administration of the Instrument:** Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

Submit all instruments, instructions, and scripts are submitted with the request.