OMB Control Number: 2127-0756

Expiration Date:

STUDY: Research on Drivers' Use of Camera-Based Systems Versus Original Equipment Outside Rearview Mirrors STERLING IRB ID: 10451-EMazzae

DATE APPROVED BY STERLING IRB: 04/22/2025

Under the Paperwork Reduction Act, a Federal agency may not conduct or sponsor, and a person is not required to respond to a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control number. The OMB Control Number for this information collection is 2127-0756 (expiration date: MM/DD/YYYY). The National Highway Traffic Safety Administration (NHTSA) has proposed to perform research involving the collection of information from the public as part of a multi-year effort to learn about drivers' use of camera-based rear visibility systems as compared to their use of traditional vehicle outside mirrors. This research will support NHTSA in evaluating whether to pursue a regulation modification that would permit technologies other than mirrors, such as camera-based visibility systems (sometimes referred to as camera monitor systems (CMS)), for compliance with FMVSS No. 111. The average amount of time to complete the survey is 7 minutes. All responses to this collection of information are voluntary. If you have comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden send them to Information Collection Clearance Officer, National Highway Traffic Safety Administration, 1200 New Jersey Ave, S.E., Washington, DC, 20590.

The following questions will help us determine your eligibility for study participation.

Questions will cover: (1) personal information, (2) driving experience, and (3) health issues that may impact driving ability.

Note that we (NHTSA and TRC Inc.) will not release any personal identifying information or health information that you provide. The information gathered will be kept confidential and stored in a password-protected database on a protected computer. Response to health-related questions will be not be stored; only a yes or no indication of whether you have a condition that does not meet study criteria will be retained. Any retained personal information will be deleted at the end of the study. While each of the following questions is required for determining eligibility, completing the survey is completely voluntary. You do not have to answer any question that you do not want to answer and can stop at any time.

- 1. Are you able to read, write, speak, and understand English without assistance?
 - a. Yes
 - b. No
- 2. Do you have normal or corrected-to-normal vision in both eyes?
 - a. Yes
 - b. No
 - c. My vision is not normal or corrected

If yes,

- 2a. Do you wear glasses or contacts?
 - a. Yes
 - b. No
- 2b. Do you wear glasses to drive?
 - a. Yes
 - b. No
- 2c. If you wear glasses or contacts, do you use multi-focal lenses (i.e. bifocals, trifocals,

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		on Drivers' Use of 10451-EMazzae	Camera-Based Sys	tems Versus Origin	ial Equipment Out	side Rearview Mirrors
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		gressive lenses, e		411	: (-l+l	
		If you wear glass sunlight?	ses or contacts, do	they have transit	ion (photochron	nic) lenses that darken
	111 3	a. Ye	nc.			
		b. No				
3.	Do wou l		, corrected-to-nor	mal haaring in b	ooth opro?	
٥.	a. Y		corrected-to-nor	mai nearing in t	our ears:	
	а. 1 b. N					
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4.	=		automatic transn	iissioii witiiout	assistive device	25 01
	a. Y	quipment?				
г	b. N	-	v of the following	ag madical icay	o that marrima	angt violen
5.	•	•	y of the following sly for a 3-hour	_	es mat may mp	act your
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	Atten	tion-Deficit/Hy _l	peractivity Disor	der (ADHD) or	anxiety	
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	b. N	0				
6.			sehold work for	or is anyone ret	ired from an au	itomotive
	manufact					
	a. Y					
	b. N				_	
7.	-	-	ortation Researc	h Center (TRC)	employee?	
	c. Y					
	d. N					
8.	-	-	al convictions ir	the past 3 year	s?	
	a. Y					
	b. N					
9.	, , , , , , , , , , , , , , , , , , ,	-	ave no more tha	-	•	
	your Driv	er license numb	er so that your o	lriving record st	atus can be con	ıfirmed:
	_				_	
10.	What is y	our height in fe	et and inches? _			
11.	Availabil	ity for participat	tion:			
				av for participat	tion?	
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11.	a. D		eferred time of d Afternoon	ay for participat Evening □	tion? Any Time	

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Expiration Date:

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Thank you! Please submit your answers now.

Submit

b. No