

**Request for Approval under the “Generic Clearance for the Collection of
Routine Customer Feedback” (OMB Control Number: 1505-0231)**

TITLE OF INFORMATION COLLECTION:

Survey for the Collection of Qualitative Feedback on the Emergency Capital Investment Program and Office of Capital Access Programs Service and Delivery.

PURPOSE:

The Department of the Treasury, Emergency Capital Investment Program and the Office of Capital Access Programs are conducting a five-question survey to gather recipient feedback on Treasury customer service.

DESCRIPTION OF RESPONDENTS:

Respondents will be participants in the following programs who submit compliance reports:

- The Coronavirus State and Local Fiscal Recovery Funds (SLFRF)
- The Emergency Capital Investment Program (ECIP)
- The Local Assistance and Tribal Consistency Fund (LATCF)
- The State Small Business Credit Initiative (SSBCI)
- The Emergency Rental Assistance Program (ERA)

TYPE OF COLLECTION: (Check one)

- Customer Comment Card/Complaint Form Customer Satisfaction
 Usability Testing (e.g., Website or Software) Small Discussion Group
 Focus Group Other: _____

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

David Meyer

To assist review, please provide answers to the following question:

Personally Identifiable Information:

- 1. Is personally identifiable information (PII) collected? Yes No
- 2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? Yes No N/A
- 3. If Yes, has an up-to-date System of Records Notice (SORN) been published? Yes No N/A

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? Yes No

BURDEN HOURS

| Category of Respondent | No. of Respondents | Participation Time | Burden Hours |
|---|--------------------|--------------------|--------------|
| The Coronavirus State and Local Fiscal Recovery Funds (SLFRF) | 31,395 | 5 minutes | 2,616 |
| The Local Assistance and Tribal Consistency Fund (LATCF) | 2,664 | 5 minutes | 222 |
| The Emergency Capital Investment Program (ECIP) | 175 | 5 minutes | 14 |
| The State Small Business Credit Initiative (SSBCI) | 100 | 5 minutes | 8 |
| The Emergency Rental Assistance Program (ERA) | 378 | 5 minutes | 32 |
| Totals | 34,712 | 5 minutes | 2,893 |

FEDERAL COST: The estimated annual cost to the Federal government is \$15,728.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

- 1. 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

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

Program recipients will be offered the opportunity to submit the survey when submitting compliance reports.

Administration of the Instrument

1. How will you collect the information? (Check all that apply) Web-based or other forms of Social Media
 Telephone
 In-person
 Mail
 Other, Explain
2. Will interviewers or facilitators be used? Yes No

Please make sure that all instruments, instructions, and scripts are submitted with the request.

Survey Instrument (Screenshot below)

Five standard questions. Only the italicized text will change.

1. Overall, how effective is the *Emergency Capital Investment Program*?
2. How satisfied are you with Treasury's administration of the *Emergency Capital Investment Program*?
3. What can we do to improve Treasury's administration of the *Emergency Capital Investment Program*?
4. How was your overall experience using the Treasury's Portal for *Emergency Capital Investment Program*?
5. Do you have any additional suggestions or feedback?



Emergency Capital Investment Program Compliance Report Survey

Thank you for submitting your ECIP compliance report. We invite you to take a brief survey to assist us in improving the administration of the ECIP program. Your participation is voluntary, and we appreciate your feedback.

1. Overall, how effective is the ECIP?



Provide comments (optional)

2. How satisfied are you with Treasury's administration of the ECIP?



Provide comments (optional)

3. What can we do to improve Treasury's administration of the ECIP?

Provide comments (optional)

4. How was your overall experience using the Treasury's portal for the ECIP?



Provide comments (optional)

Submit Survey

Cancel

Paperwork Reduction Act Notice

OMB Approval No. Pending Approval
Expiration Date: Pending Approval

The estimated burden associated with this collection of information is 1 hour per response. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Office of Privacy, Transparency and Records, Department of the Treasury, 1500 Pennsylvania Ave., N.W., Washington, D.C. 20220. DO NOT send the form to this address. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid control number assigned by OMB.