



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-5148

Form Title: International Certificate of Fitness for the Carriage of Liquefied Gases in Bulk

Component: U.S. Coast Guard (USCG) **Office:** CG-REG

IF COVERED BY THE PAPERWORK REDUCTION ACT:

Collection Title: Ships Carrying Bulk Hazardous Liquids

OMB Control Number: 1625-0094 **OMB Expiration Date:** August 31, 2018

Collection status: Extension **Date of last PTA (if applicable):** N/A

PROJECT OR PROGRAM MANAGER

Name: Mr. David Du Pont

Office: CG-REG **Title:** Reg Dev Mgr

Phone: 202-372-1497 **Email:** David.A.DuPont@uscg.mil

COMPONENT INFORMATION COLLECTION/FORMS CONTACT

Name: Mr. Anthony Smith

Office: CG-612 **Title:** PRA Coordinator

Phone: 202-475-3532 **Email:** Anthony.D.Smith@uscg.mil



SPECIFIC IC/Forms PTA QUESTIONS

1. Purpose of the Information Collection or Form

The purpose of the form (CG-5148) is to certify that the vessel meets certain commercial vessel safety requirements. The Coast Guard issues this form to document compliance with the requirements.

Form CG-5148 contains basic business contact information which may include the name and address of the vessel owner/operator, if owned/operated by an individual.

The authority for this collection is 46 U.S.C. 3703.

2. Describe the IC/Form

a. Does this form collect any Personally Identifiable Information” (PII ¹)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. From which type(s) of individuals does this form collect information? (Check all that apply.)	<input checked="" type="checkbox"/> Members of the public <input checked="" type="checkbox"/> U.S. citizens or lawful permanent residents <input checked="" type="checkbox"/> Non-U.S. Persons. <input type="checkbox"/> DHS Employees <input type="checkbox"/> DHS Contractors <input type="checkbox"/> Other federal employees or contractors.
c. Who will complete and submit this form? (Check all that apply.)	<input type="checkbox"/> The record subject of the form (e.g., the individual applicant). <input type="checkbox"/> Legal Representative (preparer, attorney, etc.). <input type="checkbox"/> Business entity. <p style="text-align: center;">If a business entity, is the only information collected business contact</p>

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.



	<p>information?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Law enforcement.</p> <p><input checked="" type="checkbox"/> DHS employee or contractor.</p> <p><input type="checkbox"/> Other individual/entity/organization that is NOT the record subject. <i>Please describe.</i></p>
<p>d. How do individuals complete the form? <i>Check all that apply.</i></p>	<p><input checked="" type="checkbox"/> Paper.</p> <p><input type="checkbox"/> Electronic. (ex: fillable PDF)</p> <p><input type="checkbox"/> Online web form. (available and submitted via the internet)</p> <p><i>Provide link:</i></p>
<p>e. What information will DHS collect on the form? The form only collects PII from USCG personnel as the authorizing official.</p>	
<p>f. Does this form collect Social Security number (SSN) or other element that is stand-alone Sensitive Personally Identifiable Information (SPII)? No.</p>	
<p><input type="checkbox"/> Social Security number</p> <p><input type="checkbox"/> Alien Number (A-Number)</p> <p><input type="checkbox"/> Tax Identification Number</p> <p><input type="checkbox"/> Visa Number</p> <p><input type="checkbox"/> Passport Number</p> <p><input type="checkbox"/> Bank Account, Credit Card, or other financial account number</p> <p><input type="checkbox"/> Other. <i>Please list:</i></p>	<p><input type="checkbox"/> DHS Electronic Data Interchange Personal Identifier (EDIPI)</p> <p><input type="checkbox"/> Social Media Handle/ID</p> <p><input type="checkbox"/> Known Traveler Number</p> <p><input type="checkbox"/> Trusted Traveler Number (Global Entry, Pre-Check, etc.)</p> <p><input type="checkbox"/> Driver's License Number</p> <p><input type="checkbox"/> Biometrics</p>
<p>g. List the specific authority to collect SSN or these other SPII elements.</p>	
<p>N/A</p>	
<p>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 accomplish the purpose of the program.</p>	
<p>N/A</p>	



<p>i. Are individuals provided notice at the time of collection by DHS (<i>Does the records subject have notice of the collection or is form filled out by third party</i>)?</p>	<p><input type="checkbox"/> Yes. Please describe how notice is provided.</p> <p><input checked="" type="checkbox"/> No.</p>
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3. How will DHS store the IC/form responses?	
<p>a. How will DHS store the original, completed IC/forms?</p>	<p><input type="checkbox"/> Paper. Please describe. Click here to enter text.</p> <p><input type="checkbox"/> Electronic. Please describe the IT system that will store the data from the form. Click here to enter text.</p> <p><input checked="" type="checkbox"/> Scanned forms (completed forms are scanned into an electronic repository). Please describe the electronic repository. Forms that the Coast Guard creates are maintained in Marine Information for Safety and Law Enforcement (MISLE) database.</p>
<p>b. If electronic, how does DHS input the responses into the IT system?</p>	<p><input checked="" type="checkbox"/> Manually (data elements manually entered). Please describe. A scanned record is uploaded to the vessel-specific files in MISLE.</p> <p><input type="checkbox"/> Automatically. Please describe. Click here to enter text.</p>
<p>c. How would a user search the information</p>	<p><input type="checkbox"/> By a unique identifier.² Please describe. If information is retrieved by personal identifier, please submit a Privacy Act Statement with this PTA.</p>

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.



submitted on the forms, <i>i.e.</i> , how is the information retrieved?	Click here to enter text. <input checked="" type="checkbox"/> By a non-personal identifier. <i>Please describe.</i> A search can be done using vessel-specific information.
d. What is the records retention schedule(s)? <i>Include the records schedule number.</i>	A record is retained for the life of the vessel; NARA retention schedule number N1-026-05-015.
e. How do you ensure that records are disposed of or deleted in accordance with the retention schedule?	As records are maintained in the MISLE database, disposal/deletion is in accordance with the business rules for the database.
f. Is any of this information shared outside of the original program/office? <input checked="" type="checkbox"/> No. Information on this form is not shared outside of the collecting office.	
<input type="checkbox"/> Yes, information is shared with other DHS components or offices. Please describe. Click here to enter text. <input type="checkbox"/> Yes, information is shared <i>external</i> to DHS with other federal agencies, state/local partners, international partners, or non-governmental entities. Please describe.	



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



PRIVACY THRESHOLD REVIEW

(TO BE COMPLETED BY COMPONENT PRIVACY OFFICE)

Component Privacy Office Reviewer:	Kenlinishia Tyler
Date submitted to component Privacy Office:	July 24, 2018
Date submitted to DHS Privacy Office:	July 25, 2018
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.)	<input type="checkbox"/> Yes. Please include it with this PTA submission. <input checked="" type="checkbox"/> No. Please describe why not. <p style="margin-left: 40px;">A Privacy Act Statement is not required as the information is not retrieved by a personal identifier.</p>
Component Privacy Office Recommendation:	
<i>Please include recommendation below, including what existing privacy compliance documentation is available or new privacy compliance documentation is needed.</i>	
<p>The purpose of the form (CG-5148) is to certify that the vessel meets certain commercial vessel safety requirements. The Coast Guard issues this form to document compliance with the requirements.</p> <p>Form CG-5148 contains basic business contact information which may include the name and address of the vessel owner/operator, if owned/operated by an individual.</p> <p>This collection is covered by DHS/USCG/PIA-008 Marine Information for Safety and Law Enforcement (MISLE) and DHS/USCG-013 Marine Information for Safety and Law Enforcement (MISLE).</p>	



PRIVACY THRESHOLD ADJUDICATION

(TO BE COMPLETED BY THE DHS PRIVACY OFFICE)

DHS Privacy Office Reviewer:	Riley Dean
PCTS Workflow Number:	Click here to enter text.
Date approved by DHS Privacy Office:	August 9, 2018
PTA Expiration Date	August 9, 2021

DESIGNATION

Privacy Sensitive IC or Form:	Yes. If “no” PTA adjudication is complete.
Determination:	<input checked="" type="checkbox"/> PTA sufficient at this time. <input type="checkbox"/> Privacy compliance documentation determination in progress. <input type="checkbox"/> New information sharing arrangement is required. <input type="checkbox"/> DHS Policy for Computer-Readable Extracts Containing SPII applies. <input type="checkbox"/> Privacy Act Statement required. <input type="checkbox"/> Privacy Impact Assessment (PIA) required. <input type="checkbox"/> System of Records Notice (SORN) required. <input type="checkbox"/> Specialized training required. <input type="checkbox"/> Other. Click here to enter text.
DHS IC/Forms Review:	Choose an item.
Date IC/Form Approved by PRIV:	Click here to enter a date.
IC/Form PCTS Number:	Click here to enter text.
Privacy Act	None required.



Statement:	
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:	
<i>Please describe rationale for privacy compliance determination above.</i>	
<p>USCG is submitting this PTA to discuss the International Certificate of Fitness for the Carriage of Liquefied Gases in Bulk, Form CG-5418, which is associated with the Ships Carrying Bulk Hazardous Liquids information collection and OMB Control Number 1625-0094. The information collection and recordkeeping requirements required under this OMB Control Number is implemented in 46 CFR 153 and required by Annex II to the MARPOL Convention, which is in 46 CFR 153 under the authority of 33 USC 1903. The information is used by the Coast Guard to evaluate vessel design, to ensure compliance with the regulations. The information is used by vessel crewmembers in operations related to the cargoes and to avoid potential dangers presented by the cargo. These requirements are necessary to ensure that the requirements for the safe transport by vessel of bulk liquid hazardous materials mandated by 46 USC 3703 are met.</p> <p>This form is issued by USCG after an inspection to a vessel owner/operator. The form is maintained on the vessel. The only PII used on this form is that of a USCG personnel authorizing the certificate. No vessel owner data is collected on the form.</p> <p>A copy of a signed form is scanned into the Marine Information for Safety and Law Enforcement (MISLE) database and linked to a vessel file. In MISLE, it is not possible to retrieve the form based on the signing official's name or signature. Information is retrieved by a vessel-specific search. No information is shared by USCG outside of the USCG.</p> <p>The only PII collected on this form is that of USCG personnel serving as an authorizing official for the inspection of a vessel. Therefore, no PIA coverage is technically required. However, PIA coverage for this type of information is provided by DHS/USCG/PIA-008 MISLE, which outlines the risks of capturing information required to support the Coast</p>	



Homeland Security

Privacy Office
U.S. Department of Homeland Security
Washington, DC 20528
202-343-1717, pia@hq.dhs.gov
www.dhs.gov/privacy

Guard's marine safety, security, environmental protection and law enforcement programs. SORN coverage is not technically required as the information is retrieved by search using vessel-specific information. However, DHS/USCG-013 MISLE does provide notice of this type of information collection.