



PRIVACY THRESHOLD ANALYSIS (PTA)

This form serves as the official determination by the DHS Privacy Office to identify the privacy compliance requirements for all Departmental uses of personally identifiable information (PII).

A Privacy Threshold Analysis (PTA) serves as the document used to identify information technology (IT) systems, information collections/forms, technologies, rulemakings, programs, information sharing arrangements, or pilot projects that involve PII and other activities that otherwise impact the privacy of individuals as determined by the Chief Privacy Officer, pursuant to Section 222 of the Homeland Security Act, and to assess whether there is a need for additional Privacy Compliance Documentation. A PTA includes a general description of the IT system, information collection, form, technology, rulemaking, program, pilot project, information sharing arrangement, or other Department activity and describes what PII is collected (and from whom) and how that information is used and managed.

Please complete the attached Privacy Threshold Analysis and submit it to your component Privacy Office. After review by your component Privacy Officer the PTA is sent to the Department's Senior Director for Privacy Compliance for action. If you do not have a component Privacy Office, please send the PTA to the DHS Privacy Office:

Senior Director, Privacy Compliance
The Privacy Office
U.S. Department of Homeland Security
Washington, DC 20528
Tel: 202-343-1717

PIA@hq.dhs.gov

Upon receipt from your component Privacy Office, the DHS Privacy Office will review this form and assess whether any privacy compliance documentation is required. If compliance documentation is required – such as Privacy Impact Assessment (PIA), System of Records Notice (SORN), Privacy Act Statement, or Computer Matching Agreement (CMA) – the DHS Privacy Office or component Privacy Office will send you a copy of the relevant compliance template to complete and return.



Privacy Threshold Analysis (PTA)

Specialized Template for Information Collections (IC) and Forms

The Forms-PTA is a specialized template for Information Collections and Forms. This specialized PTA must accompany all Information Collections submitted as part of the Paperwork Reduction Act process (any instrument for collection (form, survey, questionnaire, etc.) from ten or more members of the public). Components may use this PTA to assess internal, component-specific forms as well.

Form Number: CG-5437B

Form Title: Port State Control Report of Inspection – Form B

Component: U.S. Coast Guard (USCG) **Office:** CG-REG

IF COVERED BY THE PAPERWORK REDUCTION ACT:

Collection Title: Certificates of Compliance, Boiler/Pressure Vessel Repairs, Cargo Gear Records, Shipping Papers, and NFPA 10 Certificates

OMB Control Number:	1625-0037	OMB Expiration Date:	August 31, 2019
----------------------------	-----------	-----------------------------	-----------------

Collection status:	Extension	Date of last PTA (if applicable):	N/A
---------------------------	-----------	--	-----

PROJECT OR PROGRAM MANAGER

Name: Mr. David Du Pont

Office:	CG-REG	Title:	Reg Dev Mgr
----------------	--------	---------------	-------------

Phone:	202-372-1497	Email:	David.A.DuPont@uscg.mil
---------------	--------------	---------------	--

COMPONENT INFORMATION COLLECTION/FORMS CONTACT

Name: Mr. Anthony Smith

Office:	CG-612	Title:	PRA Coordinator
----------------	--------	---------------	-----------------

Phone:	202-475-3532	Email:	Anthony.D.Smith@uscg.mil
---------------	--------------	---------------	--



SPECIFIC IC/Forms PTA QUESTIONS

1. Purpose of the Information Collection or Form

The purpose of the form (CG-5437B) is to document that the vessel underwent a marine safety, security and environmental protection examination. The Coast Guard issues this form to document the outcome—specifically deficiencies found during the course—of the examination. This form may only be used in addition to form CG-5437A, never alone.

The form contains the signature of the authorized official issuing the form, port of issue, and vessel-specific information. The form also contains the name and signature of the vessel representative receiving a copy of the form.

The authority for this collection is 46 U.S.C. 3301, 3305, 3306, 3702, 3703, 3711, 3714, 4302, and 4502.

Records are collected per NARA's retention schedule number: N1-026-05-015.

2. Describe the IC/Form

a. Does this form collect any Personally Identifiable Information" (PII ¹)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. From which type(s) of individuals does this form collect information? (<i>Check all that apply.</i>)	<input checked="" type="checkbox"/> Members of the public <input checked="" type="checkbox"/> U.S. citizens or lawful permanent residents <input checked="" type="checkbox"/> Non-U.S. Persons. <input checked="" type="checkbox"/> DHS Employees <input type="checkbox"/> DHS Contractors <input type="checkbox"/> Other federal employees or contractors.
c. Who will complete and submit this form? (<i>Check all that apply.</i>)	<input type="checkbox"/> The record subject of the form (e.g., the individual applicant).

¹ Personally identifiable information means any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which 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.



	<p><input type="checkbox"/> Legal Representative (preparer, attorney, etc.).</p> <p><input type="checkbox"/> Business entity.</p> <p>If a business entity, is the only information collected business contact information?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Law enforcement.</p> <p><input checked="" type="checkbox"/> DHS employee or contractor.</p> <p><input type="checkbox"/> Other individual/entity/organization that is NOT the record subject. <i>Please describe.</i></p> <p>Click here to enter text.</p>
d. How do individuals complete the form? <i>Check all that apply.</i>	<p><input checked="" type="checkbox"/> Paper.</p> <p><input checked="" type="checkbox"/> Electronic. (ex: fillable PDF)</p> <p><input type="checkbox"/> Online web form. (available and submitted via the internet)</p> <p><i>Provide link:</i></p>
e. What information will DHS collect on the form?	
The form contains the signature of the authorized official issuing the form, port of issue, and vessel-specific information. The form also contains the name and signature of the vessel representative receiving a copy of the form.	
f. Does this form collect Social Security number (SSN) or other element that is stand-alone Sensitive Personally Identifiable Information (SPII)? <i>No.</i>	
<p><input type="checkbox"/> Social Security number</p> <p><input type="checkbox"/> Alien Number (A-Number)</p> <p><input type="checkbox"/> Tax Identification Number</p> <p><input type="checkbox"/> Visa Number</p> <p><input type="checkbox"/> Passport Number</p> <p><input type="checkbox"/> Bank Account, Credit Card, or other financial account number</p>	<p><input type="checkbox"/> DHS Electronic Data Interchange Personal Identifier (EDIPI)</p> <p><input type="checkbox"/> Social Media Handle/ID</p> <p><input type="checkbox"/> Known Traveler Number</p> <p><input type="checkbox"/> Trusted Traveler Number (Global Entry, Pre-Check, etc.)</p> <p><input type="checkbox"/> Driver's License Number</p>



<input type="checkbox"/> Other. <i>Please list:</i>		<input type="checkbox"/> Biometrics
g. List the <i>specific authority</i> to collect SSN or these other SPII elements.		
N/A		
h. How will this information be used? What is the purpose of the collection? Describe <i>why</i> this collection of SPII is the minimum amount of information necessary to accomplish the purpose of the program.		
N/A		
i. Are individuals provided notice at the time of collection by DHS (<i>Does the records subject have notice of the collection or is form filled out by third party</i>)?	<input type="checkbox"/> Yes. Please describe how notice is provided. Click here to enter text. <input checked="" type="checkbox"/> No.	

3. How will DHS store the IC/form responses?	
a. How will DHS store the original, completed IC/forms?	<input type="checkbox"/> Paper. Please describe. Click here to enter text. <input type="checkbox"/> Electronic. Please describe the IT system that will store the data from the form. Click here to enter text. <input checked="" type="checkbox"/> Scanned forms (completed forms are scanned into an electronic repository). Please describe the electronic repository. Forms that the Coast Guard creates are maintained in the Marine Information for Safety and Law Enforcement (MISLE) database.
b. If electronic, how does DHS input the	<input checked="" type="checkbox"/> Manually (data elements manually entered). Please describe.



responses into the IT system?	A scanned record is uploaded to the vessel-specific files in MISLE. <input type="checkbox"/> Automatically. Please describe. Click here to enter text.
c. How would a user search the information submitted on the forms, <i>i.e.</i> , how is the information retrieved?	<input type="checkbox"/> By a unique identifier. ² <i>Please describe.</i> If information is retrieved by personal identifier, please submit a Privacy Act Statement with this PTA. Click here to enter text. <input checked="" type="checkbox"/> By a non-personal identifier. <i>Please describe.</i> A search can be done using vessel-specific information.
d. What is the records retention schedule(s)? <i>Include the records schedule number.</i>	A record is retained for the life of the vessel; NARA retention schedule number N1-026-05-015.
e. How do you ensure that records are disposed of or deleted in accordance with the retention schedule?	As records are maintained in the MISLE database, disposal/deletion is in accordance with the business rules for the database.
f. Is any of this information shared outside of the original program/office? <i>If yes, describe where (other offices or DHS components or external entities) and why. What are the authorities of the receiving party?</i>	
<input type="checkbox"/> Yes, information is shared with other DHS components or offices. Please describe. Click here to enter text. <input type="checkbox"/> Yes, information is shared <i>external</i> to DHS with other federal agencies, state/local partners, international partners, or non-governmental entities. Please describe. Click here to enter text.	

² Generally, a unique identifier is considered any type of "personally identifiable information," meaning any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which 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.



Homeland Security

Privacy Office
U.S. Department of Homeland Security
Washington, DC 20528
202-343-1717, pia@hq.dhs.gov
www.dhs.gov/privacy

☒ No. Information on this form is not shared outside of the collecting office.



Please include a copy of the referenced form and Privacy Act Statement (if applicable) with this PTA upon submission.



PRIVACY THRESHOLD REVIEW

(TO BE COMPLETED BY COMPONENT PRIVACY OFFICE)

Component Privacy Office Reviewer:	A.L. Craig
Date submitted to component Privacy Office:	June 24, 2019
Date submitted to DHS Privacy Office:	July 10, 2019
Have you approved a Privacy Act Statement for this form? (<i>Only applicable if you have received a waiver from the DHS Chief Privacy Officer to approve component Privacy Act Statements.</i>)	<input type="checkbox"/> Yes. Please include it with this PTA submission. <input checked="" type="checkbox"/> No. Please describe why not. Information is not retrieved by a personal identifier.
<p>Component Privacy Office Recommendation:</p> <p>The USCG uses Port State Control Report of Inspection – Form B (CG-5437B) to document that the vessel underwent a marine safety, security and environmental protection examination. The Coast Guard issues this form to document the outcome—specifically deficiencies found during the course—of the examination. This form may only be used in addition to form CG-5437A, never alone.</p> <p>CG-5437B contains the signature of the authorized official issuing the form, port of issue, and vessel-specific information. The form also contains the name and signature of the vessel representative receiving a copy of the form.</p> <p>DHS/USCG Marine for Safety and Law Enforcement (PIA) and SORN (i.e., DHS/USCG PIA-008 and DHS/USCG-013) provides notice for this collection.</p>	



PRIVACY THRESHOLD ADJUDICATION

(TO BE COMPLETED BY THE DHS PRIVACY OFFICE)

DHS Privacy Office Reviewer:	Raymond Hartwick
PCTS Workflow Number:	1183095
Date approved by DHS Privacy Office:	July 11, 2019
PTA Expiration Date	July 11, 2022
Approved By:	Riley Dean

DESIGNATION

Privacy Sensitive IC or Form:	Yes If “no” PTA adjudication is complete.
Determination:	<input type="checkbox"/> PTA sufficient at this time. <input type="checkbox"/> Privacy compliance documentation determination in progress. <input type="checkbox"/> New information sharing arrangement is required. <input type="checkbox"/> DHS Policy for Computer-Readable Extracts Containing SPII applies. <input type="checkbox"/> Privacy Act Statement required. <input checked="" type="checkbox"/> Privacy Impact Assessment (PIA) required. <input type="checkbox"/> System of Records Notice (SORN) required. <input type="checkbox"/> Specialized training required. <input type="checkbox"/> Other. Click here to enter text.
DHS IC/Forms Review:	Choose an item.
Date IC/Form Approved by PRIV:	Click here to enter a date.
IC/Form PCTS Number:	Click here to enter text.
Privacy Act Statement:	e(3) statement not required. Click here to enter text.
PTA:	Choose an item.



	Click here to enter text.
PIA:	System covered by existing PIA If covered by existing PIA, please list: DHS/USCG/PIA-008 - Marine Information for Safety and Law Enforcement (MISLE). If a PIA update is required, please list: Click here to enter text.
SORN:	Choose an item. If covered by existing SORN, please list: SORN coverage is not required at this time. If a SORN update is required, please list: Click here to enter text.
DHS Privacy Office Comments: <i>Please describe rationale for privacy compliance determination above.</i>	
<p>USCG is submitting this PTA in order to document vessels that have undergone a marine safety, security and environmental protection examination. The Coast Guard issues this form to document the outcome—specifically deficiencies found during the course—of the examination. This form may only be used in addition to form CG-5437A, never alone.</p> <p>CG-5437B contains the signature of the authorized official issuing the form, port of issue, and vessel-specific information. The form also contains the name and signature of the vessel representative receiving a copy of the form.</p> <p>PRIV finds this Information Collection to be privacy sensitive, requiring a PIA for coverage.</p> <p>PRIV finds PIA coverage under DHS/USCG/PIA-008 - Marine Information for Safety and Law Enforcement (MISLE), which is a steady-state system designed to capture information required to support the Coast Guard's marine safety, security, environmental protection and law enforcement programs. Supporting these programs requires the collection of personally identifiable information about individuals associated with vessels, as well as, investigatory information.</p> <p>PRIV finds that neither SORN coverage nor a PAS are required at this time.</p>	