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:	3170-0	10241
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1.	TITLE O	F INFORMATION (COLLECTION: Certif	ied Forensic Loar	ı Auditors (CFLA)
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- 2. **PURPOSE**: The purpose of this request is to provide compensation from the civil penalty fund to harmed eligible victims in the CFPB vs. CFLA matter. For the CFLA matter, due to a lack of data, the victim population will need to be identified via a claims process. The claim form will be available via paper form, or online claim form. The key information being collected are: name, address, harm amount, and supporting documentation to validate the claim.
- 3. **DESCRIPTION OF RESPONDENTS**: Eligible victims are those who purchased Defendants' mortgage assistance relief services from July 1, 2014 to July 20, 2020

4. TYPE OF COLLECTION (ADMINISTRATION OF THE COLLECTION **INSTRUMENT)**:

5.

a. How will you collect the information? Check <u>all</u> that apply.					
[] In-person] Telephone] Mail] Focus Group l and web form				
b. Will interviewers or facilitators be used?					
[] Yes [X] No [] Not Applicable					
5. 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.

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Please summarize the procedures that will be used to collect data from respondents. Eligible victims will be mailed a claims worksheet and asked to submit documentation such as cancelled checks or receipts that show proof of payment. The worksheet will also be available in web form.

7.	PERSONALLY	IDENTIFIABLE	INFORMATION:
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- a. Is personally identifiable information (PII) collected? [X] Yes [] Nob. 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.

The information collection will include PII including names, mailing addresses, and other contact information including phone numbers and email addresses. It may also include social security numbers and personal financial information. All of this information will only be collected to the extent it is necessary for the Bureau to be able to confirm it is making payments to the correct victims in the correct amounts.

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	c. Has a System or Records Notice (SORN) been published?
	[X] Yes [] No [] Not Applicable
	If yes, list the SORN title and the <i>Federal Register</i> (FR) citation:
	Title: <u>CFPB.025 Civil Penalty and Bureau-Administered Redress Program Records</u>
	78 FR 34991; ; 83 FR 23435 .

d. If applicable, please provide a link to the Privacy Impact Assessment. Civil Penalty Fund and Bureau-Administered Redress Program PIA found here: https://files.consumerfinance.gov/f/201308_cfpb_civil-penalty-fund-and-bureau-administered-redress-program.pdf

8. INCENTIVES:

- **a.** Is an incentive provided to participants? [] Yes [X] No
- **b.** If yes, provide a statement justifying the use and amount of the incentive *and* the amount or value of the incentive: \$______.

9. ASSURANCES OF CONFIDENTIALITY:

- a. Will a pledge of confidentiality be made to respondents? [] Yes [X] No
- b. If yes, please cite the statue, regulation, or contractual terms supporting the pledge.

$10. \ \textbf{JUSTIFICATION OF SENSITIVE QUESTIONS (if applicable):}$

11. BURDEN HOURS:1

Collection of Information	Number of Respondents	Frequency	Number of Annual Responses	Average Response Time (hours)	Burden (hours)
Claim Form	2,100	One time	1	1	2100

12. **FEDERAL COST**: The estimated annual cost to the Federal government is \$__0___.

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 <u>not</u> 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.