# Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0690-0030)

**TITLE OF INFORMATION COLLECTION:** Measuring Digital Services Related to the Machinery Sector

**PURPOSE:** The ultimate purpose is to develop a credible methodology for estimating the value of U.S. trade in machinery-based digital services. The objective of the focus groups would be to identify the most important service categories in their sector and identify the best metric to capture the value of those services categories.

<b>DESCRIPTION OF RESPONDENTS:</b> companies the machinery sector.	s that use and/or provide digital services in
TYPE OF COLLECTION: (Check one)	
[ ] Customer Comment Card/Complaint Form [ ] Usability Testing (e.g., Website or Software [x] Focus Group	<ul><li>[ ] Customer Satisfaction Survey</li><li>[ ] Small Discussion Group</li><li>[ ] Other:</li></ul>
CERTIFICATION:	
<ol> <li>I certify the following to be true:</li> <li>The collection is voluntary.</li> <li>The collection is low-burden for respondents an</li> <li>The collection is non-controversial and does not agencies.</li> <li>The results are not intended to be disseminated to</li> <li>Information gathered will not be used for the purpolicy decisions.</li> <li>The collection is targeted to the solicitation of o experience with the program or may have experience</li> </ol>	raise issues of concern to other federal to the public. rpose of substantially informing influential pinions from respondents who have
Name and Title:_Jessica Huang / International Ecor	nomist
To assist review, please provide answers to the follo	owing question:
<ol> <li>Personally Identifiable Information:</li> <li>Is personally identifiable information (PII) colle</li> <li>If Yes, will any information that is collected be Privacy Act of 1974? [] Yes [] No</li> <li>If Yes, has an up-to-date System of Records No</li> </ol>	included in records that are subject to the

Gifts or Payments:	Gifts	or	Pay	yments:
--------------------	-------	----	-----	---------

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 Hours
Private Sector	100	2 hours	200

**FEDERAL COST:** The estimated annual cost to the Federal government: <u>approximately</u> \$25,000, covering ITA personnel travel to roundtable locations.

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?

Leverage network of industry stakeholders such as trade associations and ITA strategic partners to gather representative groups of companies who are interested in participating in the roundtable.

#### **Administration of the Instrument**

1.	How will you collect the information? (Check all that apply)
	[] Web-based or other forms of Social Media
	[ ] Telephone
	[ x] In-person
	[ ] Mail

[ ] Other, Explain

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

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

All instruments used to collect information must include:

OMB Control No. 0690-0030 Expiration Date: 07/30/2020

## 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.