



PRIVACY THRESHOLD ANALYSIS (PTA)

This form serves as the official determination by the DHS Privacy Office to identify the privacy compliance requirements for all Departmental uses of personally identifiable information (PII).

A Privacy Threshold Analysis (PTA) serves as the document used to identify information technology (IT) systems, information collections/forms, technologies, rulemakings, programs, information sharing arrangements, or pilot projects that involve PII and other activities that otherwise impact the privacy of individuals as determined by the Chief Privacy Officer, pursuant to Section 222 of the Homeland Security Act, and to assess whether there is a need for additional Privacy Compliance Documentation. A PTA includes a general description of the IT system, information collection, form, technology, rulemaking, program, pilot project, information sharing arrangement, or other Department activity and describes what PII is collected (and from whom) and how that information is used and managed.

Please complete the attached Privacy Threshold Analysis and submit it to your component Privacy Office. After review by your component Privacy Officer the PTA is sent to the Department's Senior Director for Privacy Compliance for action. If you do not have a component Privacy Office, please send the PTA to the DHS Privacy Office:

Senior Director, Privacy Compliance
The Privacy Office
U.S. Department of Homeland Security
Washington, DC 20528
Tel: 202-343-1717

PIA@hq.dhs.gov

Upon receipt from your component Privacy Office, the DHS Privacy Office will review this form and assess whether any privacy compliance documentation is required. If compliance documentation is required – such as Privacy Impact Assessment (PIA), System of Records Notice (SORN), Privacy Act Statement, or Computer Matching Agreement (CMA) – the DHS Privacy Office or component Privacy Office will send you a copy of the relevant compliance template to complete and return.



Privacy Threshold Analysis (PTA)

Specialized Template for Information Collections (IC) and Forms

The Forms-PTA is a specialized template for Information Collections and Forms. This specialized PTA must accompany all Information Collections submitted as part of the Paperwork Reduction Act process (any instrument for collection (form, survey, questionnaire, etc.) from ten or more members of the public). Components may use this PTA to assess internal, component-specific forms as well.

Form Number:	Form 010-0-7		
Form Title:	Resource Request Form		
Component:	Federal Emergency Management Agency (FEMA)	Office:	Response Directorate

IF COVERED BY THE PAPERWORK REDUCTION ACT:

Collection Title:	Resource Request Form and Mission Assignment Form – Collection #1660-0047		
OMB Control Number:	1660-0047	OMB Expiration Date:	February 28, 2021
Collection status:	Extension	Date of last PTA (if applicable):	August 29, 2017

PROJECT OR PROGRAM MANAGER

Name:	Wayne Truax		
Office:	Response Directorate/Operations Division/Crisis Management Section	Title:	Chief, Operations Capabilities Office
Phone:	202-368-8233	Email:	wayne.truax@fema.dhs.gov

COMPONENT INFORMATION COLLECTION/FORMS CONTACT



Name:	John Walls		
Office:	Response Directorate/Operations Division/Crisis Management Section	Title:	Program Specialist
Phone:	202-674-4936	Email:	john.wallsjr@fema.dhs.gov

SPECIFIC IC/Forms PTA QUESTIONS

1. Purpose of the Information Collection or Form

Describe the purpose of the information collection or form. *Please provide a general description of the project and its purpose, including how it supports the DHS mission, in a way a non-technical person could understand (you may use information from the Supporting Statement).*

The Federal Emergency Management Agency (FEMA) submits this PTA for the renewal of FEMA Form 010-0-7 Resource Request Form (RRF) as part of information collection 1660-0047. The form is used by states and other federal agencies (OFA) outside of FEMA to request FEMA disaster assistance, as well to define what disaster assistance it will provide in response to such a request. Although there are no changes to the form since the last adjudicated PTA, three data elements (title, organization, and fax number) are data fields in Form 010-0-7 that were not included in the last PTA.

Background

FEMA’s information collection 1660-0047 010-0-7, Resource Request Form (RRF), includes the form used by states and other federal agencies outside of FEMA to request FEMA disaster assistance, as well as the form that FEMA uses to define what disaster assistance it will provide in response to such a request. The information collected explains which State(s) require assistance, what needs to be accomplished, details any resource shortfalls, and explains what assistance is required to meet these needs.

When the States make a request for assistance to respond to a disaster, the form provides acknowledgement that the tasks are beyond the capability of the state to respond. This form documents the type of assistance required. FEMA uses this information to determine that the assistance requested is the result of a disaster, not a pre-existing condition and that the type of response is appropriate.

The RRF is part of the Mission Assignment (MA) Process. A MA is a work order that FEMA issues to another federal agency directing the completion of specific task. When FEMA obtains resources using an MA, a standard MA process is as followed. The MA process begins with the identification of a need for Federal assistance, and proceeds when the state, local, tribal, or territorial government submits the resource request to FEMA. FEMA will review the request, approve the request, and determine the appropriate course of action in order to meet the request. FEMA will approve the course of action, and finally complete the section III of the RRF. Once the information collected and manually inputted into WebEOC CMS, the form is reviewed, approved, and then processed through WebEOC CMS by either the Mission Assignment Team, contracting, OFA, for data review and to transfer data to the FEMA Form 010-0-8 MA.



Assistance requested provides a description of the work needed, location, and POC information. The person at the delivery site coordinating reception and utilization of the requested resources, 24-hour contact information required. The OFA is responsible for the execution of mission assignments, and the agency assigns an Action Officer as the lead for each mission assignment. A FEMA PM is assigned to a mission assignment and is responsible for coordinating with the Federal agency being tasked to prepare the statement of work, timelines, and the initial cost estimate.

Requestors seeking Federal assistance submit requests on the Resource Request Board in FEMA’s Web Emergency Operations Center Crisis Management System, (WebEOC CMS). The request board contains the automated version of the RRF (FF 010-0-7) to request Federal assistance during an incident, and the Resource Request Tracker. Paper copies of the RRF will be accepted in the event the WebEOC CMS system is not available, or if the requestor does not have access to the system.

FEMA collects limited PII on this form in order to identify the appropriate Points of Contact (POC) from the state, local, tribal, or territorial entity making the request for assistance, the delivery site, the other federal agency (OFA), and the FEMA project manager. The form is used to determine which State(s) require assistance, what needs to be accomplished, detail any resource shortfalls, and explain what assistance is required to meet these needs. When the States make a request for assistance to respond to a disaster, the form provides acknowledgement that the tasks are beyond the capability of the state to respond. This form documents the type of assistance required. FEMA uses this information to determine that the assistance requested is the result of a disaster, not a pre-existing condition and that the type of response is appropriate. A full list of data elements is listed in Section 2e.

- a. List the DHS (or component) authorities to collect, store, and use this information. *If this information will be stored and used by a specific DHS component, list the component-specific authorities.*

Under Section 653 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5121 et seq), FEMA is authorized to provide assistance to States based on needs before, during and after a disaster has impacted the state. Information collected explains which State(s) require assistance, what needs to be accomplished, details any resource shortfalls, and explains what assistance is required to meet these needs. Title 44 CFR Part 206.5 provides the mechanism by which FEMA collects the information necessary to determine what resources are needed and if a mission assignment is appropriate.

2. Describe the IC/Form

- | | |
|---|--|
| a. Does this form collect any Personally Identifiable Information” (PII ¹)? | <input checked="" type="checkbox"/> Yes
<input type="checkbox"/> No |
|---|--|

¹ Personally identifiable information means any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.



<p>b. From which type(s) of individuals does this form collect information? <i>(Check all that apply.)</i></p>	<p><input checked="" type="checkbox"/> Members of the public</p> <p style="padding-left: 20px;"><input checked="" type="checkbox"/> U.S. citizens or lawful permanent residents</p> <p style="padding-left: 20px;"><input type="checkbox"/> Non-U.S. Persons.</p> <p><input checked="" type="checkbox"/> DHS Employees</p> <p><input type="checkbox"/> DHS Contractors</p> <p><input checked="" type="checkbox"/> Other federal employees or contractors.</p>
<p>c. Who will complete and submit this form? <i>(Check all that apply.)</i></p>	<p><input checked="" type="checkbox"/> The record subject of the form (e.g., the individual applicant).</p> <p><input type="checkbox"/> Legal Representative (preparer, attorney, etc.).</p> <p><input type="checkbox"/> Business entity.</p> <p style="padding-left: 40px;">If a business entity, is the only information collected business contact information?</p> <p style="padding-left: 80px;"><input type="checkbox"/> Yes</p> <p style="padding-left: 80px;"><input type="checkbox"/> No</p> <p><input type="checkbox"/> Law enforcement.</p> <p><input type="checkbox"/> DHS employee or contractor.</p> <p><input checked="" type="checkbox"/> Other individual/entity/organization that is NOT the record subject. <i>Please describe.</i> State, local, tribal, or territorial government's points of contact completes this form.</p>
<p>d. How do individuals complete the form? <i>Check all that apply.</i></p>	<p><input checked="" type="checkbox"/> Paper.</p> <p><input checked="" type="checkbox"/> Electronic. (ex: fillable PDF)</p> <p><input checked="" type="checkbox"/> Online web form. (available and submitted via the internet)</p> <p><i>Provide link: WebEOC CMS https://femacms.WebEOC.CMS.us/eoc7/</i></p>
<p>e. What information will DHS collect on the form? <i>List all PII data elements on the form. If the form will collect information from more than one type of individual, please break down list of data elements collected by type of individual.</i></p>	
<p>The following work-related PII is collected from FEMA employees, Federal employees and contractors, and State, Local, Tribal, and Territorial employees on Form 010-0-7 (RRF):</p> <ul style="list-style-type: none"> Requestor (work-related PII) 	



- Name
- **Title**
- Phone Number
- **Organization**
- **Fax No.**
- E-mail Address

- Delivery Site POC (work-related PII)
 - Name
 - Phone Number/24-hour phone number
 - E-mail Address
 - Delivery Location
 - Street Address
 - City
 - State
 - Zip

- Other Federal Agency (OFA) Action Officer (work-related PII)
 - Name
 - Phone Number/24-hour phone number
 - E-mail Address

The following work-related PII is collected from FEMA employees on Form 010-0-7 (RRF):

- FEMA Project Manager (work-related PII)
 - Name
 - Phone Number/24-hour phone number
 - E-mail Address

f. Does this form collect Social Security number (SSN) or other element that is stand-alone Sensitive Personally Identifiable Information (SPII)? *Check all that apply.*

- | | |
|--|--|
| <input type="checkbox"/> Social Security number | <input type="checkbox"/> DHS Electronic Data Interchange |
| <input type="checkbox"/> Alien Number (A-Number) | Personal Identifier (EDIPI) |
| <input type="checkbox"/> Tax Identification Number | <input type="checkbox"/> Social Media Handle/ID |
| <input type="checkbox"/> Visa Number | <input type="checkbox"/> Known Traveler Number |
| <input type="checkbox"/> Passport Number | <input type="checkbox"/> Trusted Traveler Number (Global |
| <input type="checkbox"/> Bank Account, Credit Card, or other | Entry, Pre-Check, etc.) |
| financial account number | <input type="checkbox"/> Driver's License Number |
| <input type="checkbox"/> Other. <i>Please list:</i> | <input type="checkbox"/> Biometrics |

g. List the **specific authority** to collect SSN or these other SPII elements.



N/A	
h. How will this information be used? What is the purpose of the collection? Describe why this collection of SPII is the minimum amount of information necessary to accomplish the purpose of the program.	
N/A	
i. Are individuals provided notice at the time of collection by DHS (<i>Does the records subject have notice of the collection or is form filled out by third party</i>)?	<input checked="" type="checkbox"/> Yes. Please describe how notice is provided. A Privacy Notice is on the form that describes the reasons for collecting the individuals' PII. <input type="checkbox"/> No.

3. How will DHS store the IC/form responses?	
a. How will DHS store the original, completed IC/forms?	<input type="checkbox"/> Paper. Please describe. Click here to enter text. <input checked="" type="checkbox"/> Electronic. Please describe the IT system that will store the data from the form. FEMA Form 010-0-7 data is stored in WebEOC CMS https://femacms.WebEOC CMS.us/eoc7/ WebEOC CMS is a web-enabled, crisis information management system that acquires event response information and then shares it with Emergency Managers to help them make sound decisions quickly. The system is hosted on Amazon's Web Services public cloud environment and is operated by contractor personnel. The system is Personal Identification Verification (PIV) card-enabled. <input checked="" type="checkbox"/> Scanned forms (completed forms are scanned into an electronic repository). Please describe the electronic repository. Paper forms are used and scanned.. Once scanned into the WebEOC system, the paper copies are shred
b. If electronic, how does DHS input the	<input checked="" type="checkbox"/> Manually (data elements manually entered). Please describe.



<p>responses into the IT system?</p>	<p>The form data is manually entered into WebEOC CMS, which stores/manages all Mission Assignment-related information.</p> <p><input type="checkbox"/> Automatically. Please describe. Click here to enter text.</p>
<p>c. How would a user search the information submitted on the forms, <i>i.e.</i>, how is the information retrieved?</p>	<p><input checked="" type="checkbox"/> By a unique identifier.² <i>Please describe.</i> If information is retrieved by personal identifier, please submit a Privacy Act Statement with this PTA.</p> <p>The PII fields are searchable and can be retrieved in WebEOC CMS by Requester name, City, State, OFA Action Officer Name, and FEMA Project Manager Name.</p> <p><input type="checkbox"/> By a non-personal identifier. <i>Please describe.</i></p>
<p>d. What is the records retention schedule(s)? <i>Include the records schedule number.</i></p>	<p>EDP-2-1-1, Hardcopy or Analog Input/Source Records Previously Scheduled as Temporary, TEMPORARY. Destroy immediately after verification of successful conversion, but longer retention is authorized if required for business use.</p> <p>DAP-4-1, Public Assistance Files, TEMPORARY. Cut off when final audit and applicant appeals are resolved and completed. Retire to FRC 1 year after cutoff. Destroy 6 years 3 months after cutoff.</p>
<p>e. How do you ensure that records are disposed of or deleted in accordance with the retention schedule?</p>	<p>Records are manually destroyed in accordance with the Records Retention Schedules.</p>
<p>f. Is any of this information shared outside of the original program/office? <i>If yes, describe where (other offices or DHS components or external entities) and why. What are the authorities of the receiving party?</i></p>	
<p><input type="checkbox"/> Yes, information is shared with other DHS components or offices. Please describe.</p>	

² Generally, a unique identifier is considered any type of “personally identifiable information,” meaning any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.



- Yes, information is shared *external* to DHS with other federal agencies, state/local partners, international partners, or non-governmental entities. Please describe.
Yes, FEMA shares this form with the other federal agencies (OFA) that have a role in providing support and Department of Defense (DOD).
- No. Information on this form is not shared outside of the collecting office.



Please include a copy of the referenced form and Privacy Act Statement (if applicable) with this PTA upon submission.



PRIVACY THRESHOLD REVIEW

(TO BE COMPLETED BY COMPONENT PRIVACY OFFICE)

Component Privacy Office Reviewer:	Hasan Mansori
Date submitted to component Privacy Office:	July 29, 2020
Date submitted to DHS Privacy Office:	
Have you approved a Privacy Act Statement for this form? <i>(Only applicable if you have received a waiver from the DHS Chief Privacy Officer to approve component Privacy Act Statements.)</i>	<input checked="" type="checkbox"/> Yes. Please include it with this PTA submission. <input type="checkbox"/> No. Please describe why not. Click here to enter text.
<p>Component Privacy Office Recommendation:</p> <p>SORN:</p> <p>DHS/ALL – 002 – Department of Homeland Security (DHS) Mailing and Other Lists Systems, 73 Fed. Reg. 71,659 (November 25, 2008).</p> <p>DHS/ALL - 004 - General Information Technology Access Account Records System (GITAARS), 77 Fed. Reg. 70, 792 (November 27, 2012).</p> <p>DHS/FEMA-009 Hazard Mitigation Disaster Public Assistance and Disaster Loan Programs March 24, 2014 79 FR 16015</p> <p>These SORNS are necessary because eCAPS can be searched by personal identifier, but the record is not about an individual. The record is about the request for assistance from the state.</p> <p>PIA:</p> <p>DHS/ALL/PIA-006 Department of Homeland Security General Contact Lists</p> <p>DHS/FEMA/PIA-023 Enterprise Coordination and Approval Processing System (eCAPS) (May 21, 2012).</p> <p>DHS/FEMA/PIA-023 applies because the data collected is stored in eCAPS and the eCAPS PIA was specifically written to cover the use of these forms. This PIA will need to be updated to reflect the necessary SORN coverage.</p>	



PRIVACY THRESHOLD ADJUDICATION

(TO BE COMPLETED BY THE DHS PRIVACY OFFICE)

DHS Privacy Office Reviewer:	Joseph Thomas (Sr. Analyst Hannah Burgess)
PCTS Workflow Number:	Click here to enter text.
Date approved by DHS Privacy Office:	October 2, 2020
PTA Expiration Date	October 2, 2023

DESIGNATION

Privacy Sensitive IC or Form:	Yes If “no” PTA adjudication is complete.
Determination:	<input type="checkbox"/> PTA sufficient at this time. <input type="checkbox"/> Privacy compliance documentation determination in progress. <input type="checkbox"/> New information sharing arrangement is required. <input type="checkbox"/> DHS Policy for Computer-Readable Extracts Containing SPII applies. <input checked="" type="checkbox"/> Privacy Act Statement required. <input checked="" type="checkbox"/> Privacy Impact Assessment (PIA) required. <input checked="" type="checkbox"/> System of Records Notice (SORN) required. <input type="checkbox"/> Specialized training required. <input type="checkbox"/> Other. Click here to enter text.
DHS IC/Forms Review:	Choose an item.
Date IC/Form Approved by PRIV:	Click here to enter a date.
IC/Form PCTS Number:	Click here to enter text.
Privacy Act Statement:	Choose an item. Click here to enter text.
PTA:	Choose an item. Click here to enter text.
PIA:	PIA update is required.



	<p>If covered by existing PIA, please list: DHS/ALL/PIA-006 Department of Homeland Security General Contact Lists</p> <p>If a PIA update is required, please list: DHS/FEMA/PIA-023 Enterprise Coordination and Approval Processing System (eCAPS) (May 21, 2012).</p>
<p>SORN:</p>	<p>System covered by existing SORN</p> <p>If covered by existing SORN, please list: DHS/ALL-002 Department of Homeland Security (DHS) Mailing and Other Lists System November 25, 2008, 73 FR 71659; DHS/ALL-004 General Information Technology Access Account Records System (GITAARS) November 27, 2012, 77 FR 70792; DHS/FEMA-009 Hazard Mitigation Disaster Public Assistance and Disaster Loan Programs March 24, 2014 79 FR 16015</p> <p>If a SORN update is required, please list: Click here to enter text.</p>
<p>DHS Privacy Office Comments: <i>Please describe rationale for privacy compliance determination above.</i></p>	
<p>FEMA is submitting this renewal PTA to discuss form 010-0-07, Resource Request Form (RRF), a sub-form to FEMA’s Form 010-0-08, which is used by states and other federal agencies outside of FEMA to request FEMA disaster assistance, and is also used by FEMA to define what disaster assistance it will provide in response to such a request. The information collected explains what needs to be accomplished, details resource shortfalls, and explains what assistance is required.</p> <p>FEMA collects limited PII on this form in order to identify the appropriate points of contact from the entity making the request for assistance, the delivery site, the other federal agency, and the FEMA project manager.</p> <p>All PII elicited by Form 010-0-07 is manually entered into FEMA’s Enterprise Coordination and Approval Processing System (eCAPS), which is a FEMA intranet application that supports the initiation, tracking, financing, coordination and management of direct aid and technical assistance to disaster sites.</p> <p>The DHS Privacy Office agrees that Form 010-0-07 is privacy sensitive because it collects PII from disaster management contacts. The DHS Privacy Office also agrees that PIA coverage for Form 010-0-07 is provided by DHS/FEMA/PIA-023 Enterprise Coordination and Approval Processing System (eCAPS), however this PIA will need to be updated to reflect necessary SORN coverage. Additionally, the DHS Privacy Office finds that Form 010-0-07 is also covered by DHS/ALL/PIA-006 Department of Homeland Security General Contact Lists</p>	



because the form collects contact information in order to distribute information and perform administrative tasks.

PRIV further agrees that **SORN coverage is required** because information is retrieved within eCAPS by personal identifiers. Coverage is provided by DHS/FEMA-009 Hazard Mitigation Disaster Public Assistance and Disaster Loan Programs, which covers information collected in order to administer disaster grants and loan programs. Coverage is also provided by DHS/ALL-002 DHS Mailing and Other Lists System, which covers the collection of information in order to create mailing or contact lists, and by DHS/ALL-004 General Information Technology Access Account Records, which covers the collection of information in order to provide authorized individuals access to and interaction with DHS information technology resources, and enables DHS to maintain lists of individuals who are appropriate organizational points of contact.

PRIV acknowledges that the forms have been amended since the last PTA adjudication to include appropriate Privacy Act statements and thanks FEMA for their compliance.