**BUREAU OF CONSUMER FINANCIAL PROTECTION**

**Request for Approval under the**

**“GENERIC INFORMATION COLLECTION PLAN FOR THE COLLECTION OF QUALITATIVE FEEDBACK ON THE SERVICE DELIVERY OF THE CONSUMER FINANCIAL PROTECTION BUREAU”**

**(OMB Control Number: 3170-0024)**

## 1. TITLE OF INFORMATION COLLECTION: Howard Redress Claim Form

2. **PURPOSE**: This claim form relates to victim compensation in a Consumer Financial Protection Bureau (CFPB or Bureau) enforcement action. This is a voluntary means for harmed consumers to provide proof of the amount they paid to the defendant. Fees and amounts paid by victims to the defendant in this case are eligible for compensation from the Bureau’s Civil Penalty Fund.

The submission will include receipts, payment confirmations, and/or transaction statements specific to this case. This information will be used to identify eligible fees or payments to the defendant that will be refunded to these consumers. The defendant in this matter kept poor documentation and without this payment information, the Bureau would not be able to determine victim compensation amounts.

3. **DESCRIPTION OF RESPONDENTS**: Consumers who were charged and paid illegal up-front fees for debt collection services to Howard Law (the defendant in a CFPB matter).

4. **TYPE OF COLLECTION (Administration of the COLLECTION instrument)**:

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

[ ] Web-based or other forms of Social Media [X] Telephone

[ ] In-person [X] Mail

[ ] Small Discussion Group [ ] Focus Group [ X] Other (please explain) Victims will be provided a form via mailing and be able to upload forms on a case specific website.

1. Will interviewers or facilitators be used?

[]Yes [X] No [ ] Not Applicable

1. **Focus group or survey**:

If you plan to conduct a focus group or survey, please provide answers to the following questions:

a. 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?

[ ] Yes [ ] No [ X] Not Applicable

b. If **yes**, please provide a description below. If **no**, please provide a description of how you plan to identify your potential group of respondents and how you will select them.

1. **Information Collection Procedures**:

The Bureau has hired a third-party class action settlement administrator to support this project. An initial data set was provided to the Bureau by the defendant in accordance with the enforcement action/ consent order. Using this data, the vendor will mail a claim form to any potential harmed consumers.

Consumers will then review their receipts and/or bank statements to identify payments to the defendant. Those receipts will be submitted to the Bureau/ vendor via email, paper mail, and/or a case specific website.

Additionally, consumers needing assistance with the forms or submission process can communicate with the vendor through a toll-free number, email address, and/or mailing address.

1. **Personally Identifiable Information**:
2. Is personally identifiable information (PII) collected? [X] Yes [ ] No
3. If yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?

[X] Yes [ ] No [ ] Not Applicable

**If Yes, describe what PII will be collected and why it is needed and how it will be used.**

* For some consumers, we will collect new or updated names, and mailing address information. First & Last Name, Address (street, City, State, ZIP)
* This information is collected for mailing payments or claim forms to consumers.

1. Has a System or Records Notice (SORN) been published?

[ X] Yes [] No [ ] Not Applicable

If yes, list the SORN title and the *Federal Register* (FR) citation:

Title: **Civil Penalty Fund and Bureau-Administered Redress Program Records**

**78 FR 34991; 83 FR 23435**

1. If applicable, please provide a link to the Privacy Impact Assessment.

<https://files.consumerfinance.gov/f/201308_cfpb_civil-penalty-fund-and-bureau-administered-redress-program.pdf>

1. **INCENTIVES**:
2. Is an incentive provided to participants? [ ] Yes [X] No
3. If yes, provide a statement justifying the use and amount of the incentive ***and*** the amount or value of the incentive: $\_\_\_\_\_\_\_\_\_\_\_.
4. **Assurances of Confidentiality**:
5. Will a pledge of confidentiality be made to respondents? [ ] Yes [X] No
6. If yes, please cite the statue, regulation, or contractual terms supporting the pledge.
7. **JUSTIFICATION OF SENSITIVE QUESTIONS (if applicable)**:
8. **BURDEN HOURS**:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Collection of Information** | **Number of Respondents** | **Frequency** | **Number of Annual Responses** | **Average Response Time**  **(hours)** | **Burden**  **(hours)** |
| Claim Form | 7,300 | 1 | 7,300 | 0.5 | 3,650 |

12. **FEDERAL COST**: The estimated annual cost to the Federal government is $\_\_$30,616\_\_\_\_.

13. **CERTIFICATION**:

*CERTIFICATION PURSUANT TO 5 CFR 1320.9, AND THE RELATED PROVISIONS OF*

*5 CFR 1320.8(b)(3):*

By submitting this document, the Bureau certifies the following to be true:

(a) It is necessary for the proper performance of agency functions;

(b) It avoids unnecessary duplication;

(c) It uses plain, coherent, and unambiguous terminology that is understandable to respondents;

(d) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;

(e) It indicates the retention period for recordkeeping requirements;

(f) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):

(i) Why the information is being collected;

(ii) Use of information;

(iii) Burden estimate;

(iv) Nature of response (voluntary);

(v) Nature and extent of confidentiality; and

(vi) Need to display currently valid OMB control number;

(g) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected;

(h) It uses effective and efficient statistical survey methodology; and

(i) It makes appropriate use of information technology.

*CERTIFICATION FOR INFORMATION COLLECTIONS SUBMITTED UNDER A GENERIC INFORMATION COLLECTION PLAN*

By submitting this document, the Bureau certifies the following to be true:

* The collection is voluntary.
* The collection is low-burden for respondents.
* The collection is non-controversial and does not raise issues of concern to other Federal agencies.
* Information gathered will not be used for the purpose of substantially informing influential policy decisions.
* The collection is not statistically significant; the results are not intended to be generalizable beyond the survey population.
* The results will not be used to measure regulatory compliance or for program evaluation.