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PAPERWORK REDUCTION ACT (PRA) EXECUTIVE SUMMARY FORM

TITLE OF COLLECTION:	Spatial, Address, and Imagery Data (SAID) Program
OMB CONTROL NUMBER:	0607-XXXX
DIVISION/PROGRAM OFFICE:	Geography Division, Partnership Communication and Outreach Branch
AGENCY CONTACT:	Michael Riedman

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 SAID Program provides the Census Bureau with a continuous method to obtain current, accurate, and complete spatial, address, and imagery data. The purpose of the SAID Program is to help maintain the Census Bureau's geographic framework for data collection, tabulation, and dissemination between decennial censuses and to support ongoing programs such as the American Community Survey and the Population Estimates Program.

DATA COLLECTION START DATE:	1/1/2019		
REQUESTED OMB EXPIRATION DATE:	<input checked="" type="checkbox"/> Three years from approval date	<input type="checkbox"/> Other date: []	
60-DAY FEDERAL REGISTER CITATION:	83 FR 31947	DATE PUBLISHED:	7/10/2018
MANDATORY OR VOLUNTARY COLLECTION?	<input type="checkbox"/> Mandatory	<input checked="" type="checkbox"/> Voluntary	<input type="checkbox"/> 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:] |

LEGAL AUTHORITY(IES) FOR INFORMATION COLLECTION:

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Title 13 U.S.C. Sections 16, 141, and 193.

SURVEY INFORMATION:

What is the source of the sampling frame for this collection?

What are the mode(s) for collection? Paper Internet Computer Assisted Personal Interviewing (CAPI)
 Computer Assisted Telephone Interviewing (CATI) Other

PUBLIC BURDEN:

Average Estimated Time per Response: 4 Hours 40 Minutes

ANNUAL REPORTING AND RECORDKEEPING HOUR BURDEN:

Number of Respondents 1500

Number of Responses 1500

Requested Annual Burden Hours 7000

Current Annual OMB Inventory 0

Difference (+, -) 7000

Reason for Difference in Burden Hours: Program Change Adjustment No Difference

Explanation of Difference (if applicable): new collection

PRIVACY ACT (PA):

Is this collection a Privacy Act System of Records? No
 Yes - If yes, a Privacy Act Statement that identifies the appropriate Systems of Records Notice (SORN) is required.

TITLE 13 CONFIDENTIALITY:

Is this collection of information confidential under Title 13, Section 9? Yes No

If yes, has the confidentiality pledge been updated per the Federal Cybersecurity Enhancement Act of 2015¹? Yes No

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

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

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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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Email template	<input type="checkbox"/>
The legal authority(ies) that authorize the collection of information.	X	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Email template	<input type="checkbox"/>
Whether responses are mandatory or voluntary (citing the authority)	X	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Email template	<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"/>	Email template	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Email Template	<input type="checkbox"/>
OMB control number	X		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Email Template	<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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Email template	<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).								