

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0690-0030)

TITLE OF INFORMATION COLLECTION: OSPO User Services Intake Form

PURPOSE: This form will allow OSPO to collect details regarding our user base to better understand who uses OSPO data, which products are used and how, and to serve as an intake form for user comments and questions. OSPO intends to host the survey on TouchPoints online, and a link to the survey will be available on the OSPO webpage.

The [Office of Satellite Products and Operations \(OSPO\)](#) collects, processes, and distributes environmental satellite data and products about Earth's weather, atmosphere, oceans, and land, plus the conditions in space, to data users, 24/7. OSPO consists of four divisions: [Fairbanks Command and Data Acquisition Station \(FCDAS\)](#), Satellite Products and Services Division (SPSD), [Wallops Command and Data Acquisition Station \(WCDAS\)](#), and Mission Operations Division (MOD).

It supports the launch, activation, and evaluation of new satellites and the in-depth assessment of satellite and ground systems anomalies. It prepares plans and procedures for responding to satellite and ground anomalies and establishes and coordinates the schedules for satellite operation and data acquisition to meet users' needs. The office also evaluates the technical performance of the satellites and maintains current information and future predictions on satellite orbits and attitudes. It evaluates the effectiveness of the operational facilities and procedures in terms of the quality, quantity, coverage, and timeliness of the data acquired.

DESCRIPTION OF RESPONDENTS: Open to the public: includes American citizens and foreign users ranging in experience and use from casual recreational users to private businesses.

TYPE OF COLLECTION: (Check one)

- | | |
|--|---|
| ☒ Customer Comment Card/Complaint Form | ☐ Customer Satisfaction Survey |
| ☐ 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.

Name: _____Jessica Shallcross_____

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
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? ☒ Yes ☐ No

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
Individuals & Households	10	5 minutes	0.8
Private Sector	50	5 minutes	4.2
State, local, or tribal governments	50	5 minutes	4.2
Totals	110		9.2

FEDERAL COST: The estimated annual cost to the Federal government is __\$1,288____
The cost was calculated using the Rest of U.S. locality rate for a ZA-2 at 1% effort.

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

This collection does not involve focus groups, surveys, or plans to employ statistical methods.

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 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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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

Required Additional Information

1. Line of Business: Environmental Management
2. Subfunction: Environmental Monitoring & Forecasting
3. Privacy Act System of Records: COMMERCE/NOAA-11
4. Federal Registration citation information: 80 FR 72948
5. Number of respondents for small entities: 0
6. Percentage of respondents reporting electronically: 100

Please submit all instruments, instructions, correspondences (emails, letters, etc.) to respondents, and scripts as separate documents along with this request document. Every instrument must have the following displayed –

OMB Control No. 0690-0030

Expiration Date: 07/31/2026