Agency Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program # \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[If you have multiple full collect program numbers, please complete a separate questionnaire for each program unless the answers are the same, and then list all program codes.]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In preparation for the implementation of SB1067, we need to validate/secure the following from each client agency:

**Debt make-up**

When assigning a debt to OAA for collection:

1. Do you add interest to the debt? Y/N \_\_\_\_\_\_\_\_\_
   1. Please cite your authority to charge interest if different than ORS 82.010: \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you have the authority to add a penalty to the debt Y/N \_\_\_\_\_
   1. Do you add the penalty Y/N \_\_\_\_
   2. If yes, in what field do you apply the penalty to? (principal balance, penalty, interest)\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   3. Please cite your authority to include the penalty and describe the reason(s) for penalty that is included. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Do you pass the cost of collection onto the debtor? Y/N\_\_\_\_\_\_\_
   1. If yes, what field do you include the cost of collection (principal balance, penalty balance, interest balance) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   2. If no, please tell us why \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Any additional information on this subject that OAA should be aware of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Posting Payments:**

1. When applying a payment, what order do you post payments? (Principal, Penalty, Interest) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Account assignment volumes:**

Please estimate the volume of debts and debt balances that will be assigned to OAA on a monthly basis.

Number of accounts #\_\_\_\_\_\_\_\_\_\_\_\_ Dollar amount of the accounts $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**File Format**

How does your agency currently submit new debts (ADDS) to OAA? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Using Revenue On Line to key debts individually
* Paper assignment sheet (sending to OAA for input)
* Fixed width text file
* Comma delimited text file
* XML

What is your agencies timeline for converting to XML file format for debt submission to OAA? Please mark the appropriate box:

Never 12 months 24 months 3 years

**Settlement offers:**

1. Do you accept settlement offers? Y/N\_\_\_\_\_\_\_\_\_\_\_
   1. If No, please tell us why \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For agencies not subject to ORS 293 you are not subject to SB 1067**

1. Are you interested in opting into following SB 1067? Y/N \_\_\_\_\_\_\_\_ (allowing OAA to assign your debts to private collection firms on your behalf).
   1. If Yes, what would the earliest date that you would like to participate? \_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. If OAA offered a service to maintain debts that are in active bankruptcy, and work them appropriately in regards to the bankruptcy laws, would you want OAA to manage the account if the debtor files bankruptcy? Y/N \_\_\_\_\_\_\_\_\_\_\_ (OAA will be providing bankruptcy services to agencies subject to SB 1067).

Please reply to this questionnaire as earliest as you can, but to help us better plan we would like all responses back by **Friday, January 26, 2018**.

E-mail your completed questionnaire to: [Nikki.Bennett@oregon.gov](mailto:Nikki.Bennett@oregon.gov)