

**U.S. DEPARTMENT OF  
HOUSING AND URBAN DEVELOPMENT**

**PRIVACY THRESHOLD ANALYSIS (PTA)**

**Enterprise Income (EIV) System  
User Access Authorization Form and Rules of  
Behavior and User Agreement**

**Office of Public and Indian Housing  
Real Estate Assessment Center**

**March 2019**

## PRIVACY THRESHOLD ANALYSIS (PTA)

The PTA is a compliance form developed by the Privacy Branch to identify the use of Personally Identifiable Information (PII) across the Department. The PTA is the first step in the PII verification process, which focuses on these areas of inquiry:

- Purpose for the information,
- Type of information,
- Sensitivity of the information,
- Use of the information,
- And the risk to the information.

Please use the attached form to determine whether a Privacy and Civil Liberties Impact Assessment (PCLIA) is required under the E-Government Act of 2002 or a System of Record Notice (SORN) is required under the Privacy Act of 1974, as amended.

Please complete this form and send it to your program Privacy Liaison Officer (PLO). If you have no program Privacy Liaison Officer, please send the PTA to the HUD Privacy Branch:

John Bravacos, Senior Agency Official for Privacy  
U.S. Department of Housing and Urban Development

[privacy@hud.gov](mailto:privacy@hud.gov)

Upon receipt from your program PLO, the HUD Privacy Branch will review this form. If a PCLIA or SORN is required, the HUD Privacy Branch will send you a copy of the PCLIA and SORN templates to complete and return.

**PRIVACY THRESHOLD ANALYSIS (PTA)**

**SUMMARY INFORMATION**

<b>Project or Program Name:</b>	<b>User Access Authorization Form and Rules of Behavior</b>		
<b>Program:</b>	<input type="text"/>		
<b>CSAM Name (if applicable):</b>	<b>Enterprise Income Verification System</b>	<b>CSAM Number (if applicable):</b>	Click here to enter text.
<b>Type of Project or Program:</b>	<input type="text"/>	<b>Project or status:</b>	<input type="text"/>
<b>Date first developed:</b>	<b>October 28, 2002</b>	<b>Pilot launch date:</b>	N/A
<b>Date of last PTA update:</b>	<b>March 1, 2016</b>	<b>Pilot end date:</b>	N/A
<b>ATO Status (if applicable)</b>	<input type="text"/>	<b>ATO expiration date (if applicable):</b>	<b>March 30, 2022</b>

**PROJECT OR PROGRAM MANAGER**

<b>Name:</b>	<b>Rochelle Katz</b>		
<b>Office:</b>	<b>PIH/EIV</b>	<b>Title:</b>	Acting Program Manager
<b>Phone:</b>	<b>202-475-4967</b>	<b>Email:</b>	Rochelle.Katz@hud.gov

**INFORMATION SYSTEM SECURITY OFFICER (ISSO) (IF APPLICABLE)**

<b>Name:</b>	<b>Dallas Blair</b>		
<b>Phone:</b>	<b>202-475-8699</b>	<b>Email:</b>	Dallas.C.Blair@hud.gov

## SPECIFIC PTA QUESTIONS

<b>1. Reason for submitting the PTA:</b>	
<p>HUD's regulations at 24 CFR 5.233, require PHAs to use the Enterprise Income Verification System (EIV) in its entirety to verify tenant employment and income information during mandatory reexaminations of family composition and income, and to reduce administrative and subsidy payment errors in accordance with 24 CFR 5.236 and administrative guidance issued by HUD.</p> <p>The EIV System User Access Authorization Form-52676 and Rules of Behavior and User Agreement must be completed by prospective users prior to the public housing agency granting staff access to the EIV system or granting authorization to view system generated content. HUD requires each individual to complete a PDF or Microsoft Word fillable Form HUD 52676 each time an individual requests initial access to the PIH EIV System, and when a user's access is modified, reinstated or terminated. Also, this form must be completed by an individual who will not access the EIV system but will view and/or handle printed or electronic EIV information. This form enables HUD to: 1) identify the user; 2) verify the type of system access requested; 3) provide the user with HUD's Rules of Behavior for system usage and information about the user responsibilities to protect data protected under the Federal Privacy Act (5 USC 552a) after access is granted; and 4) obtain the signature of the user certifying the user's agreement to the Rules of Behavior and responsibilities associated with his/her use of the EIV system.</p>	

<p><b>2. Does this system employ the following technologies?</b></p> <p><i>If you are using these technologies and want coverage under the respective PIA for that technology, please stop here and contact the HUD Privacy Branch for further guidance.</i></p>	<p><input type="checkbox"/> Social Media</p> <p><input type="checkbox"/> Web portal<sup>2</sup> (e.g., SharePoint)</p> <p><input type="checkbox"/> Contact Lists</p> <p><input type="checkbox"/> Public website (e.g. A website operated by HUD, contractor, or other organization on behalf of the HUD)</p> <p><input checked="" type="checkbox"/> None of these</p>
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<p><b>3. From whom does the Project or Program collect, maintain, use, or</b></p>	<p><input type="checkbox"/> This program collects no personally identifiable</p>
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<sup>2</sup> Informational and collaboration-based portals in operation at HUD and its programs that collect, use, maintain, and share limited personally identifiable information (PII) about individuals who are "members" of the portal or "potential members" who seek to gain access to the portal.

<p><b>disseminate information?</b> Please check all that apply.</p>	<p>information<sup>3</sup></p> <p><input checked="" type="checkbox"/> Members of the public</p> <p><input type="checkbox"/> HUD employees/contractors (list programs):</p> <p><input type="checkbox"/> Contractors working on behalf of HUD</p> <p><input type="checkbox"/> Employees of other federal agencies</p> <p><input type="checkbox"/> Other (e.g. business entity)</p>
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<p><b>4. What specific information about individuals is collected, generated or retained?</b></p>	
<p>HUD Form-52676 collects the Public Housing Agency (PHA) code, organization name, organization address, prospective user's full name, HUD assigned user ID, Position Title, email address, office telephone and fax numbers and the type of work which involves the use of the EIV system, the type of system action requested, requested access roles to be assigned, public housing development numbers to be assigned and the prospective user's signature and date of request.</p>	
<p><b>4(a) Does the project, program, or system retrieve information from the system about a U.S. Citizen or lawfully admitted permanent resident aliens by a personal identifier?</b></p>	<p><input checked="" type="checkbox"/> No. Please continue to next question.</p> <p><input type="checkbox"/> Yes. If yes, please list all personal identifiers used:</p>
<p><b>4(b) Does the project, program, or system have an existing System of Records Notice (SORN) that has already been published in the Federal Register that covers the information collected?</b></p>	<p><input checked="" type="checkbox"/> No. Please continue to next question.</p> <p><input type="checkbox"/> Yes. If yes, provide the system name and number, and the Federal Register citation(s) for the most recent complete notice and any subsequent notices reflecting amendment to the system</p>
<p><b>4(c) Has the project, program, or system undergone any significant changes since the SORN?</b></p>	<p><input checked="" type="checkbox"/> No. Please continue to next question.</p> <p><input type="checkbox"/> Yes. If yes, please describe.</p>
<p><b>4(d) Does the project, program, or system use Social Security Numbers (SSN)?</b></p>	<p><input checked="" type="checkbox"/> No.</p> <p><input type="checkbox"/> Yes.</p>
<p><b>4(e) If yes, please provide the specific legal authority and purpose for the collection of SSNs:</b></p>	<p>Click here to enter text.</p>
<p><b>4(f) If yes, please describe the uses of the</b></p>	<p>Click here to enter text.</p>

<sup>3</sup> HUD defines personal information as "Personally Identifiable Information" or PII, which is any information that permits the identity of an individual to be directly or indirectly inferred, including any information that 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. "Sensitive PII" is PII, which if lost, compromised, or disclosed without authorization, could result in substantial harm, embarrassment, inconvenience, or unfairness to an individual. For the purposes of this PTA, SPII and PII are treated the same.

<b>SSNs within the project, program, or system:</b>	
<b>4(g) If this project, program, or system is an information technology/system, does it relate solely to infrastructure?</b>  <i>For example, is the system a Local Area Network (LAN) or Wide Area Network (WAN)?</i>	<input checked="" type="checkbox"/> No. Please continue to next question. <input type="checkbox"/> Yes. If a log kept of communication traffic, please answer this question.
<b>4(h) If header or payload data<sup>4</sup> is stored in the communication traffic log, please detail the data elements stored.</b>	
Click here to enter text.	
N/A	

<b>5. Does this project, program, or system connect, receive, or share PII with any other HUD programs or systems?</b>	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. If yes, please list:
<b>6. Does this project, program, or system connect, receive, or share PII with any external (non-HUD) partners or systems?</b>	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. If yes, please list:
<b>6(a) Is this external sharing pursuant to new or existing information sharing access agreement (MOU, MOA, etc.)?</b>	<div style="border: 1px solid black; height: 20px; width: 100px; margin-bottom: 5px;"></div> Please describe applicable information sharing governance in place:  <b>Existing Computer Matching Agreements with the Social Security Administration and the Department of Health and Human Services</b>
<b>7. Does the project, program, or system provide role-based training for personnel who have access in addition to annual privacy training required of all HUD personnel?</b>	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. If yes, please list:  <b>Initial EIV System Training, Updated EIV System Training, Annual Security Awareness Training</b>
<b>8. Per NIST SP 800-53 Rev. 4, Appendix</b>	<input type="checkbox"/> No. What steps will be taken to develop and

<sup>4</sup> Header: Information that is placed before the actual data. The header normally contains a small number of bytes of control information, which is used to communicate important facts about the data that the message contains and how it is to be interpreted and used. It serves as the communication and control link between protocol elements on different devices.

Payload data: The actual data to be transmitted, often called the payload of the message (metaphorically borrowing a term from the space industry!) Most messages contain some data of one form or another, but some actually contain none: they are used only for control and communication purposes. For example, these may be used to set up or terminate a logical connection before data is sent.

<p><b>J, does the project, program, or system maintain an accounting of disclosures of PII to individuals/agencies who have requested access to their PII?</b></p>	<p>maintain the accounting:  <input checked="" type="checkbox"/> Yes. In what format is the accounting maintained: Log all access in EIV data base</p>
<p><b>9. Is there a FIPS 199 determination?<sup>5</sup></b></p>	<p> <input type="checkbox"/> Unknown.  <input type="checkbox"/> No.  <input checked="" type="checkbox"/> Yes. Please indicate the determinations for each of the following:   Confidentiality:  <input type="checkbox"/> Low <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> High   Integrity:  <input type="checkbox"/> Low <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> High   Availability:  <input type="checkbox"/> Low <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> High </p>

**PRIVACY THRESHOLD ANALYSIS REVIEW  
(TO BE COMPLETED BY PROGRAM PLO)**

<b>Program Privacy Liaison Reviewer:</b>	Arlette Mussington
<b>Date submitted to Program Privacy Office:</b>	April 3, 2019
<b>Date submitted to HUD Privacy Branch:</b>	Click here to enter a date.
<p><b>Program Privacy Liaison Officer Recommendation:</b>  <i>Please include recommendation below, including what new privacy compliance documentation is needed.</i>  None.</p>	

**(TO BE COMPLETED BY THE HUD PRIVACY BRANCH)**

<b>HUD Privacy Branch Reviewer:</b>	Click here to enter text.
<b>Date approved by HUD Privacy Branch:</b>	Click here to enter a date.
<b>PTA Expiration Date:</b>	Click here to enter a date.

<sup>5</sup> FIPS 199 is the [Federal Information Processing Standard](#) Publication 199, Standards for Security Categorization of Federal Information and Information Systems and is used to establish security categories of information systems.

**DESIGNATION**

<b>Privacy Sensitive System:</b>	<input type="text"/> If "no" PTA adjudication is complete.
<b>Category of System:</b>	<input type="text"/> If "other" is selected, please describe: <a href="#">Click here to enter text.</a>
<b>Determination:</b>	<input 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"/> HUD Policy for Computer-Readable Extracts Containing Sensitive PII applies. <input type="checkbox"/> Privacy Act Statement required. <input type="checkbox"/> Privacy and Civil Liberties Impact Assessment (PCLIA) required. <input type="checkbox"/> System of Records Notice (SORN) required. <input type="checkbox"/> Paperwork Reduction Act (PRA) Clearance may be required. Contact your program PRA Officer. <input type="checkbox"/> A Records Schedule may be required. Contact your program Records Officer.
<b>PIA:</b>	<input type="text"/> If covered by existing PCLIA, please list: <a href="#">Click here to enter text.</a>
<b>SORN:</b>	<input type="text"/> If covered by existing SORN, please list: <a href="#">Click here to enter text.</a>
<b>HUD Privacy Branch Comments:</b> <i>Please describe rationale for privacy compliance determination above.</i>	
<a href="#">Click here to enter text.</a>	



## DOCUMENT ENDORSMENT

DATE REVIEWED:
PRIVACY REVIEWING OFFICIALS NAME:

By signing below, you attest that the content captured in this document is accurate and complete and meet the requirements of applicable federal regulations and HUD internal policies.

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**SYSTEM OWNER**

Rochelle Katz, Acting Program Manager  
Department of Housing and Urban Development  
Real Estate Assessment Center  
Enterprise Income Verification Center

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**Date**

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**CHIEF PRIVACY OFFICER**

<<INSERT NAME/TITLE>>

**OFFICE OF ADMINISTRATION**

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**Date**