## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 1652-0058)

**TITLE OF INFORMATION COLLECTION:** Consolidated User Guide Survey

**PURPOSE:** *The objective of this survey is to gather feedback from eligible and active aircraft operators who submit to the Transportation Security Administration’s (TSA) Secure Flight system to determine the overall satisfaction with and usability of the Department of Homeland Security (DHS) Customs and Border Protection (CBP)and TSA Consolidated User Guide (CUG). The CUG was jointly created by CBP and TSA to assist aircraft operators with implementing CBP and TSA’s technical requirements. The procedures and associated requirements are published together in the CUG. The CUG guidance provides aircraft operators the information necessary to implement changes to information technology systems, networks, and operations to comply with DHS regulations.*

**DESCRIPTION OF RESPONDENTS**: *Respondents are representatives (e.g. Security Directors) from approximately 215 domestic and foreign aircraft operators that are Secure Flight eligible and actively submit to the TSA’s Secure Flight System.*

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

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

[ ] Usability Testing (such as Website or Software) [ ] Small Discussion Group

[ ] Focus Group [X ] Other:\_\_\_\_E-mail\_\_\_\_\_\_\_\_

**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.

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Dina Merrikh

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TSA

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 [ ] No

**Gifts or Payments:**

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

**BURDEN HOURS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Table 1: Time Burden** |  |  |  |
| **Category of Respondent** | **No. of Respondents** | **Time per Response (Hours)** | **Time Burden (Hours)** |
|  | A | B | C= A x B |
| Secure Flight Domestic and Foreign Aircraft Operator Representatives | 215 | 0.16667 | 35.8 |
| **Totals** | **215** | **0.16667** | **35.8** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Table 2: Cost Burden** |  |  |  |
| **Category of Respondent** | **Time Burden (Hours)** | **Wage Rate** | **Cost Burden** |
| C | D | E= C x D |
| Secure Flight Domestic and Foreign Aircraft Operator Representatives | 35.8 | $ 98.05 | $ 3,513.32 |
| **Totals** | **35.8** |  | **$ 3,513.32** |

**FEDERAL COST:** The estimated annual cost to the Federal government is: **$134.80**

|  |  |  |  |
| --- | --- | --- | --- |
| **Table 3: Government Cost** |  |  |  |
| **TSA Pay Band** | **Average Hourly Loaded Rate of Pay** | **Time Burden (Hours)** | **Estimated Annual Cost to the Federal Government** |
| TSA Analyst : H-Band | A | B | C = A x B |
| **Totals** | **$ 40.44** | **3.33333** | **$ 134.80** |

**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 customer list would include emailing an identical survey to an aircraft operator representative from each domestic and international aircraft operator, who actively submit to the Secure Flight system.*

**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: Email outreach

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

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