Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number 1513–0132)

TITLE OF INFORMATION COLLECTION:

Conditionally Approved Status in COLAs Online — Follow-Up User Survey.

PURPOSE:

The results of this survey will provide the Alcohol and Tobacco Tax and Trade Bureau (TTB) with information regarding user understanding and acceptance of the new Conditionally Approved status in COLAs Online. COLAs Online is the electronic system through which alcohol beverage producers and importers may submit applications for certificates of label approval (COLAs) to TTB. TTB may return a COLA application to the industry member in Conditionally Approved status. For applications in this status, TTB proposes changes to certain data fields to make the information on the COLA application form consistent with the information on the alcohol beverage label accompanying the application, rather than require the industry member to make the changes. If the industry member accepts TTB's proposed changes within 7 days, the status of the application changes to Approved. If the industry member declines the changes, or 7 days pass after the application is returned, the application reverts to Needs Correction status and the industry member must make the changes and resubmit the application.

TTB implemented the Conditionally Approved status option in COLAs Online on June 27, 2019. Since then, industry members have accepted the proposed changes on approximately 90 percent of applications returned in Conditionally Approved status. TTB proposes to conduct a telephone survey to better understand why some industry members either declined TTB's proposed changes or allowed the Conditionally Approved status to time out. While this information could also be solicited through an email form, TTB believes a telephone survey will provide more useful results. This information will allow TTB to prioritize enhancements to the COLAs Online system or offer further guidance on the use of the Conditionally Approved status, or both as appropriate.

DESCRIPTION OF RESPONDENTS:

Respondents are current alcohol beverage permit or brewer's notice holders who have received a COLA application in Conditionally Approved status and either declined TTB's proposed changes or waited longer than 7 days to review the proposed changes. All respondents are either in or associated with the industries regulated by TTB.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form   [X] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software   [ ] Small Discussion Group

[ ] Focus Group   [ ] 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 <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: _Andrew Malone_____ Andrew Malone.

To assist review, please provide answers to the following questions:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected?   [ ] Yes   [X] No

2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974?   [ ] Yes   [ ] No   [ ] N/A

3. If Yes, has an up-to-date System of Records Notice (SORN) been published?
[ ] Yes   [ ] No   [ ] N/A

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
Federal Government			n/a
State, Local & Tribal Government			n/a
Private Sector	200	0.1 hours	20 hours
Totals	**200**	0.1 hours	**20 hours**

FEDERAL COST: The estimated annual cost to the Federal government is $0.00. This survey will be conducted by current TTB employees as a one-time side duty.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

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.

TTB plans to contact every alcohol industry member who has declined the changes on a Conditionally Approved COLA application or let such an application time out during September 2019. TTB notes that during August 2019, there were 179 labels so affected, but some were from the same industry member. For September, TTB believes 200 is a reasonable upper limit on the number of such respondents. As the number of potential respondents is low, TTB is planning to contact every potential respondent it can reach.

TTB decided to contact respondents only regarding COLAs returned in Conditionally Approved status during September 2019 to increase the likelihood that the industry member could remember why he or she declined the changes or let them time out. TTB is seeking approval of this survey now so we can start work as soon as possible after the September data is available.

ADMINISTRATION OF THE INSTRUMENT

1. How will you collect the information? (Check all that apply)

   [ ] Web-based or other forms of Social Media

   [X] Telephone

   [ ] 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.

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:

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.