## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0960-0788)

**TITLE OF INFORMATION COLLECTION:** Open-ended Survey to gauge private organizations interest in the Office of Data Exchange and International Agreement’s (ODXIA) Electronic Signature Consent Based Social Security Number Verification (eCBSV).

**DESCRIPTION OF ACTIVITY:**

**Background:** Public Law 115-174, Economic Growth, Regulatory Relief, and Consumer Protection Act was enacted to reduce synthetic identity fraud. This law requires SSA to accept an individual’s electronically signed consent (electronic consent), which authorizes SSA to provide financial institutions or “permitted entities” verification of the individual’s name, date of birth, and social security number.

**Objectives:** SSA may not begin to modify the existing verification system until 50 percent of the program start-up costs are collected from participating entities. SSA is interested in using a survey to gauge potential entities’ interest in the service.

**Methodology:** The Big Tent Coalition (BTC) will disseminate an open-ended online survey tool via email to Chief Information Officers who are members of the American Bankers Association, and to additional financial organization contacts whose email addresses were derived from aggregate data obtained through S&P Global (<https://www.spglobal.com/en/privacy>).

**TYPE OF COLLECTION:** (Check one)

[ ] Customer Comment Card/Complaint Form [ ] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software) [ ] Small Discussion Group

[ ] Focus Group [X] Other**:** Open-end Survey

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other Federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: **Eric Lowman, Reports Clearance Team, Social Security Administration**

To assist review, please provide answers to the following question:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes **[**X] No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No
3. If Applicable, has a System or Records Notice been published? [ ] Yes [X] No

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [ X ] No

**BURDEN HOURS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | **No. of Respondents** | **Participation Time (minutes)** | **Burden**  **(hours)** |
| Individuals | 7,500 | 15 | 1,875 |

**BURDEN HOUR COMPUTATION** *(Number of responses (X) estimated response time*

*(/60) = annual burden hours)*:

**FEDERAL COST:** The estimated cost to the Federal Government is $3,840.

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents**

1. Do you have a customer list, or something similar, that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe? [X] Yes

[ ] No

If the answer is yes, please provide a description of both below (or attach the sampling plan). If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

The participant selection criterion for this research is as follows:

The survey is being disseminated to Chief Information Officers whose financial institutions and private industry companies have a membership with the American Bankers Association. The BTC is disseminating the online survey to its entire universe of members on behalf of SSA.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

[ ] Web-based or other forms of Social Media

[ ] Telephone

[ ] In-person

[ ] Mail

[X] Other, Explain – Online Survey:

1. Will interviewers or facilitators be used? [ ] Yes [X] No

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**

**USE OF RESULTS:**

The results will be used to inform SSA’s development and modification of the existing SSN verification system.

**Attached is a copy of the survey questionnaire.**

Online Survey Link: <https://aba.ca1.qualtrics.com/jfe/preview/SV_cRPejn5aiEBzcEt?Q_SurveyVersionID=current&Q_CHL=preview>

**NAME OF CONTACT PERSON:** Eric Lowman

**PHONE NUMBER:** 410-965-3588