

PRIVACY THRESHOLD ANALYSIS (PTA)

This form serves as the official determination by the DHS Privacy Office to identify the privacy compliance requirements for all Departmental uses of personally identifiable information (PII).

A Privacy Threshold Analysis (PTA) serves as the document used to identify information technology (IT) systems, information collections/forms, technologies, rulemakings, programs, information sharing arrangements, or pilot projects that involve PII and other activities that otherwise impact the privacy of individuals as determined by the Chief Privacy Officer, pursuant to Section 222 of the Homeland Security Act, and to assess whether there is a need for additional Privacy Compliance Documentation. A PTA includes a general description of the IT system, information collection, form, technology, rulemaking, program, pilot project, information sharing arrangement, or other Department activity and describes what PII is collected (and from whom) and how that information is used and managed.

Please complete the attached Privacy Threshold Analysis and submit it to your component Privacy Office. After review by your component Privacy Officer the PTA is sent to the Department's Senior Director for Privacy Compliance for action. If you do not have a component Privacy Office, please send the PTA to the DHS Privacy Office:

Senior Director, Privacy Compliance
The Privacy Office
U.S. Department of Homeland Security
Washington, DC 20528
Tel: 202-343-1717

PIA@hq.dhs.gov

Upon receipt from your component Privacy Office, the DHS Privacy Office will review this form and assess whether any privacy compliance documentation is required. If compliance documentation is required – such as Privacy Impact Assessment (PIA), System of Records Notice (SORN), Privacy Act Statement, or Computer Matching Agreement (CMA) – the DHS Privacy Office or component Privacy Office will send you a copy of the relevant compliance template to complete and return.



Privacy Threshold Analysis (PTA)

Specialized Template for Information Collections (IC) and Forms

The Forms-PTA is a specialized template for Information Collections and Forms. This specialized PTA must accompany all Information Collections submitted as part of the Paperwork Reduction Act process (any instrument for collection (form, survey, questionnaire, etc.) from ten or more members of the public). Components may use this PTA to assess internal, component-specific forms as well.

Form Number: CG-16700

Form Title: North American Ice Service (NAIS) Customer Survey

Component: U.S. Coast Guard (USCG) Office: International Ice Patrol

IF COVERED BY THE PAPERWORK REDUCTION ACT:

Collection Title: North American Ice Service (NAIS) Customer Survey

OMB Control 1625-0087 OMB Expiration December 31, 2016

Number: Date:

Collection status: Extension Date of last PTA (if applicable):

PROJECT OR PROGRAM MANAGER

Name:	LCDR Caroline Bell		
Office:	International Ice Patrol	Title:	Ice Information Branch Chief
Phone:	860-271-2643	Email:	Caroline.B.Bell@uscg.mil

COMPONENT INFORMATION COLLECTION/FORMS CONTACT

Name:	Anthony Smith		
Office:	CG-612	Title:	PRA Coordinator
Phone:	202-475-3532	Email:	Anthony.D.Smith@uscg.mil



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SPECIFIC IC/Forms PTA QUESTIONS

1. Purpose of the Information Collection or Form

As outlined in Safety of Life at Sea (SOLAS) Chapter V regulation 6 and 46 USC 80301-2 the U.S. Coast Guard is directed to maintain an ice patrol in the North Atlantic Ocean to study and observe ice and current conditions. Ice dangers in the region shall be broadcast by available means to trans-Atlantic and other passing vessels.

The Coast Guard International Ice Patrol, as directed by the Commandant of the Coast Guard monitors the extent of the iceberg danger near the Grand Banks of Newfoundland and provides iceberg warnings to the maritime community by broadcasting the southeastern, southern, and southwestern limits of all known ice in two message bulletins and one radio-facsimile chart each day.

Executive Order 12862 directs the United States Coast Guard (USCG) to conduct surveys (both qualitative and quantitative) to determine the kind and quality of services our customers want and expect, as well as their satisfaction with USCG's existing services. This survey will be limited to data collections that solicit strictly voluntary opinions and will not collect information that is required or regulated.

2. Describe the IC/Fo	rm
a. Does this form	□ Yes
collect any	⊠ No
Personally	
Identifiable	
Information"	
(PII ¹)?	
b. From which	igtimes Members of the public
type(s) of	U.S. citizens or lawful permanent residents
individuals does	Non-U.S. Persons.
this form collect	☐ DHS Employees
information?	☐ DHS Contractors
(Check all that	☐ Other federal employees or contractors.
apply.)	— Other rederal employees of contractors.

Privacy Threshold Analysis - IC/Form

¹ Personally identifiable information means any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.



c. Who will complete	☐ The record subject of the form (e.g., the individual		
and submit this	applicant).		
form? (Check all	\square Legal Representative (preparer, attorney, etc.).		
that apply.)	Business entity.		
	If a business entity, is the only information		
	collected business contact information?		
	∑ Yes		
	□ No		
	☐ Law enforcement.		
	\square DHS employee or contractor.		
	\square Other individual/entity/organization that is NOT		
	the record subject. Please describe.		
	N/A		
d. How do	□ Paper.		
individuals	$oxed{\boxtimes}$ Electronic. (ex: fillable PDF)		
complete the	\square Online web form. (available and submitted via the		
form? Check all	internet)		
that apply.	Provide link:		
	rill DHS collect on the form?		
Vessel Name, Call sign, Hon	ne port.		
	ct Social Security number (SSN) or other element that is		
	re Personally Identifiable Information (SPII)? No.		
☐ Social Security numb	G		
☐ Alien Number (A-Nu	_		
☐ Tax Identification Nu	•		
□ Visa Number	\square Known Traveler Number		
☐ Passport Number	\square Trusted Traveler Number (Global Entry,		
☐ Bank Account, Credit			
other financial account	number Driver's License Number		
□ Other. <i>Please list:</i>	\square Biometrics		
g. List the <i>specific aut</i>	<i>hority</i> to collect SSN or these other SPII elements.		
N/A			



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h.	How will this information be used? What is the purpose of the collection?		
	Describe why this	collection of SPII is the minimum amount of information	
	necessary to acco	mplish the purpose of the program.	
N/A			
i.	Are individuals	$oxed{\boxtimes}$ Yes, records subject fills out and submit the form.	
	provided notice	\square No.	
	at the time of		
	collection by		
	DHS (Does the		
	records subject		
	have notice of		
	the collection or		
	is form filled out		
	by third party)?		

3. How will DHS store th	e IC/form responses?
a. How will DHS store	\square Paper. Please describe.
the original,	\square Electronic. Please describe the IT system that will
completed IC/forms?	store the data from the form.
	Click here to enter text.
	$oxed{\boxtimes}$ Scanned forms (completed forms are scanned into
	an electronic repository). Please describe the
	electronic repository.
	The CG-16700 forms are scanned and kept on
	the USCG network.
b. If electronic, how	\square Manually (data elements manually entered). Please
does DHS input the	describe.
responses into the IT	Click here to enter text.
system?	\square Automatically. Please describe.
	Click here to enter text.
	N/A



c.	How would a user	\square By a unique identifier. Please describe. If		
	search the	information is retrieved by personal identifier, please		
	information	submit a Privacy Act Statement with this PTA.		
	submitted on the	Click here to enter text.		
	forms, i.e., how is the	$oxed{oxed}$ By a non-personal identifier.		
	information	All Surveys are kept in an electronic folder on a Coast Guard		
	retrieved?	Workstation. Information is retrieved by opening each		
		survey individually.		
d.	What is the records	Records are kept permanently according to the Information		
	retention	and Life Cycle Management Manual (COMDTINST		
	schedule(s)? Include	M5212.12A).		
	the records schedule			
	number.			
e.	How do you ensure	Data Collection Ice Operations records are kept permanently.		
	that records are	They are transferred to NARA five years after the conclusion		
	disposed of or deleted	of the project or the publication of the final record. (Ch. 1 to		
	in accordance with	CONDTINST M5212.12A).		
	the retention			
	schedule?			
f.	Is any of this information	on shared outside of the original program/office		
	Yes, information is share	ed with other DHS components or offices.		
Pl€	ease describe.			
\boxtimes	\boxtimes Yes, information is shared <i>external</i> to DHS with other federal agencies, state/local			
pa	partners, international partners, or non-governmental entities. Please describe.			
	The survey is forwarded to the Canadian Ice Service (CIS).			
	- · · · · · · · · · · · · · · · · · · ·			
	No. Information on this	form is not shared outside of the collecting office.		
		-		
	\square No. Information on this form is not shared outside of the collecting office.			



² Generally, a unique identifier is considered any type of "personally identifiable information," meaning any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.

Privacy Threshold Analysis - IC/Form





Please include <u>a copy of the referenced form and Privacy Act Statement</u> (if applicable) with this PTA upon submission.



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PRIVACY THRESHOLD REVIEW

(TO BE COMPLETED BY COMPONENT PRIVACY OFFICE)

Component Privacy Office Reviewer:	Robert Herrick		
Date submitted to component Privacy Office:	November 3, 2017		
Date submitted to DHS Privacy Office:	November 16, 2017		
Have you approved a Privacy Act Statement for this form? (Only applicable if you have received a waiver from the DHS Chief Privacy Officer to approve component Privacy Act Statements.)	 ☐ Yes. Please include it with this PTA submission. ☑ No. Please describe why not. N/A. USCG Privacy will work with program to remove privacy notice from existing form. 		
Component Privacy Office Recommendation:			
North American Ice Service (NAIS) Custo	omer Survey is not a privacy sensitive collection.		



PRIVACY THRESHOLD ADJUDICATION

(TO BE COMPLETED BY THE DHS PRIVACY OFFICE)

DHS Privacy Office Reviewer:	Riley Dean
PCTS Workflow Number:	1153729
Date approved by DHS Privacy Office:	November 16, 2017
PTA Expiration Date	November 16, 2020

DESIGNATION

Privacy Sensitive	IC or	No If "no" PTA adjudication is complete.
Form:		
Determination:		X PTA sufficient at this time.
		☐ Privacy compliance documentation determination in
		progress.
		\square New information sharing arrangement is required.
		☐ DHS Policy for Computer-Readable Extracts Containing SPII
		applies.
		☐ Privacy Act Statement required.
		☐ Privacy Impact Assessment (PIA) required.
		\square System of Records Notice (SORN) required.
		☐ Specialized training required.
		\square Other. Click here to enter text.
DHS IC/Forms Review:		Choose an item.
Date IC/Form Approved		Click here to enter a date.
by PRIV:		
IC/Form PCTS Nu		Click here to enter text.
Privacy Act	Choose an item.	
Statement:	Privacy Notice already on form describing to survey participants how	
	submitted information will be used. This Notice can stay on the form,	
	but it can be amended to better describe that no personal information is	
	used through this survey, answers are not tied back to individuals, and responses are voluntary.	
	respon	ses are voluntary.



PTA:	Choose an item.
	Click here to enter text.
PIA:	Choose an item.
	If covered by existing PIA, please list: Click here to enter text.
	If a PIA update is required, please list: Click here to enter text.
SORN:	Choose an item.
	If covered by existing SORN, please list: Click here to enter text.
	If a SORN update is required, please list: Click here to enter text.

DHS Privacy Office Comments:

Please describe rationale for privacy compliance determination above.

USCG is submitting this PTA to discuss the North American Ice Service (NAIS) Customer Survey, which is associated with OMB Control Number 1625-0087. USCG maintains an ice patrol in the North Atlantic Ocean to study and observe ice and current conditions. Ice dangers in the region are then broadcast by available means to trans-Atlantic and other passing vessels. USCG conducts this survey to determine the kind and quality of services trans-Atlantic and other passing vessels want and expect, as well as their satisfaction with USCG's existing services. This survey is limited to data collections that solicit strictly voluntary opinions and will not collect information that is required or regulated. No PII is collected by the survey.

The DHS Privacy Office finds that this survey is non-privacy sensitive.

While a Privacy Notice is already on form, it can be amended by labeling it a "Privacy Notice" instead of "Privacy Act Notice," and can be edited to describe to better describe that no personal information is used through this survey, answers are not tied back to individuals, and responses are voluntary.