

**U.S. DEPARTMENT OF  
HOUSING AND URBAN DEVELOPMENT**

**PRIVACY THRESHOLD ANALYSIS (PTA)**

**Section 184 and 184-A Loan Guarantee  
Program**

**Public and Indian Housing,  
Office of Native American Programs.  
Office of Loan Guarantee**

**Instruction & Template**

**August 28, 2017**

## **PRIVACY THRESHOLD ANALYSIS (PTA)**

The PTA is a compliance form developed by the Privacy Branch to identify the use of Personally Identifiable Information (PII) across the Department. The PTA is the first step in the PII verification process, which focuses on these areas of inquiry:

- Purpose for the information,
- Type of information,
- Sensitivity of the information,
- Use of the information,
- And the risk to the information.

Please use the attached form to determine whether a Privacy Impact Assessment (PIA) is required under the E-Government Act of 2002 or a System of Record Notice (SORN) is required under the Privacy Act of 1974, as amended.

Please complete this form and send it to your program Privacy Liaison Officer (PLO). If you have no program Privacy Liaison Officer, please send the PTA to the HUD Privacy Branch:

Marcus Smallwood, Acting, Chief Privacy Officer  
Privacy Branch  
U.S. Department of Housing and Urban Development

[privacy@hud.gov](mailto:privacy@hud.gov)

Upon receipt from your program PLO, the HUD Privacy Branch will review this form. If a PIA or SORN is required, the HUD Privacy Branch will send you a copy of the PIA and SORN templates to complete and return.

## PRIVACY THRESHOLD ANALYSIS (PTA)

### SUMMARY INFORMATION

|                                    |                                              |                                             |                             |
|------------------------------------|----------------------------------------------|---------------------------------------------|-----------------------------|
| <b>Project or Program Name:</b>    | Section 184 and 184-A Loan Guarantee Program |                                             |                             |
| <b>Program:</b>                    | Public and Indian Housing (PIH)              |                                             |                             |
| <b>CSAM Name (if applicable):</b>  | Click here to enter text.                    | <b>CSAM Number (if applicable):</b>         | Click here to enter text.   |
| <b>Type of Project or Program:</b> | Form or other Information Collection         | <b>Project or program status:</b>           | Existing                    |
| <b>Date first developed:</b>       | January 1, 1995                              | <b>Pilot launch date:</b>                   | July 1, 1995                |
| <b>Date of last PTA update:</b>    | January 6, 2014                              | <b>Pilot end date:</b>                      | October 1, 1996             |
| <b>ATO Status (if applicable)</b>  | Choose an item.                              | <b>ATO expiration date (if applicable):</b> | Click here to enter a date. |

### PROJECT OR PROGRAM MANAGER

|                |                          |               |                         |
|----------------|--------------------------|---------------|-------------------------|
| <b>Name:</b>   | Thomas Wright            |               |                         |
| <b>Office:</b> | Office of Loan Guarantee | <b>Title:</b> | Director                |
| <b>Phone:</b>  | 202-402-4978             | <b>Email:</b> | Thomas.c.wright@hud.gov |

### INFORMATION SYSTEM SECURITY OFFICER (ISSO) (IF APPLICABLE)

|               |                |               |                          |
|---------------|----------------|---------------|--------------------------|
| <b>Name:</b>  | Michael Thorpe |               |                          |
| <b>Phone:</b> | 202-402-2402   | <b>Email:</b> | Michael.t.thorpe@hud.gov |

## SPECIFIC PTA QUESTIONS

### 1. Reason for submitting the PTA: Renewal PTA

*Please provide a general description of the project and its purpose so a non-technical person could understand. If this is an updated PTA, please describe what changes and/or upgrades triggering the update to this PTA. If this is a renewal please state whether there were any changes to the project, program, or system since the last version.*

Information collected determines if the Office of Loan Guarantee, within PIH's Office of Native American Programs (ONAP), will guarantee loans and mortgage insurance made by private lenders to eligible Native American and native Hawaiian borrowers.

ONAP is developing a system called the Loan Origination System (ONAP-LOS) to support the Section 184 Indian Home Loan Guarantee Program. The ONAP-LOS system will deliver automated processes for case registration, reservation of funds, issuance of loan guarantee certificates, and lender registration and re-certification. This system will capture and maintain data across the following major information categories: lenders, borrowers, properties, and loan. ONAP-LOS will provide participating lender partners with clarity and transparency around the ONAP enforcement efforts and it will expand access to credit for eligible borrowers.

ONAP operates the Section 184-A program for eligible native Hawaiians. The program is designed to offer home ownership, property rehabilitation, and new construction opportunities for eligible native Hawaiian individuals and families wanting to own a home on Hawaiian home lands. The Hawaiian Homelands Homeownership Act of 2000 added a new Section 184-A to the Housing and Community Development Act of 1992 which authorized the Native Hawaiian Housing Loan Guarantee Program. The Paperwork Reduction Act package includes all forms required for the Section 184-A program. The ONAP-LOS is not designed to process Section 184-A forms because of the small volume of loan guarantees; therefore, the Section 184-A program will continue to rely on paper forms.

### 2. Does this system employ the following technologies?

*If you are using these technologies and want coverage under the respective PIA for that technology, please stop here and contact the HUD Privacy Branch for further guidance.*

- ☐ Social Media
- ☒ Web portal<sup>2</sup> (e.g., SharePoint)
- ☐ Contact Lists
- ☐ Public website (e.g. A website operated by

<sup>2</sup> Informational and collaboration-based portals in operation at HUD and its programs that collect, use, maintain, and share limited personally identifiable information (PII) about individuals who are "members" of the portal or "potential members" who seek to gain access to the portal.

|  |                                                                                                       |
|--|-------------------------------------------------------------------------------------------------------|
|  | HUD, contractor, or other organization on behalf of the HUD<br><input type="checkbox"/> None of these |
|--|-------------------------------------------------------------------------------------------------------|

|                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3. From whom does the Project or Program collect, maintain, use, or disseminate information?</b><br><i>Please check all that apply.</i> | <input type="checkbox"/> This program collects no personally identifiable information <sup>3</sup><br><input checked="" type="checkbox"/> Members of the public<br><input type="checkbox"/> HUD employees/contractors (list programs):<br><input type="checkbox"/> Contractors working on behalf of HUD<br><input type="checkbox"/> Employees of other federal agencies<br><input type="checkbox"/> Other (e.g. business entity) |
|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| 4. What specific information about individuals is collected, generated or retained?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><i>Please provide a specific description of information collected, generated, or retained (such as full names, maiden name, mother's maiden name, alias, social security number, passport number, driver's license number, taxpayer identification number, patient identification number, financial account, credit card number, street, internet protocol, media access control, telephone number, mobile number, business number, photograph image, x-rays, fingerprints, biometric image, template data (e.g. retain scan, well-defined group of people), vehicle registration number, title number and information about an individual that is linked or linkable to one of the above (e.g. date of birth, place of birth, race, religion, weight, activities, geographical indicators, employment information, medical information, education information, financial information) and etc.</i></p> <p>For the general public, the data collected is normal and customary for the completion for the processing of a mortgage application. This data includes: date of birth, Social Security Number, address, income statements, debt statements, and credit reports for all borrowers.</p> <p>For the government employees and lender employees, ONAP collects the date of birth, Social Security Number, and mother's maiden name to establish login accounts as per the requirement of user requested information as mandated by login requirements.</p> |                                                                                                                                                               |
| <b>4(a) Does the project, program, or system retrieve information from the system about a U.S. Citizen or lawfully admitted</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> No. Please continue to next question.<br><input type="checkbox"/> Yes. If yes, please list all personal identifiers used: |

<sup>32</sup> HUD defines personal information as "Personally Identifiable Information" or PII, which is any information that permits the identity of an individual to be directly or indirectly inferred, including any information that 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. "Sensitive PII" is PII, which if lost, compromised, or disclosed without authorization, could result in substantial harm, embarrassment, inconvenience, or unfairness to an individual. For the purposes of this PTA, SPII and PII are treated the same.

|                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>permanent resident aliens by a personal identifier?</b>                                                                                                                                                                    |                                                                                                                                                                                                                                                                                               |
| <b>4(b) Does the project, program, or system have an existing System of Records Notice (SORN) that has already been published in the Federal Register that covers the information collected?</b>                              | <input checked="" type="checkbox"/> No. Please continue to next question.<br><input type="checkbox"/> Yes. If yes, provide the system name and number, and the Federal Register citation(s) for the most recent complete notice and any subsequent notices reflecting amendment to the system |
| <b>4(c) Has the project, program, or system undergone any significant changes since the SORN?</b>                                                                                                                             | <input checked="" type="checkbox"/> No. Please continue to next question.<br><input type="checkbox"/> Yes. If yes, please describe.                                                                                                                                                           |
| <b>4(d) Does the project, program, or system use Social Security Numbers (SSN)?</b>                                                                                                                                           | <input type="checkbox"/> No.<br><input checked="" type="checkbox"/> Yes.                                                                                                                                                                                                                      |
| <b>4(e) If yes, please provide the specific legal authority and purpose for the collection of SSNs:</b>                                                                                                                       | This information collection SSNs is required by Section 184 of the Housing and Community Development Act of 1992 as amended by Section 701 of the Native American Housing Assistance and Self-Determination Act of 1996.                                                                      |
| <b>4(f) If yes, please describe the uses of the SSNs within the project, program, or system:</b>                                                                                                                              | ONAP uses the SSNs to determine a borrower's credit worthiness and ability to pay for a home loan.                                                                                                                                                                                            |
| <b>4(g) If this project, program, or system is an information technology/system, does it relate solely to infrastructure?</b><br><br><i>For example, is the system a Local Area Network (LAN) or Wide Area Network (WAN)?</i> | <input checked="" type="checkbox"/> No. Please continue to next question.<br><input type="checkbox"/> Yes. If a log kept of communication traffic, please answer this question.                                                                                                               |
| <b>4(h) If header or payload data<sup>43</sup> is stored in the communication traffic log, please detail the data elements stored.</b>                                                                                        |                                                                                                                                                                                                                                                                                               |
| N/A                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                               |

|                                                                                                                        |                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| <b>5. Does this project, program, or system connect, receive, or share PII with any other HUD programs or systems?</b> | <input checked="" type="checkbox"/> No.<br><input type="checkbox"/> Yes. If yes, please list:<br><br>Click here to enter text. |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|

<sup>43</sup> Header: Information that is placed before the actual data. The header normally contains a small number of bytes of control information, which is used to communicate important facts about the data that the message contains and how it is to be interpreted and used. It serves as the communication and control link between protocol elements on different devices.

Payload data: The actual data to be transmitted, often called the payload of the message (metaphorically borrowing a term from the space industry!) Most messages contain some data of one form or another, but some actually contain none: they are used only for control and communication purposes. For example, these may be used to set up or terminate a logical connection before data is sent.

|                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6. Does this project, program, or system connect, receive, or share PII with any external (non-HUD) partners or systems?</b>                                                                    | <input checked="" type="checkbox"/> No.<br><input type="checkbox"/> Yes. If yes, please list:<br>Click here to enter text.                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>6(a) Is this external sharing pursuant to new or existing information sharing access agreement (MOU, MOA, etc.)?</b>                                                                            | Existing<br>Please describe applicable information sharing governance in place:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>7. Does the project, program, or system provide role-based training for personnel who have access in addition to annual privacy training required of all HUD personnel?</b>                     | <input type="checkbox"/> No.<br><input checked="" type="checkbox"/> Yes. If yes, please list: Participating lenders that use ONAP-LOS receive training on the system and its privacy protections.                                                                                                                                                                                                                                                                                                                                                                           |
| <b>8. Per NIST SP 800-53 Rev. 4, Appendix J, does the project, program, or system maintain an accounting of disclosures of PII to individuals/agencies who have requested access to their PII?</b> | <input type="checkbox"/> No. What steps will be taken to develop and maintain the accounting:<br><input checked="" type="checkbox"/> Yes. In what format is the accounting maintained: List.                                                                                                                                                                                                                                                                                                                                                                                |
| <b>9. Is there a FIPS 199 determination?<sup>5</sup></b>                                                                                                                                           | <input type="checkbox"/> Unknown.<br><input type="checkbox"/> No.<br><input checked="" type="checkbox"/> Yes. Please indicate the determinations for each of the following:<br><br>Confidentiality:<br><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input checked="" type="checkbox"/> High<br><br>Integrity:<br><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input checked="" type="checkbox"/> High<br><br>Availability:<br><input type="checkbox"/> Low <input type="checkbox"/> Moderate <input checked="" type="checkbox"/> High |

**PRIVACY THRESHOLD ANALYSIS REVIEW**  
**(TO BE COMPLETED BY PROGRAM PLO)**

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<sup>5</sup> FIPS 199 is the [Federal Information Processing Standard](#) Publication 199, Standards for Security Categorization of Federal Information and Information Systems and is used to establish security categories of information systems.

|                                                                                                                                                                      |                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| <b>Program Privacy Liaison Reviewer:</b>                                                                                                                             | Click here to enter text.   |
| <b>Date submitted to Program Privacy Office:</b>                                                                                                                     | Click here to enter a date. |
| <b>Date submitted to HUD Privacy Branch:</b>                                                                                                                         | Click here to enter a date. |
| <b>Program Privacy Liaison Officer Recommendation:</b><br><i>Please include recommendation below, including what new privacy compliance documentation is needed.</i> |                             |
| Click here to enter text.                                                                                                                                            |                             |

**(TO BE COMPLETED BY THE HUD PRIVACY BRANCH)**

|                                             |                             |
|---------------------------------------------|-----------------------------|
| <b>HUD Privacy Branch Reviewer:</b>         | Click here to enter text.   |
| <b>Date approved by HUD Privacy Branch:</b> | Click here to enter a date. |
| <b>PTA Expiration Date:</b>                 | Click here to enter a date. |

**DESIGNATION**

|                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Privacy Sensitive System:</b>                                                                                    | Choose an item. If “no” PTA adjudication is complete.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Category of System:</b>                                                                                          | Choose an item.<br>If “other” is selected, please describe: Click here to enter text.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Determination:</b>                                                                                               | <input type="checkbox"/> PTA sufficient at this time.<br><input type="checkbox"/> Privacy compliance documentation determination in progress.<br><input type="checkbox"/> New information sharing arrangement is required.<br><input type="checkbox"/> HUD Policy for Computer-Readable Extracts Containing Sensitive PII applies.<br><input type="checkbox"/> Privacy Act Statement required.<br><input type="checkbox"/> Privacy Impact Assessment (PIA) required.<br><input type="checkbox"/> System of Records Notice (SORN) required.<br><input type="checkbox"/> Paperwork Reduction Act (PRA) Clearance may be required. Contact your program PRA Officer.<br><input type="checkbox"/> A Records Schedule may be required. Contact your program Records Officer. |
| <b>PIA:</b>                                                                                                         | Choose an item.<br>If covered by existing PIA, please list: Click here to enter text.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>SORN:</b>                                                                                                        | Choose an item.<br>If covered by existing SORN, please list: Click here to enter text.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>HUD Privacy Branch Comments:</b><br><i>Please describe rationale for privacy compliance determination above.</i> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Click here to enter text.                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |



## DOCUMENT ENDORSMENT

|                                   |
|-----------------------------------|
| DATE REVIEWED:                    |
| PRIVACY REVIEWING OFFICIALS NAME: |

By signing below, you attest that the content captured in this document is accurate and complete and meet the requirements of applicable federal regulations and HUD internal policies.

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**SYSTEM OWNER**

**Thomas Wright, Director**

**ONAP Office of Loan Guarantee**

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**Date**

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**CHIEF PRIVACY OFFICER**

**<<INSERT NAME/TITLE>>**

**OFFICE OF ADMINISTRATION**

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**Date**