Supporting Statement for Paperwork Reduction Act Submissions

OMB Control Number: 1660 - 0138

Title: Direct Housing Assistance Forms

Form Number(s):

1) FEMA Form FF-104-FY-21-191 (formerly 009-0-129), Transportable Temporary Housing Unit Ready for Occupancy Status

- 2) FEMA Form FF-104-FY-21-192 (formerly 009-0-131), Sales Calculation Worksheet
- 3) FEMA Form FF-104-FY-21-193 (formerly 009-0-134), Direct Temporary Housing Assistance Recertification Worksheet
- 4) FEMA Form FF-104-FY-21-194 (formerly 009-0-135), Direct Temporary Housing Assistance Temporary Housing Agreement
- 5) FEMA Form FF-104-FY-21-195 (009-0-137), Commercial Park Unit Pad Requirements Information Checklist
- 6) FEMA Form FF-104-FY-21-109 (formerly 010-0-9), Transportable Temporary Housing Unit Request for the Site Inspection
- 7) FEMA Form FF-104-FY-21-110 (formerly 010-0-10), Transportable Temporary Housing Unit Landowner's Authorization Ingress-Egress Agreement
- 8) FEMA Form FF-104-FY-21-110-A (formerly 010-0-10S), Autorización del Propietario/Acuerdo de Entrada y Salida
- 9) FEMA Form FF-104-FY-21-111 (formerly 009-0-138), Transportable Temporary Housing Unit Inspection Report
- 10) FEMA Form FF-104-FY-21-112 (formerly 009-0-136), Transportable Temporary Housing Unit Installation Work Order
- 11) FEMA Form FF-104-FY-21-113 (formerly 009-0-130), Transportable Temporary Housing Unit Maintenance Work Order

General Instructions

A Supporting Statement, including the text of the notice to the public required by 5 CFR 1320.5(a)(1)(iv) and its actual or estimated date of publication in the Federal Register, must accompany each request for approval of a collection of information. The Supporting Statement must be prepared in the format described below and must contain the information specified in Section A below. If an item is not applicable, provide a brief

explanation. When Item 17 or the OMB Form 83-I is checked "Yes", Section B of the Supporting Statement must be completed. OMB reserves the right to require the submission of additional information with respect to any request for approval.

Specific Instructions

A. Justification

1. Explain the circumstances that make the collection of information necessary. Identify any legal or administrative requirements that necessitate the collection. Attach a copy of the appropriate section of each statute and regulation mandating or authorizing the collection of information. Provide a detailed description of the nature and source of the information to be collected.

The Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. § 5174, as amended by the Disaster Mitigation Act of 2000 (P.L. 106-390), authorizes the President to provide temporary housing units, including manufactured housing units, recreational vehicles or other readily fabricated dwellings and leased multi-family housing units and residential properties to eligible applicants who, as a direct result of a major disaster or emergency, are unable to occupy their primary residence or obtain adequate alternate housing, and therefore require temporary housing. Requirements for disaster-related housing needs of individuals and households who are eligible for temporary housing assistance may be found in Title 44 CFR § 206.117 – Housing Assistance. The information collected is used to determine the feasibility of a potential site for placement of temporary housing units (THUs) to ensure the THUs are ready for applicant occupancy, and to confirm applicant understanding of the requirements of occupancy of the THUs. The information will also provide FEMA with access to place the THUs, to document the installation and maintenance of the THUs, and to retrieve the THUs at the end of their use.

- 2. Indicate how, by whom, and for what purpose the information is to be used. Except for a new collection, indicate the actual use the agency has made of the information received from the current collection. Provide a detailed description of how the information will be shared, if applicable, and for what programmatic purpose.
 - a. FEMA Form FF-104-FY-21-191 (formerly 009-0-129), Transportable Temporary Housing Unit Ready for Occupancy Status: Used as a checklist to document the condition of THUs before disaster survivor occupancy and ensures FEMA has completed the necessary steps for the occupancy to begin. The form captures the condition of both exterior and interior fixtures and utilities, to include the placing/securing of the THU, and confirmation that the unit is clean and ready.

The conditions are confirmed by both contractor certification and the FEMA Monitor.

- b. **FEMA Form FF-104-FY-21-192 (formerly 009-0-131), Sales Calculation Worksheet:** Used to advise FEMA Individual Assistance (IA) applicants of the requirements for final sale of the unit if FEMA offers a sale program for its THUs as part of its direct housing assistance. The form includes a calculator to determine the adjusted fair market value of the manufactured housing unit (MHU), a worksheet to determine the IHP Settlement Payment amount, and a calculator to determine the final adjusted sale price of the MHU when the Sales Program has been activated. The final adjusted sale price calculator captures the applicant's income, assets, the fair market value, and the IHP Settlement Payment amount. The form includes an applicant Acknowledgement of Conditions of Sale, which is then used to execute FEMA's sale of the MHU.
- c. FEMA Form FF-104-FY-21-193 (formerly 009-0-134), Direct Temporary Housing Assistance Recertification Worksheet: Used to record direct housing occupant compliance with requirements for receiving continued direct temporary housing assistance. After the occupant moves into a THU, FEMA representatives will meet with them on a regular basis and will use this form to document the occupant's efforts to establish a permanent housing plan (PHP), and their continued progress toward achieving the plan. The form captures pre-disaster and post-disaster income of all members of the household over 18, rental resources, the approval or denial recertification determination and reason for the determination, and a repair progress checklist indicating the status of any repairs that were needed to the damaged dwelling.
- d. **FEMA Form FF-104-FY-21-194 (formerly 009-0-135), Direct Temporary Housing Assistance Temporary Housing Agreement:** Used as the FEMA agreement with eligible applicants to occupy the THU they are provided. Applicants must also sign a lease agreement with the property owner. The form outlines the terms of occupancy, the necessity of the applicant to continue meeting FEMA's eligibility requirements and cooperate with FEMA representatives, and the terms of potential termination of Multi-Family Lease and Repair and Direct Lease assistance. The applicant acknowledges the agreement will automatically expire 18 months from the date of the President's declaration of a major disaster or emergency, or at the end of any extension to the 18-month period of assistance granted.
- e. FEMA Form FF-104-FY-21-195 (formerly 009-0-137), Commercial Park Unit Pad Requirements Information Checklist: Used to gather information from

potential park owners/managers on their available pads for placement of Transportable Temporary Housing Unit (TTHUs). The intention of this form is to emphasize the requirements important to FEMA, i.e., the ability to provide and maintain utility connections, to keep the premises in good repair, and to not discriminate against any of the applicants or prospective applicants referred by FEMA for occupancy. This form does not serve as a lease.

- f. **FEMA Form FF-104-FY-21-109 (formerly 010-0-9), Transportable Temporary Housing Unit Request for the Site Inspection:** Used to ensure the feasibility of potential sites to place a TTHU. It provides FEMA with the ability to determine whether the site will accommodate a TTHU, and will comply with Local, State, and Federal guidelines and regulations regarding the placement of the TTHU. The form documents that the necessary infrastructure required to support a TTHU is present, e.g., site utilities and the floodplain zone determination.
- g. FEMA Form FF-104-FY-21-110 (formerly 010-0-10), Transportable Temporary Housing Unit Landowner's Authorization Ingress-Egress Agreement; and FEMA Form FF-104-FY-21-110-A (formerly 010-0-10S), Autorización del Propietario/Acuerdo de Entrada y Salida: Used to ensure a landowner, if someone other than the applicant receiving the TTHU, will allow the TTHU to be placed on the property. This form verifies that routes of ingress and egress to and from the property are maintained, that necessary actions to make ingress and egress possible are documented for completion, indicates the amount of rent to be paid each month for use of the property, and states that the agreement will remain in force for 30 days following termination of occupancy of the temporary housing unit. This form is available in both English (FF-104-FY-21-110 (formerly 010-0-10)) and Spanish (FF-104-FY-21-110-A (formerly 010-0-10S)) since part of the form is completed by the landowner and applicant.
- h. **FEMA Form FF-104-FY-21-111 (formerly 009-0-138), Transportable Temporary Housing Unit Inspection Report:** Used to document the condition of the TTHU and its contents during each phase of direct temporary housing, e.g., the appliance information, and the condition of the interior and exterior furnishings. This form is intended to be used anytime a TTHU is transferred in the property transfer system of record, Housing Operations Management Enterprise System (HOMES), including delivery, installation, and move in/out with the applicant. The occupant signs and dates the form acknowledging the information captured when either moving in or moving out of the TTHU.

- i. FEMA Form FF-104-FY-21-112 (formerly 009-0-136), Transportable Temporary Housing Unit Installation Work Order: Used to track individual work orders against a contract for installing TTHUs. The form documents the site type and TTHU information, the details of the pad lot being used for the TTHU, the type of items to be furnished and installed, the cost, and the date of scheduled completion.
- j. FEMA Form FF-104-FY-21-113 (formerly 009-0-130), Transportable Temporary Housing Unit Maintenance Work Order: Used to collect the information necessary to initiate a work order for the purpose of performing maintenance on a TTHU. The form captures the type of work to be completed, the amount of time to complete the work, the contractor used, the cost, and which party will be charged for the work order, e.g., the manufacturer, contractor, occupant, etc.
- 3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses, and the basis for the decision for adopting this means of collection. Also describe any consideration of using information technology to reduce burden.

The forms are available for download and use by FEMA staff via the FEMA Intranet at https://usfema.sharepoint.com/sites/ORR/orr_programs/recovery_programs/
https://usfema.sharepoint.com/sites/ORR/orr_programs/recovery_programs/
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4. Describe efforts to identify duplication. Show specifically why any similar information already available cannot be used or modified for use for the purposes described in Item 2 above.

This Supporting Statement is being provided to support the revision of information collection 1660-0138 to include form revisions and the consolidation of collections 1660-0138 and 1660-0030 into one comprehensive collection. Both 1660-0138 and 1660-0030 contain forms utilized in support of providing direct temporary housing assistance under a Presidentially-declared disaster. Due to similar purposes of both collections, FEMA intends to combine both collections into one comprehensive collection under 1660-0138 for more efficient tracking and maintenance purposes. Upon approval of this ICR for

collection 1660-0138 to include the addition of the forms previously part of 1660-0030, 1660-0030 will be discontinued.

5. If the collection of information impacts small businesses or other small entities (Item 5 of OMB Form 83-I), describe any methods used to minimize.

Contracting Officers or Contracting Officer Representatives (CO/COR) may coordinate with the identified commercial parks to complete required documents, leases and other necessary forms. This coordination ensures that FEMA and any entity in question are coordinated in providing assistance to survivors during disaster recovery efforts. 6.

Describe the consequence to Federal/FEMA program or policy activities if the collection of information is not conducted, or is conducted less frequently as well as any technical or legal obstacles to reducing burden.

If the collection of this information did not occur, FEMA would not be able to provide direct temporary housing assistance to those affected by major disasters or emergencies as required in accordance with Title 44 CFR § 206.117 – Housing Assistance.

- 7. Explain any special circumstances that would cause an information collection to be conducted in a manner:
 - (a) Requiring respondents to report information to the agency more often than quarterly.

There is no requirement to report information more often than quarterly.

(b) Requiring respondents to prepare a written response to a collection of information in fewer than 30 days after receipt of it.

There is no requirement to provide a written response in fewer than 30 days.

(c) Requiring respondents to submit more than an original and two copies of any document.

There is no requirement for respondents to submit more than an original and two copies of any document(s).

(d) Requiring respondents to retain records, other than health, medical, government contract, grant-in-aid, or tax records for more than three years.

FEMA does not require respondents to retain records for more than three years.

(e) In connection with a statistical survey, that is not designed to produce valid and reliable results that can be generalized to the universe of study. There is no statistical survey involved with this information collection.

(f) Requiring the use of a statistical data classification that has not been reviewed and approved by OMB.

There is no use of statistical data classification involved with this information collection.

(g) That includes a pledge of confidentiality that is not supported by authority established in statute or regulation, that is not supported by disclosure and data security policies that are consistent with the pledge, or which unnecessarily impedes sharing of data with other agencies for compatible confidential use.

There is no pledge of confidentiality that is not supported by authority established in statute or regulation necessary for this information collection.

(h) Requiring respondents to submit proprietary trade secret, or other confidential information unless the agency can demonstrate that it has instituted procedures to protect the information's confidentiality to the extent permitted by law.

There is no requirement for respondents to submit proprietary trade secrets or other confidential information for this information collection.

8. Federal Register Notice:

a. Provide a copy and identify the date and page number of publication in the Federal Register of the agency's notice soliciting comments on the information collection prior to submission to OMB. Summarize public comments received in response to that notice and describe actions taken by the agency in response to these comments. Specifically address comments received on cost and hour burden.

A 60-day Federal Register Notice inviting public comments was published on October 13, 2021, at 86 FR 56979. **No comments were received.**

A 30-day Federal Register Notice inviting public comments was published on December 30, 2021 at 86 FR 74418. The public comment period is open until January 31, 2022.

b. Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported.

There are no consultations with persons outside the agency on this collection. The process of inspecting a site for placement of a THU is as simplified as possible to determine that the infrastructure is in place and that FEMA can place and remove the THUs.

c. Describe consultations with representatives of those from whom information is to be obtained or those who must compile records. Consultation should occur at least once every three years, even if the collection of information activities is the same as in prior periods. There may be circumstances that may preclude consultation in a specific situation. These circumstances should be explained.

Individuals are generally in direct contact with FEMA at the time of the site inspection and can provide any comments or concerns to the inspector. If the individual is not able to be at the site at the time of the inspection, the inspector leaves a card with contact information for any follow-up, if necessary. Questions or comments are specific to the individual's own unique inspection and are resolved directly with the individual. Also, when the individual is notified that there will be a unit assigned to them, any questions or comments received are resolved at that point.

9. Explain any decision to provide any payment or gift to respondents, other than remuneration of contractors or grantees.

FEMA does not provide any payments or gifts to respondents in exchange for a benefit sought.

10. Describe any assurance of confidentiality provided to respondents. Present the basis for the assurance in statute, regulation, or agency policy.

Ten draft Privacy Threshold Analyses (PTA's) were submitted to FEMA's Privacy Office on 8/23/2021. All forms, except for FEMA Form FF-104-FY-21-192 (formerly 009-0-131), Sales Calculation Worksheet, have a PTA. The forms in this collection are covered by DHS/FEMA/PIA-049 Individual Assistance Program (January 11, 2018) and DHS/FEMA – 008 Disaster Recovery Assistance Files, 78 Fed. Reg. 25,282 (April 30, 2013). In addition, as required by the Privacy Act, a Privacy Act Statement is provided with any form that asks respondents to provide personal information about themselves, which is then saved into a system of records.

11. Provide additional justification for any question of a sensitive nature (such as sexual behavior and attitudes, religious beliefs and other matters that are commonly considered private). This justification should include the reasons why the agency considers the questions necessary, the specific uses to be made of the information, the explanation to be given to persons from whom the information is requested, and any steps to be taken to obtain their consent.

There are no questions of a sensitive nature in this information collection.

- 12. Provide estimates of the hour burden of the collection of information. The statement should:
- a. Indicate the number of respondents, frequency of response, annual hour burden, and an explanation of how the burden was estimated for each collection instrument (separately list each instrument and describe information as requested). Unless directed to do so, agencies should not conduct special surveys to obtain information on which to base hour burden estimates. Consultation with a sample (fewer than 10) of potential respondents is desired. If the hour burden on respondents is expected to vary widely because of differences in activity, size, or complexity, show the range of estimated hour burden, and explain the reasons for the variance. Generally, estimates should not include burden hours for customary and usual business practices.

See response below under "b" (more than one form in this collection).

- b. If this request for approval covers more than one form, provide separate hour burden estimates for each form and aggregate the hour burdens in Item 13 of OMB Form 83-I.
 - It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-191 (formerly 009-0-129) (Ready for Occupancy Status).** Each individual will complete only one form and it is estimated that each form requires 20 minutes to complete. The total annual hour burden for this form is 5,000 x 20 minutes (0.3333 hour) = 1,667 hours.
 - It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-192 (formerly 009-0-131) (Sales Calculation Worksheet).** Each individual will complete only one form and it is estimated that each form requires 30 minutes to complete. The total annual hour burden for this form is 5,000 x 30 minutes (0.5 hour) = 2,500 hours.
 - It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-193 (formerly 009-0-134) (Direct Assistance Recertification Worksheet).** Each individual will complete only one form and it is estimated that each form requires 20 minutes to complete. The total annual hour burden for this form is 5,000 x 20 minutes (0.3333 hour) = 1,667 hours.
 - It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-194 (formerly 009-0-135) (Direct Temporary Housing Assistance Temporary Housing Agreement)**. Each individual will complete only one form and it is estimated that each form requires 15 minutes to complete. The total annual hour burden for this form is 5,000 x 15 minutes (0.25 hour) = 1,250 hours.

- It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-195 (formerly 009-0-137) (Unit Pad Requirements Information Checklist).** Each individual will complete only one form and it is estimated that each form requires 10 minutes to complete. The total annual hour burden for this form is 5,000 x 10 minutes (0.1667 hour) = 834 hours.
- It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-109** (formerly 010-0-9) (Request for the Site Inspection). Each individual will complete only one form and it is estimated that each form requires 10 minutes to complete. The total annual hour burden for this form is 5,000 x 10 minutes (0.1667 hour) = 834 hours.
- It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-110 (formerly 010-0-10) (Landowner's Authorization Ingress-Egress Agreement)** OR **FEMA Form FF-104-FY-21-110-A (formerly 010-0-10S) (Autorizacion del Propietario Acuerdo de Entrada y Salida).** Each individual will complete only one of these forms in their preferred language and it is estimated that the form requires 10 minutes to complete. The total annual hour burden for this form is 5,000 x 10 minutes (0.1667 hour) = 834 hours.
- It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-111 (formerly 009-0-138) (TTHU Inspection Report)**. Each individual will complete only one form and it is estimated that each form requires 10 minutes to complete. The total annual hour burden for this form is 5,000 x 10 minutes (0.1667 hour) = 834 hours.
- It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-112 (formerly 009-0-136) (TTHU Installation Work Order)**. Each individual will complete only one form and it is estimated that each form requires 10 minutes to complete. The total annual hour burden for this form is 5,000 x 10 minutes (0.1667 hour) = 834 hours.
- It is estimated that 5,000 individuals will complete **FEMA Form FF-104-FY-21-113 (formerly 009-0-130) (TTHU Maintenance Work Order).** Each individual will complete only one form and it is estimated that each form requires 10 minutes to complete. The total annual hour burden for this form is 5,000 x 10 minutes (0.1667 hour) = 834 hours.
- c. Provide an estimate of annualized cost to respondents for the hour burdens for collections of information, identifying and using appropriate wage rate categories. NOTE: The wage-rate category for each respondent must be multiplied by 1.4 and this total should be entered in the cell for "Avg. Hourly Wage Rate". The cost to the respondents of contracting out or paying outside parties for information collection activities should not be included here. Instead this cost should be included in Item 13.

| Estimated Annualized Burden Hours and Costs | | | | | | | | |
|--|---|---------------------------|---|----------------------------------|---|--|--------------------------------|---------------------------------------|
| Type of Respondent | Form Name / Form No. | No. of Respo ndents | No. of Response s per Respond ent | Total No. of Respons es | Avg. Burden per Response (in hours) | Total Annual Burden (in hours) | Avg. Hourly Wage Rate | Total Annual Respondent Cost |
| Businesses or Other For-Profit Entities | FF-104-FY-21- 191 (formerly 009-0-129) | 5,000 | 1 | 5,000 | 0.3333 | 1,667 | \$56.25 | \$93,769 |
| Individuals or Households | FF-104-FY-21- 192 (formerly 009-0-131) | 5,000 | 1 | 5,000 | 0.5 | 2,500 | \$39.25 | \$98,125 |
| Individuals or Households | FF-104-FY-21- 193 (formerly 009-0-134) | 5,000 | 1 | 5,000 | 0.3333 | 1,667 | \$39.25 | \$65,430 |
| Individuals or Households | FF-104-FY-21- 194 (formerly 009-0-135) | 5,000 | 1 | 5,000 | 0.25 | 1250 | \$39.25 | \$49,063 |
| Businesses or Other For-Profit Entities | FF-104-FY-21- 195 (formerly 009-0-137) | 5,000 | 1 | 5,000 | 0.1667 | 834 | \$56.25 | \$46,913 |
| Individuals or Households | FF-104-FY-21- 109 (formerly 010-0-9) | 5,000 | 1 | 5,000 | 0.1667 | 834 | \$39.25 | \$32,735 |
| Individuals or Households | FF-104-FY-21- 110 (formerly 010-0-10) / FF- 104-FY-21-110- A (formerly 010- 0-10S) | 5,000 | 1 | 5,000 | 0.1667 | 834 | \$39.25 | \$32,735 |
| Businesses or Other For-Profit Entities | FF-104-FY-21- 111 (formerly 009-0-138) | 5,000 | 1 | 5,000 | 0.1667 | 834 | \$56.25 | \$46,913 |
| Businesses or Other For-Profit Entities | FF-104-FY-21- 112 (formerly 009-0-136) | 5,000 | 1 | 5,000 | 0.1667 | 834 | \$56.25 | \$46,913 |
| Businesses or Other For-Profit Entities | FF-104-FY-21- 113 (formerly 009-0-130) | 5,000 | 1 | 5,000 | 0.1667 | 834 | \$56.25 | \$46,913 |
| Total | | 50,000 | | 50,000 | | 12,088 | | \$559,509 |

Instruction for Wage-rate category multiplier: Take each non-loaded "Avg. Hourly Wage Rate" from the BLS website table and multiply that number by 1.45. For

¹ Bureau of Labor Statistics, Employer Costs for Employee Compensation, Table 1. Available at https://www.bls.gov/news.release/archives/ecec 09162021.pdf. Accessed September 28, 2021. The wage

example, a non-loaded BLS table wage rate of \$42.51 would be multiplied by 1.45, and the entry for the "Avg. Hourly Wage Rate" would be \$61.64.

According to the U.S. Department of Labor, Bureau of Labor Statistics, the May 2020 Occupational Employment and Wage Estimates wage rate for All Occupations (SOC 00-0000) is \$27.07.² Including the wage rate multiplier of 1.45, the fully-loaded wage rate is \$39.25 per hour. Therefore, the annual burden hour cost for **Individuals and Households** is estimated to be \$278,086 (= \$39.25 x 7,085 hours).

The wage rate for Business and Financial Operations Occupations (SOC 13-0000) is \$38.79.³ Including the wage rate multiplier of 1.45, the fully-loaded wage rate is \$56.25 per hour. Therefore, the annual burden hour cost for **Business or Other For-Profit** is estimated to be \$281,419 (= $$56.25 \times 5,003$ hours, rounded down to match line-item calculations in previous table).

The total estimated annual burden hour cost to respondents is \$559,509 (= \$278,086 + \$281,419 + 4) due to rounding to the nearest dollar in the previous table).

13. Provide an estimate of the total annual cost burden to respondents or recordkeepers resulting from the collection of information. The cost of purchasing or contracting out information collection services should be a part of this cost burden estimate. (Do not include the cost of any hour burden shown in Items 12 and 14.)

The cost estimates should be split into two components:

a. Operation and Maintenance and purchase of services component. These estimates should take into account cost associated with generating, maintaining, and disclosing or providing information. Include descriptions of methods used to estimate major cost factors including system and technology acquisition, expected useful life of capital equipment, the discount rate(s), and the time period over which costs will be incurred.

There are no annual operation or maintenance costs associated with this collection.

multiplier is calculated by dividing total compensation for all workers of \$38.91 by wages and salaries for all workers of \$26.85 per hour yielding a benefits multiplier of approximately 1.45. Accessed on December 7, 2021.

² Bureau of Labor Statistics. Occupational Employment Survey May 2020, SOC 00-000 All Occupations: mean hourly wage \$27.07. Retrieved from https://www.bls.gov/oes/2020/may/oes_nat.htm. Accessed on Accessed on December 7, 2021.

³ Bureau of Labor Statistics. Occupational Employment Survey May 2020, SOC 13-000 Business and Financial Operations Occupations: mean hourly wage \$38.79. Retrieved from https://www.bls.gov/oes/2020/may/oes nat.htm. Accessed on December 7, 2021

b. Capital and Start-up-Cost should include, among other items, preparations for collecting information such as purchasing computers and software, monitoring sampling, drilling and testing equipment, and record storage facilities.

There are no annual capital or start-up costs associated with this collection.

| Annual Cost Burden to Respondents or Recordkeepers | | | | | | | | |
|--|--|--|--|--------------|--|--|--|--|
| Data Collection | *Annual Capital | *Annual Operations | Annual Non- | Total Annual | | | | |
| Activity/Instrument | Start-Up Cost | and Maintenance | Labor Cost | Cost to | | | | |
| | (investments in overhead, equipment, and other one-time expenditures | Costs (such as recordkeeping, technical/professional services, etc.) | (expenditures on training, travel, and other resources) | Respondents | | | | |
| [Form Name/#] | | | | | | | | |
| Total | \$0 | \$0 | \$0 | \$0 | | | | |

14. Provide estimates of annualized cost to the federal government. Also, provide a description of the method used to estimate cost, which should include quantification of hours, operational expenses (such as equipment, overhead, printing and support staff), and any other expense that would have been incurred without this collection of information. You may also aggregate cost estimates for Items 12, 13, and 14 in a single table.

| Annual Cost to the Federal Government | | | | | |
|---|--------------|--|--|--|--|
| Item | Cost (\$) | | | | |
| Contract Costs [Describe] | | | | | |
| Staff Salaries: 30 Band 2 (maximum rate) Disaster Assistance Reservist employees spending approximately 100% of time annually performing site inspections and approving sites for unit installation for the data collection. [\$41.62/hr x 2,080 hrs = \$86,570 x 1.45 =\$125,527 x 30 = \$3,765,810] | | | | | |
| 30 of IC-Grade Level 13 Step 5 Disaster Assistance Reservist employees spending approximately 100% of time annually performing site inspections and approving sites for unit installation for the data collection. [$$90,064 \times 1.45 = $130,593 \times 30 = $3,917,790$] | | | | | |
| \$3,765,810 + \$3,917,790 = \$7,683,600 | \$7,683,600 | | | | |
| Facilities [cost for renting, overhead, etc. for data collection activity] | N/A | | | | |
| Computer Hardware and Software \$6,120 [estimated annual cost for 30 FEMA workstations @ \$204] + \$9,180 [estimated annual | | | | | |
| cost for 45 contractor workstations @ \$204 = \$15,300] | \$15,300 | | | | |
| Equipment Maintenance [cost of annual maintenance/service agreements for equipment] | N/A | | | | |
| Travel - 30 airline tickets @ \$900 round trip x 6 = \$162,000; car rentals @ \$1000 per month x 30 x 6 = \$180,000; hotels 30 x 30 nights x 6 @ \$150 per night = \$810,000 [(+ travel for 45 | | | | | |
| contractors using the previous costs for FEMA employees) = \$243,000 for airline tickets, | | | | | |
| \$270,000 for car rentals, \$1,215,000 for hotels] \$162,000 + \$180,000 + \$810,000 + \$243,000 + \$270,000 + \$1,215,000 = \$2,880,000 | \$2,880,000 | | | | |
| Total | \$10,578,900 | | | | |

¹ Stafford Act Pay Band IM/IT 2021for Disaster Assistance Reservist employees wage rate.

15. Explain the reasons for any program changes or adjustments reported in Items 13 or 14 of the OMB Form 83-I in a narrative form. Present the itemized changes in hour burden and cost burden according to program changes or adjustments in Table 5. Denote a program increase as a positive number, and a program decrease as a negative number.

A "**Program increase**" is an additional burden resulting from an federal government regulatory action or directive. (e.g., an increase in sample size or coverage, amount of information, reporting frequency, or expanded use of an existing form). This also includes previously in-use and unapproved information collections discovered during the ICB process, or during the fiscal year, which will be in use during the next fiscal year.

A "**Program decrease**", is a reduction in burden because of: (1) the discontinuation of an information collection; or (2) a change in an existing information collection by a Federal agency (e.g., the use of sampling (or smaller samples), a decrease in the amount of information requested (fewer questions), or a decrease in reporting frequency).

² Stafford Act Pay Band IC 2021 for Disaster Assistance Reservist employees salary rate.

³ The Salary Rate and Wage Rate includes a 1.45 multiplier to reflect a fully-loaded Federal employee wage rate.

[&]quot;Adjustment" denotes a change in burden hours due to factors over which the government has no control, such as population growth, or in factors which do not affect what information the government collects or changes in the methods used to estimate burden or correction of errors in burden estimates.

| Itemized Changes in Annual Burden Hours | | | | | | | |
|---|---|----------------------------|----------------|---|---------------------|----------------|--|
| Data Collection Activity/Instrument | Program Change (hours currently on OMB Inventory) | Program Change (New) | Differenc e | Adjustment (hours currently on OMB Inventory) | Adjustment (New) | Differenc e | |
| FF-104-FY-21-191 | 7/ | | | , | | | |
| (formerly 009-0-129) | 1,667 | 1,667 | 0 | | | | |
| FF-104-FY-21-192 | | | | | | | |
| (formerly 009-0-131) | 2,500 | 2,500 | 0 | | | | |
| FF-104-FY-21-193 | | | | | | | |
| (formerly 009-0-134) | 1,667 | 1,667 | 0 | | | | |
| FF-104-FY-21-194 | | | | | | | |
| (formerly 009-0-135) | 1,250 | 1,250 | 0 | | | | |
| FF-104-FY-21-195 | | | | | | | |
| (formerly 009-0-137) | 834 | 834 | 0 | | | | |
| FF-104-FY-21-109 | | | | | | | |
| (formerly 010-0-9) | 0 | 834 | 834 | | | | |
| FF-104-FY-21-110 | | | | | | | |
| (formerly 010-0-10) / | | | | | | | |
| FF-104-FY-21-110-A | | | | | | | |
| (formerly 010-0-10S) | 0 | 834 | 834 | | | | |
| FF-104-FY-21-111 | | | | | | | |
| (formerly 009-0-138) | 0 | 834 | 834 | | | | |
| FF-104-FY-21-112 | | | | | | | |
| (formerly 009-0-136) | 0 | 834 | 834 | | | | |
| FF-104-FY-21-113 | | 05. | 05 : | | | | |
| (formerly 009-0-130) | 0 | 834 | 834 | | | | |
| | | | | | | | |
| Total | 7,918 | 12,088 | 4,170 | | | | |

Explain:

There is an increase in burden hours of **4,170** due to the consolidation of collections 1660-0138 and 1660-0030 into one comprehensive collection. Both 1660-0138 and 1660-0030 contain forms utilized in support of providing direct temporary housing assistance under a Presidentially-declared disaster. Due to similar purposes of both collections, FEMA intends to combine both collections into one comprehensive collection under 1660-0138 for more efficient tracking and maintenance purposes. Upon approval of this ICR for collection 1660-0138 to include the addition of the forms previously part of 1660-0030, 1660-0030 will be discontinued.

| Itemized Changes in Annual Cost Burden | | | | | | | |
|---|---|----------------------------|------------|--|---------------------|------------|--|
| Data Collection Activity/Instrument | Program Change (hours currently on OMB Inventory) | Program Change (New) | Difference | Adjustment (hours currently on OMB Inventory) | Adjustment (New) | Difference | |
| FF-104-FY-21-191 (formerly 009-0-129) | | | | \$87,834 | \$93,769 | \$5,935 | |
| FF-104-FY-21-192 (formerly 009-0-131) | | | | \$87,100 | \$98,125 | \$11,025 | |
| FF-104-FY-21-193 (formerly 009-0-134) | | | | \$58,078 | \$65,430 | \$7,352 | |
| FF-104-FY-21-194 (formerly 009-0-135) | | | | \$43,550 | \$49,063 | \$5,513 | |
| FF-104-FY-21-195 (formerly 009-0-137) | | | | \$43,891 | \$46,913 | \$3,022 | |
| FF-104-FY-21-109 (formerly 010-0-9) | | | | | \$32,735 | \$32,735 | |
| FF-104-FY-21-110 (formerly 010-0-10) / FF-104-FY-21-110-A (formerly 010-0-10S) | | | | | \$32,735 | \$32,735 | |
| FF-104-FY-21-111 (formerly 009-0-138) | | | | | \$46,913 | \$46,913 | |
| FF-104-FY-21-112 (formerly 009-0-136) | | | | | \$46,913 | \$46,913 | |
| FF-104-FY-21-113 (formerly 009-0-130) | | | | | \$46,913 | \$46,913 | |
| Total | | | | \$320,453 | \$559,509 | \$239,056 | |

Explain:

There is an increase in annual cost burden of \$239,056 due to the consolidation of collections 1660-0138 and 1660-0030 into one comprehensive collection, and due to the wage rate increases for All Occupations and Business and Financial Operations

Occupations according bls.gov. Both 1660-0138 and 1660-0030 contain forms utilized in support of providing direct temporary housing assistance under a Presidentially-declared disaster. Due to similar purposes of both collections, FEMA intends to combine both collections into one comprehensive collection under 1660-0138 for more efficient tracking and maintenance purposes. Upon approval of this ICR for collection 1660-0138 to include the addition of the forms previously part of 1660-0030, 1660-0030 will be discontinued.

16. For collections of information whose results will be published, outline plans for tabulation and publication. Address any complex analytical techniques that will be used. Provide the time schedule for the entire project, including beginning and ending dates of the collection of information, completion of report, publication dates, and other actions.

There are no outline plans for tabulation and publication of data for this information collection.

17. If seeking approval not to display the expiration date for OMB approval of the information collection, explain reasons that display would be inappropriate.

This collection does not seek approval to not display the expiration date for OMB approval.

18. Explain each exception to the certification statement identified in Item 19 "Certification for Paperwork Reduction Act Submissions," of OMB Form 83-I.

This collection does not seek exception to "Certification for Paperwork Reduction Act Submissions". This collection does not use efficient statistical survey methodology or use of information technology. Statistical Survey methodology "is not applicable."