Request for Approval under the "Requests to Agreement States for Information" Information Collection (OMB Control Number: 3150-0029)

TITLE OF INFORMATION COLLECTION: OPPORTUNITY TO COMMENT ON DRAFT REVISION TO OFFICE OF NUCLEAR MATERIAL SAFETY AND SAFEGUARDS PROCEDURE SA-105, "REVIEWING THE COMMON PERFORMANCE INDICATOR, TECHNICAL QUALITY OF INCIDENT AND ALLEGATION ACTIVITIES" (STC-16-0xx)

PURPOSE: To allow radiation control program directors in Agreements States to provide input on Safety and Safeguards Procedure SA-105, "Reviewing the Common Performance Indicator, Technical Quality of Incident and Allegation Activities."

DESCRIPTION OF RESPONDENTS:

Respondents will be Agreement State Radiation Control Program Directors who are the individuals responsible for implementing the radiation control programs and for the regulation of radioactive material in the NRC Agreement States. The NRC has relinquished control of regulating radioactive materials in 37 states in the US – the NRC Agreement States

TYPE OF	COLLECTION:	(Check one)
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[X] Stakeholder Feedback	[] Customer Satisfaction Survey
[] Usability Testing	[] Focus Groups
[] Respondent Debriefings	[] Small Discussion Group
[] Other:	

CERTIFICATION:

I certify the following to be true regarding the proposed collection of information:

- 1. It is necessary for the proper performance of agency functions.
- 2. It avoids unnecessary duplication.
- 3. It reduces burden on small entities.
- 4. It uses plain, coherent, and unambiguous language that is understandable to respondents.
- 5. Its implementation will be consistent and compatible with current reporting and recordkeeping practices.
- 6. It indicates the retention periods for recordkeeping requirements.
- 7. It informs respondents of the information called for under 5 CFR 1320.8 (b)(3) about:
 - i. Why the information is being collected;
 - ii. Use of 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
- 8. It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected.
- 9. It uses effective and efficient statistical survey methodology (if applicable).

10. It makes appropriate use of information tech	nology.		
Name:Kristen Benney			
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To assist review, please provide answers to the f	following questio	n:	
 Personally Identifiable Information: Is personally identifiable information (PII) c If Yes, will any information that is collected Privacy Act of 1974? [] Yes [] No If Yes, has an up-to-date System of Records 	be included in re	ecords that are sub	
Gifts or Payments: Is an incentive (e.g., money or reimbursement of participants? [] Y [X] No	f expenses, token	of appreciation)	provided to
BURDEN HOURS			
Category of Respondent	No. of Respondents	Participation Time	Burden
D lt et C e l D e Offi		3	111
Radiation Control Program Officers	37	3	111
Totals	37	3	111
	37		111
Totals FEDERAL COST: The estimated annual cost to the Federal government of the federal govern	37 ment is: \$5,360 (20 hours of profe	111 ssional staff
Totals FEDERAL COST: The estimated annual cost to the Federal government time at \$268//hr) If you are conducting a focus group, survey, or	37 ment is: \$5,360 (20 hours of professy statistical methal	111 ssional staff nods, please
Totals FEDERAL COST: The estimated annual cost to the Federal government time at \$268//hr) If you are conducting a focus group, survey, or provide answers to the following questions: The selection of your targeted respondents 1. Do you have a customer list or something single respondents and do you have a sampling plant.	37 ment is: \$5,360 (and a point of both below lescription of home)	20 hours of profest y statistical method the universe of point this universe? W (or attach the saw you plan to id	111 ssional staff nods, please ootential

[X] Telephone
[] In-person
[X] Mail
[X] Other, Explain Respondents may call, mail, or email their comments to the NRC
point of contact

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

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

Instructions for completing Request for Approval

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.