



## 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](mailto: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.

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**Form Number:** N/A

**Form Title:** N/A

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

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#### IF COVERED BY THE PAPERWORK REDUCTION ACT:

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**Collection Title:** Towing Vessels – Title 46 CFR Subchapter M

**OMB Control Number:** 1625-0117                      **OMB Expiration Date:** June 30, 2019

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

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#### PROJECT OR PROGRAM MANAGER

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**Name:** Mr. David Du Pont

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

**Phone:** 202-372-1497                      **Email:** [David.A.DuPont@uscg.mil](mailto:David.A.DuPont@uscg.mil)

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#### COMPONENT INFORMATION COLLECTION/FORMS CONTACT

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**Name:** Mr. Anthony Smith

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

**Phone:** 202-475-3532                      **Email:** [Anthony.D.Smith@uscg.mil](mailto:Anthony.D.Smith@uscg.mil)

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## SPECIFIC IC/Forms PTA QUESTIONS

### 1. Purpose of the Information Collection or Form

The purpose of the information collection is to aid the Coast Guard in determining if a vessel complies with certain safety and environmental protection standards. Plans and records for construction, modification or operation of vessels submitted and maintained on board are required for compliance with these standards.

There is no form associated with this collection.

The records contain 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. 3306.

NARA retention schedule number: N1-026-05-015.

### 2. Describe the IC/Form

<b>a.</b> Does this form collect any Personally Identifiable Information” (PII <sup>1</sup> )?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>b.</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.
<b>c.</b> Who will complete and submit this form? (Check all that apply.)	<input checked="" type="checkbox"/> The record subject of the form (e.g., the individual applicant).

<sup>1</sup> 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.



	<input type="checkbox"/> Legal Representative (preparer, attorney, etc.). <input checked="" type="checkbox"/> Business entity. If a business entity, is the only information collected business contact information? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  <input type="checkbox"/> Law enforcement.  <input type="checkbox"/> DHS employee or contractor.  <input type="checkbox"/> Other individual/entity/organization <b>that is NOT the record subject.</b> <i>Please describe.</i> There is no form associated with this collection.
<p><b>d.</b> How do individuals complete the form? <i>Check all that apply.</i></p>	<input checked="" type="checkbox"/> Paper. <input checked="" type="checkbox"/> Electronic. (ex: fillable PDF) <input type="checkbox"/> Online web form. (available and submitted via the internet) <i>Provide link:</i>
<p><b>e.</b> What information will DHS collect on the form?          The records contain basic business contact information, which may include the name and address of the vessel owner/operator, if owned/operated by an individual.</p>	
<p><b>f.</b> Does this form collect Social Security number (SSN) or other element that is stand-alone Sensitive Personally Identifiable Information (SPII)? No.</p>	
<input type="checkbox"/> Social Security number <input type="checkbox"/> Alien Number (A-Number) <input type="checkbox"/> Tax Identification Number <input type="checkbox"/> Visa Number <input type="checkbox"/> Passport Number <input type="checkbox"/> Bank Account, Credit Card, or other financial account number <input type="checkbox"/> Other. <i>Please list:</i>	<input type="checkbox"/> DHS Electronic Data Interchange Personal Identifier (EDIPI) <input type="checkbox"/> Social Media Handle/ID <input type="checkbox"/> Known Traveler Number <input type="checkbox"/> Trusted Traveler Number (Global Entry, Pre-Check, etc.) <input type="checkbox"/> Driver's License Number <input type="checkbox"/> Biometrics



<b>g.</b> List the <i>specific authority</i> to collect SSN or these other SPII elements.	
N/A	
<b>h.</b> How will this information be used? What is the purpose of the collection? Describe <i>why</i> this collection of SPII is the minimum amount of information necessary to accomplish the purpose of the program.	
N/A	
<b>i.</b> 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> )?	<input type="checkbox"/> Yes. Please describe how notice is provided. <a href="#">Click here to enter text.</a> <input checked="" type="checkbox"/> No.

3. How will DHS store the IC/form responses?	
<b>a.</b> How will DHS store the original, completed IC/forms?	<input type="checkbox"/> Paper. Please describe. <a href="#">Click here to enter text.</a> <input type="checkbox"/> Electronic. Please describe the IT system that will store the data from the form. <a href="#">Click here to enter text.</a> <input checked="" type="checkbox"/> Scanned forms (completed forms are scanned into an electronic repository). Please describe the electronic repository. The records that the Coast Guard receives are maintained in Marine Information for Safety and Law Enforcement (MISLE) database.
<b>b.</b> If electronic, how does DHS input the responses into the IT system?	<input checked="" type="checkbox"/> Manually (data elements manually entered). Please describe. A scanned record is uploaded to the vessel-specific file in MISLE.  <input type="checkbox"/> Automatically. Please describe.



	Click here to enter text.
<b>c.</b> How would a user search the information submitted on the forms, <i>i.e.</i> , how is the information retrieved?	<input type="checkbox"/> By a unique identifier. <sup>2</sup> <i>Please describe.</i> If information is retrieved by personal identifier, please submit a Privacy Act Statement with this PTA. 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.
<b>d.</b> 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.
<b>e.</b> 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.
<b>f.</b> 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.	

<sup>2</sup> 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.



**Homeland  
Security**

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U.S. Department of Homeland Security  
Washington, DC 20528  
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[www.dhs.gov/privacy](http://www.dhs.gov/privacy)



**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)

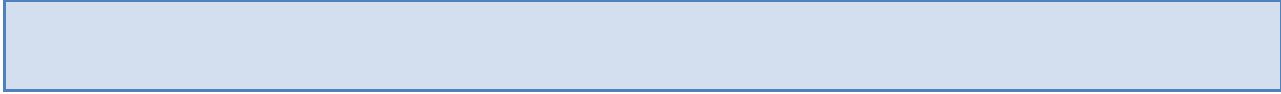
<b>Component Privacy Office Reviewer:</b>	A.L. Craig
<b>Date submitted to component Privacy Office:</b>	April 22, 2019
<b>Date submitted to DHS Privacy Office:</b>	May 2, 2019
<b>Have you approved a Privacy Act Statement for this form? (<i>Only applicable if you have received a waiver from the DHS Chief Privacy Officer to approve component Privacy Act Statements.</i>)</b>	<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;">There is no form associated with this collection.</p>
<b>Component Privacy Office Recommendation:</b>	
<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 information collection is to aid the Coast Guard in determining if a vessel complies with certain safety and environmental protection standards. Plans and records for construction, modification or operation of vessels submitted and maintained on board are required for compliance with these standards.</p> <p>There is no form associated with this collection.</p> <p>The records contain 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 USCG activity is covered by the DHS/USCG Marine Information for Safety and Law Enforcement (MISLE) PIA and SORN (i.e., DHS/USCG PIA-008 and DHS/USCG-013).</p>	





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[www.dhs.gov/privacy](http://www.dhs.gov/privacy)





## PRIVACY THRESHOLD ADJUDICATION

(TO BE COMPLETED BY THE DHS PRIVACY OFFICE)

<b>DHS Privacy Office Reviewer:</b>	<b>Joseph McCaskill</b>
<b>PCTS Workflow Number:</b>	<b>1180268</b>
<b>Date approved by DHS Privacy Office:</b>	May 03, 2019
<b>PTA Expiration Date:</b>	May 03, 2022
<b>Approved By:</b>	<b>Riley Dean</b>

## DESIGNATION

<b>Privacy Sensitive IC or Form:</b>	<b>Yes. If "no" PTA adjudication is complete.</b>
<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"/> DHS Policy for Computer-Readable Extracts Containing SPII applies. <input type="checkbox"/> Privacy Act Statement required. <input checked="" 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.
<b>DHS IC/Forms Review:</b>	Choose an item.
<b>Date IC/Form Approved by PRIV:</b>	Click here to enter a date.
<b>IC/Form PCTS Number:</b>	Click here to enter text.



<b>Privacy Act Statement:</b>	<b>Privacy Act Statement Not Required</b> Click here to enter text.
<b>PTA:</b>	<b>System PTA Required</b> Click here to enter text.
<b>PIA:</b>	<b>System covered by existing PIA</b> If covered by existing PIA, please list: DHS/USCG/PIA-008 Marine Information for Safety and Law Enforcement (MISLE) If a PIA update is required, please list: Click here to enter text.
<b>SORN:</b>	<b>SORN Not Required</b> 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.
<b>DHS Privacy Office Comments:</b> <i>Please describe rationale for privacy compliance determination above.</i>	
<p>USCG Privacy is submitting this PTA for the purpose of the information collection to aid the Coast Guard in determining if a vessel complies with certain safety and environmental protection standards. Plans and records for construction, modification or operation of vessels submitted and maintained on board are required for compliance with these standards. There is no form associated with this collection. The records contain basic business contact information, which may include the name and address of the vessel owner/operator, if owned/operated by an individual.</p> <p>DHS Privacy Office (PRIV) finds this is privacy sensitive. While there is no form associated with this PTA, the collection of basic business contact information is covered by DHS/USCG/PIA-008. The retrieval of information is by vessel or facility-specific information, and no SORN coverage is required; however, DHS/USCG-013 MISLE SORN does provide general notice of this type of information collection. This PTA is valid until May 03, 2022.</p>	