



## PAPERWORK REDUCTION ACT (PRA) EXECUTIVE SUMMARY FORM

**TITLE OF COLLECTION:** 2020 Census New Construction Program  
**OMB CONTROL NUMBER:** 0607-XXXX  
**DIVISION/PROGRAM OFFICE:** Geography Division  
**AGENCY CONTACT:** Pennington, Robin A

### TYPE OF INFORMATION COLLECTION REQUEST:

<input checked="" type="checkbox"/>	New collection	
<input type="checkbox"/>	Revision of a currently approved collection	[current expiration date:           ]
<input type="checkbox"/>	Extension, without change, of a currently approved collection	[current expiration date:           ]
<input type="checkbox"/>	Reinstatement, without change, of a previously approved collection for which approval has expired	
<input type="checkbox"/>	Reinstatement, with change, of a previously approved collection for which approval has expired	
<input type="checkbox"/>	Existing collection in use without an OMB Control Number	

### PURPOSE OF COLLECTION:

The Census Bureau conducts the New Construction Program to account for new housing units, group quarters (GQs), and transitory locations for which construction is in progress during or after March 1, 2018 and completion is expected by Census Day, April 1, 2020. The Census Bureau collects city-style addresses for the newly built housing units, GQs, and transitory locations in blocks where census questionnaires or mailing packages are delivered and households are expected to use a self-response mode to complete the census.

Through the New Construction Program, the Census Bureau improves the accuracy and completeness of the address list used to conduct the 2020 Census by utilizing the local knowledge of tribal, state, and local governments. The Census Address List Improvement Act of 1994 (Public Law 103-430) strengthened the Census Bureau's partnership capabilities with participating governments by expanding the methods the Census Bureau uses to collect address information from participants.

**DATA COLLECTION START DATE:** 4/1/2019

**REQUESTED OMB EXPIRATION DATE:**  Three years from approval date     Other date: [            ]

**60-DAY FEDERAL REGISTER CITATION:** 83 FR 18502-18504            **DATE PUBLISHED:** 4/27/2018

**MANDATORY OR VOLUNTARY COLLECTION?**     Mandatory             Voluntary             N/A

### IS THIS A REIMBURSABLE COLLECTION CONDUCTED BY CENSUS ON BEHALF OF ANOTHER AGENCY/ENTITY?

<input type="checkbox"/>	Yes [Specify agency/entity:            ]
<input checked="" type="checkbox"/>	No

<input type="checkbox"/> Shared Sponsorship [Specify agency/entity: _____ ]	
<b>LEGAL AUTHORITY(IES) FOR INFORMATION COLLECTION:</b>	
Public Law 103-430, Title 13, United States Code (U.S.C.), Section 141 (a).	
<b>SURVEY INFORMATION:</b>	
What is the source of the sampling frame for this collection?	
What are the mode(s) for collection? <input checked="" type="checkbox"/> Paper <input checked="" type="checkbox"/> Internet <input type="checkbox"/> Computer Assisted Personal Interviewing (CAPI)	
<input type="checkbox"/> Computer Assisted Telephone Interviewing (CATI) <input checked="" type="checkbox"/> Other          DVD	
<b>PUBLIC BURDEN:</b>	
Average Estimated Time per Response: 48 Hours 0 Minutes	
<b>ANNUAL REPORTING AND RECORDKEEPING HOUR BURDEN:</b>	
Number of Respondents	32,000
Number of Responses	6,550
Requested Annual Burden Hours	339,850
Current Annual OMB Inventory	0
Difference (+, -)	339,850
Reason for Difference in Burden Hours:	<input checked="" type="checkbox"/> Program Change <input type="checkbox"/> Adjustment <input checked="" type="checkbox"/> No Difference
Explanation of Difference (if applicable): <b>New Information Collection</b>	
<b>PRIVACY ACT (PA):</b>	
Is this collection a Privacy Act System of Records?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - <i>If yes, a Privacy Act Statement that identifies the appropriate Systems of Records Notice (SORN) is required.</i>
<b>TITLE 13 CONFIDENTIALITY:</b>	
Is this collection of information confidential under Title 13, Section 9?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If yes, has the confidentiality pledge been updated per the Federal Cybersecurity Enhancement Act of 2015 <sup>1</sup> ?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<sup>1</sup> Please refer to the "[Updates to Census Bureau Confidentiality Messaging and PRA Required Language](#)" Memo

Has the respondent messaging been reviewed and updated in the collection materials per the “Updates to Census Bureau Confidentiality Messaging and PRA Required Language” memo, if applicable?  Yes  No

**PLACEMENT OF REQUIRED PAPERWORK REDUCTION ACT AND PRIVACY ACT LANGUAGE:** In the table below, please indicate where the following PRA/PA statement requirements are located in the respondent materials:

Required PRA/PA Language	PRA	PA Statement	Invitation letter	FAQs	Collection Instrument	Instructions	Other	N/A
Reason/purpose for the information collection, including the way the information will be used.	X	X	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Registration Form	<input type="checkbox"/>
The legal authority(ies) that authorize the collection of information.	X	X	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Registration Form	<input type="checkbox"/>
Whether responses are mandatory or voluntary (citing the authority)	X	X	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
The nature and extent of confidentiality to be provided (if any) citing authority	X		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>
An estimate of the average respondent burden together with a request that the public direct to the agency any comments concerning the accuracy of this burden estimate and any suggestions for reducing this burden	X		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>
OMB control number	X		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Registration Form	<input type="checkbox"/>
A statement that an agency may not conduct (and a person is not required to respond to) an information collection request unless it displays a currently valid OMB control number.	X		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Registration Form	<input type="checkbox"/>
Published routine use for which information is subject and citation to relevant SORN		X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>
The effects on the individual for not providing the requested information		X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>

Comments:

**ADDITIONAL INFORMATION:**

Please include any special circumstances or other information that would help expedite the review of this package (ex. if the collection is at the request of a congressional inquiry).

Date: 8/17/2018

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N/A.								