Request for Approval under the "Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery"

(OMB Control Number: 2030-0051; EPA ICR Number: 2434.233)

TITLE OF INFORMATION COLLECTION: Office of Administrative Law Judges Alternative Dispute Resolution Process User Survey

PURPOSE: The Office of Administrative Law Judges seeks to gauge the satisfaction of ADR participants and solicit their comments and suggestions to improve the ADR process.

DESCRIPTION OF RESPONDENTS: Respondents will be those who participate in the alternative dispute resolution process offered by the Office of Administrative Law Judges. Respondents will be a mix of private citizens, local, state, tribal and federal government representatives; and industry representatives.

TYPE OF COLLECTION: (Check one)	
[] Customer Comment Card/Complaint For [] Usability Testing (e.g., Website or Softwa [] Focus Group	
To assist review, please provide answers to	the following question:
Personally Identifiable Information: 1. Is personally identifiable information (F	PII) collected? [X] Yes [] No
If Yes, will any information that is collected of 1974?Yes [X] No	cted be included in records that are subject to the Privacy Act
3. If Yes, has an up-to-date System of Rec	ords Notice (SORN) been published? [] Yes [] No
Gifts or Payments:	
Is an incentive (e.g., money or reimbursem participants? [] Yes [X] No	ent of expenses, token of appreciation) provided to

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Individuals or Households	10	5 minutes	50 minutes
Totals	10	5 minutes	.83 hours

FEDERAL COST: The estimated annual cost to the Federal government is: 0.415 hours x \$74.66 = \$30.98 GS-13 Step 4 non-locality rate of \$46.66 x 1.6.

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 [X] 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?

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
	[X] Mail
	[X] Other (We intend to distribute the survey using email.)

2. Will interviewers or facilitators be used? [] Yes [X] No

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

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 <u>not</u> raise issues of concern to other federal agencies.
- 4. The results are <u>not</u> intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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.

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