**Narrative of Changes Table**

*The purpose of the Narrative of Changes Table is to demonstrate changes to a collection since the previous approval.*

Collection Title: Community Rating System--Application Letter & Quick Check; Community Annual Recertifications; Environmental & Historic Preservation Certifications

OMB Control No.: 1660-0022

Current Expiration Date: March 31, 2020

Collection Instrument(s): FEMA Form 086-0-35, FEMA Form 086-0-35A, FEMA Form 086-0-35B

The following are the changes to the collection:

**SUPPORTING STATEMENT:**

Questions 1 & 2 – Updated to reflect guidance documents currently in use

Question 8a – Updated to reflect FRN publication information.

Question 8b and c – Updated to reflect current efforts to consult with persons outside the agency and at consultation with respondents.

Question 10 – Updated to reflect current privacy information.

Question 12 – Number of forms respondents increased. See Question 15 for explanation.

Question 14 – Annualized costs to the federal government updated.

Question 15 – Burden hour increase explained.

For FEMA Forms 083-0-35 and 083-0-35A, there has been an upward adjustment in the annual hour burden due to the growth in the number of communities joining the CRS. Although some communities have stated that they use more hours for Form 086-0-35A when they expand their activities, nationwide this is offset by the CRS program’s expanding use of electronic collection and other efficiencies. For FEMA Form 083-0-35B, there has been a slight downward adjustment due to some communities’ shifting their efforts toward activities other than those to which this form applies.

For FEMA Form 083-0-35, the current annual hour burden is 14,850 hours, the new hours burden is 15,750 for an increase of 900 annual hour burden.

For FEMA Form 083-0-35A, the current annual hour burden is 26,880 hours, the new hours burden is 36,600 for an increase of 9,120 annual hour burden.

For FEMA Form 083-0-35B, the current annual hour burden is 206.4 hours, the new hours burden is 192 for a decrease of 14.4 annual hour burden.

There has been no change in the information being collected.

The changes in Annual Cost Burden reflect the added costs associated with the increased Bureau of Labor and Statistic hourly labor rates.

**FORMS CHANGE REQUESTED:**

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| **Location** | **Current version** | Proposed Revision | Justification |
| **FEMA Form 086-0-35** | NO CHANGES | **--** | **--** |
|  |
| **FEMA Form 086-0-35A, p. 1, in the OMB notice box** | . . . to average 4 hours for | . . . to average 24 hours for . . .  | Correction to typographical error. |
|  **“p. 1, subheading above second paragraph** | Appendix E | [leave blank] | Subheading eliminated as this set of forms is no longer included as an appendix to the program reference manual. |
|  **“p. 1, second paragraph** | This appendix contains . . .  | This packet contains . . . | Language changed to reflect fact that this set of forms is no longer an appendix to the reference manual. |
|  **“p. 1, third paragraph** | . . . preservation requirements can be found in Appendix F. | . . . preservation requirements are available in a separate packet. | Language changed to reflect fact that this set of forms is no longer an appendix to the reference manual. |
|  **“p. 2, below “CC-213 Recertification” title** | [No text] | Please cross out any incorrect items below, as needed, and insert the updated information. | Language inserted to clarify how to fill out or correct the form content. |
|  **“p. 2, block for date** | Date | Recertification due date | Language altered to clarify which date is applicable. |
|  **“, p. 2, paragraph above signature** | . . . we are maintaining in force all flood insurance policies that have been required of us as a condition of federal disaster assistance for insurable buildings . . . | . . . we are maintaining in force flood insurance policies for insurable buildings . . . | Language changed to clarify that community-owned buildings are to be insured even if the community has not received disaster assistance. |

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|  **“ p. 2, below signature** | [No text] | Date | Block inserted so signing official can date his/her signature. |
|  **“ p. 5, first sentence below email block**  | I hereby certify that \_\_\_\_\_\_\_[community name] is implementing the following activities [check the ones that apply]. | The \_\_\_\_\_\_\_\_\_\_[community name] is requesting CRS credit for the following activities [check the ones that apply]. | Language changed to clarify that the signing official certifies the community’s intention to continue implementation. |
|  **“ p. 5, second sentence below email block** | We will continue to implement these activities and will advise FEMA if . . . | I hereby certify that we will continue to implement those activities for which we receive verified credit and will advise FEMA if . . . | Language changed to clarify that the signing official certifies the community’s intention to continue implementation. |
|  **“ p. 6, Paragraph above signature**  | . . . we are maintaining in force all flood insurance policies that have been required of us as a condition of federal disaster assistance for insurable buildings . . . | . . . we are maintaining in force flood insurance policies for insurable buildings . . . | Language changed to clarify that community-owned buildings are to be insured even if the community has not received disaster assistance |
|  **“ p. 6, below signature** | [blank] | Date | Block inserted so signing official can date his/her signature. |
|  |
| **FEMA Form 086-0-35B, p. 1, subheading above second paragraph** | Appendix F | [leave blank] | Subheading eliminated as this set of forms is no longer included as an appendix to the program reference manual. |
| **“ p. 1, second paragraph** | This appendix contains . . .  | This packet contains . . . | Language changed to reflect fact that set of forms is no longer an appendix to the reference manual. |
|  **“p. 1, third paragraph** | . . . aspects of the CRS can be found in Appendix E. | . . . aspects of the CRS are available in a separate packet. | Language changed to reflect fact that set of forms is no longer an appendix to the reference manual. |