

PERFORMANCE QUALITY RECOGNITION PROGRAM APPLICATION



Tax Assessor-Collector Name: _____

County: _____

Requested Recognition Level: _____

I, _____, certify that I have read and understand the requirements of the Performance Quality Recognition Program and affirm that the _____ County Tax Assessor-Collector's office meets the requirements of the _____ recognition level. I further certify that the information provided herein is true and accurate to the best of my knowledge and that knowingly providing false or misleading information is a criminal offense.

Signature

Date

BRONZE LEVEL 13 POINTS NEEDED

REQUIRED

REQUIRED			Pts.
<input type="checkbox"/>	B1	I certify that I have taken the official oath of office for the position of county tax assessor-collector. (1 pt.)	
<input type="checkbox"/>	B2	I certify that county and state bonds for both the county tax assessor-collector and all appointed deputies are maintained at required amounts. Copies of all applicable bond agreements have been provided. (1 pt.)	
<input type="checkbox"/>	B3	I certify that registration fee revenue is remitted to the state in a timely manner. (1 pt.)	
<input type="checkbox"/>	B4	I certify that motor vehicle-related sales and use tax revenue is remitted to the state in a timely manner. A report, letter, or certification from the county auditor has been provided. (1 pt.)	
<input type="checkbox"/>	B5	I certify that only <u>authorized</u> title and registration fees are charged and collected. (1 pt.)	
<input type="checkbox"/>	B6	I certify that the information available on the department's website for my office is accurate. (1 pt.) Tax assessor-collector's direct email:	
<input type="checkbox"/>	B7	I certify that the county has entered into the Interlocal Agreement with the TxDMV and adheres to the expectations agreed upon in the agreement. (1 pt.)	
<input type="checkbox"/>	B8	I certify that my office maintains a fraud, waste, and abuse policy, which has been in place for the duration of the state fiscal year. A copy of the policy has been provided. (1 pt.)	
<input type="checkbox"/>	B9	I certify that all county employees who have access to motor vehicle records have signed a non-disclosure agreement outlining state and federal laws, and the agreement is kept in the employee's personnel file. A copy of the non-disclosure agreement has been provided. (1 pt.)	
<input type="checkbox"/>	B10	I certify that a county tax assessor-collector website is maintained that includes office locations, physical addresses, hours of operation, and contact information. (1 pt.) Website URL:	
<input type="checkbox"/>	B11	I certify that my office maintains a customer compact that specifies the county's guiding principles and standards of service that county citizens can expect to receive. A copy of this compact has been provided. (1 pt.)	
<input type="checkbox"/>	B12	I certify that training for myself and my employees is a high priority. I encourage my employees to participate in job-specific training to the best of my ability. I will also ensure that my employees have sufficient access and time to complete necessary training and webinars provided by the TxDMV. (1 pt.)	
<input type="checkbox"/>	B13	I certify that employee access to RTS and TxDMV eLearning is accurately maintained, users are added and deleted in a timely manner, users do not share RTS accounts, and users complete the training required for their duties and are assigned appropriate RTS permissions. (1 pt.)	
Total Bronze Points			

SILVER LEVEL 16 POINTS NEEDED – (AT LEAST 1 POINT FROM EACH OF THE 10 REQUIRED CRITERIA)

REQUIRED			Pts.
<input type="checkbox"/>	S1	I certify that the annual inventory conducted by a TxDMV field service representative (FSR) during the state fiscal year in which recognition is sought concluded with no discrepancies. A copy of the FSR's inventory clearance letter has been provided. (1 pt.)	
<input type="checkbox"/>	S2	I certify that at least one county tax assessor-collector employee subscribes to GovDelivery at each of my offices. (1 pt.) Email(s):	
<input type="checkbox"/>	S5	I certify that my office utilizes the additional collections event appropriately. A copy of the additional collections report for the state fiscal year, RTS receipts for applicable additional collections, and a justification for applicable additional collections have been provided. (1 pt.)	
<input type="checkbox"/>	S8	I certify that my office maintains a fraud, waste, and abuse prevention training program. A copy of the training material has been provided. (1 pt.)	
<input type="checkbox"/>	S9	I certify that my office has a funds handling standard operating procedure (SOP) designed to prevent theft and misappropriation of funds. A copy of the funds handling SOP has been provided. (1 pt.)	
<input type="checkbox"/>	S10	I certify that all county office and deputy locations with assigned TxDMV inventory or RTS equipment were inspected during the state fiscal year to confirm adherence to all policies and procedures. A copy of the standard operating procedure outlining areas to be audited (and how to conduct those audits), the audit reports, and a summary document describing the outcome of audits during the state fiscal year have been provided. (1 pt.)	
<input type="checkbox"/>	S12	I certify that customers are given the opportunity to provide feedback on a customer satisfaction survey that includes, at a minimum, an Overall Satisfaction Rating on a 4 or 5-point scale. A copy of the survey and evidence of its location have been provided. (1 pt.)	
<input type="checkbox"/>	S13	I certify that a county tax assessor-collector website is maintained with substantive information and contains: <i>(select one)</i>	
		Website URL:	
		<input type="checkbox"/> at least 8 of the 12 suggested items. (1 pt.)	
		<input type="checkbox"/> at least 10 of the 12 suggested items. (2 pts.)	
<input type="checkbox"/>	S20	I certify that at least one employee (other than myself) attended at least one live county webinar (or listened to the webinar recording) for each topic during the previous state fiscal year. (1 pt.)	
<input type="checkbox"/>	S21	I certify that I or my chief deputy received continuing education credits for attending at least one live county webinar (or listening to the webinar recording) per topic during the previous fiscal year. A copy of my and/or my chief deputy's Continuing Education Transcript has been provided. (1 pt.)	

ELECTIVE			Pts.
<input type="checkbox"/>	S3	I certify that at least one entity utilized webDEALER during six months of the state fiscal year and at least fifty (50) title applications submitted were submitted through webDEALER to my county. (1 pt.)	
<input type="checkbox"/>	S4	I certify that at least one subcontractor utilized webSUB for at least six months of the state fiscal year. (1 pt.)	
<input type="checkbox"/>	S6	I certify that my office monitors, maintains, and strives to improve processing time for registration renewals submitted by mail. A copy of the internal program or process used to monitor processing time with the required elements has been provided. (1 pt.)	
<input type="checkbox"/>	S7	I certify that my office monitors, maintains, and strives to improve processing time for title applications. A copy of the internal program or process used to monitor processing time with the required elements has been provided. (1 pt.)	
<input type="checkbox"/>	S11	I certify that my office promotes a collaborative relationship with local law enforcement. Evidence of a collaborative relationship with law enforcement has been provided. (1 pt.)	

SILVER LEVEL 16 POINTS NEEDED – (AT LEAST 1 POINT FROM EACH OF THE 10 REQUIRED CRITERIA)

ELECTIVE (continued)			Pts.
<input type="checkbox"/>	S14	I certify that my office collaborates with other counties to encourage information sharing. To meet this criterion, I certify: <i>(select at least 2)</i> (1 pt.)	
		<input type="checkbox"/> I, or my employees, attended a regionally hosted meeting (a copy of a sign-in sheet or registration confirmation has been provided).	
		<input type="checkbox"/> I, or my employees, attended at least one statewide county tax assessor-collector conference (registration confirmation has been provided).	
		<input type="checkbox"/> I hosted a meeting for counties to share concerns and resolve issues that affect the counties within my region (a copy of a sign-in sheet or meeting agenda reflecting my county as the host has been provided).	
<input type="checkbox"/>	S15	I certify that my office engages in public outreach activities targeted to county residents related to motor vehicle services. Evidence of two different outreach activities has been provided. (1 pt.)	
<input type="checkbox"/>	S16	I certify that at least one of my offices utilizes queuing equipment or similar equipment to manage customer flow. Evidence of such a system/equipment has been provided. (1 pt.)	
<input type="checkbox"/>	S17	I certify that my office employs at least one employee who can effectively communicate in the language that constitutes the majority of the non-English speaking population in the county or have access to on-demand, professional translation services. If applicable, evidence of on-demand, professional transaction service access has been provided. (1 pt.)	
<input type="checkbox"/>	S18	I certify that my office offers alternative office hours at least twice per month. My standard office hours and proof of alternate office hours have been provided. (1 pt.)	
<input type="checkbox"/>	S19	I certify that I have implemented: <i>(select one)</i>	
		<input type="checkbox"/> one business practice designed to streamline customer services (documentation has been provided). (1 pt.)	
		<input type="checkbox"/> two or more business practices designed to streamline customer services (documentation has been provided). (2 pts.)	
<input type="checkbox"/>	S22	I certify that training and/or certification programs are available options to all my employees. A list of all courses and certification programs including the course date, course synopsis or outline (if available), and evidence of course completion (certificate or transcript) for all courses attended during the previous state fiscal year have been provided. (1 pt.)	
<input type="checkbox"/>	S23	I certify that during the state fiscal year: <i>(select one)</i>	
		<input type="checkbox"/> employees have been <i>informed</i> of IT security practices (documentation has been provided). (1 pt.)	
		<input type="checkbox"/> employees <i>participated</i> in IT security training (documentation has been provided). (2 pts.)	
Total Silver Points			

GOLD LEVEL 25 POINTS NEEDED – (AT LEAST 1 POINT FROM EACH OF THE 6 REQUIRED CRITERIA)

REQUIRED			Pts.
<input type="checkbox"/>	G1	I certify that an on-site review conducted by the TxDMV field service representative (FSR) in the last 12 months concluded with no concerns. An FSR's finding letter concluding with No Concerns Found issued within the last 12 months has been provided. (1 pt.)	
<input type="checkbox"/>	G2	I certify that at least one county stakeholder subscribes to GovDelivery. (1 pt.)	
		Stakeholder Name:	
		Stakeholder Email:	
<input type="checkbox"/>	G7	I certify that fraud, waste, and abuse training has been provided to my employees, evidence of training completion has been provided, and has been completed by: <i>(select one)</i>	
		Training Program Frequency (e.g., annual):	
		<input type="checkbox"/> at least 90% of employees. (1 pt.)	
		<input type="checkbox"/> at least 95% of employees. (2 pts.)	
		<input type="checkbox"/> 100% of employees. (3 pts.)	
<input type="checkbox"/>	G10	I certify that <i>all</i> customer surveys have been submitted and reflect an Overall Satisfaction Rating of Meets Expectations or higher: <i>(select one)</i>	
		<input type="checkbox"/> at least 80% of the time. (1 pt.)	
		<input type="checkbox"/> at least 85% of the time. (2 pts.)	
		<input type="checkbox"/> at least 90% of the time. (3 pts.)	
<input type="checkbox"/>	G18	I certify that I am providing a completed <i>Performance Quality Recognition Program – Webinar Attendance</i> form reflecting that all live county webinars (or webinar recordings) for each topic during the previous state fiscal year were attended (or reviewed) by at least: <i>(select one)</i>	
		<input type="checkbox"/> three (3) employees (or county with less than three (3) employees - 50% participation). (1 pt.)	
		<input type="checkbox"/> five (5) employees (or county with less than three (5) employees - 75% participation). (2 pts.)	
		<input type="checkbox"/> eight (8) employees (or county with less than three (8) employees - 100% participation). (3 pts.)	
<input type="checkbox"/>	G19	I certify that I have been awarded, and am providing evidence for, the following professional certification from the Tax Assessor-Collectors Association of Texas: <i>(select one)</i>	
		<input type="checkbox"/> County Tax Office Professional (CTOP) (1 pt.)	
		<input type="checkbox"/> Professional County Assessor-Collector (PCAC) (3 pts.)	

ELECTIVE			Pts.
<input type="checkbox"/>	G3	I certify that the required webDEALER reports have been provided and demonstrate at least: <i>(select one)</i>	
		Total Dealer Transactions: Total webDEALER Transactions: Percentage: %	
		<input type="checkbox"/> 40% of annual dealer transactions in my county are processed through webDEALER. (1 pt.)	
		<input type="checkbox"/> 60% of annual dealer transactions in my county are processed through webDEALER. (2 pts.)	
		<input type="checkbox"/> 80% of annual dealer transactions in my county are processed through webDEALER. (3 pts.)	
<input type="checkbox"/>	G4	I certify that subcontractor names and registration renewal service hours have been provided and they demonstrate alternate hours from the county office hours are offered by at least: <i>(select one)</i>	
		<input type="checkbox"/> one (1) subcontractor location. (1 pt.)	
		<input type="checkbox"/> three (3) subcontractor locations. (2 pts.)	
		<input type="checkbox"/> five (5) subcontractor locations. (3 pts.)	

GOLD LEVEL (25 POINTS NEEDED – (AT LEAST 1 POINT FROM EACH OF THE 6 REQUIRED CRITERIA))

ELECTIVE (continued)

ELECTIVE (continued)			Pts.
<input type="checkbox"/>	G5	I certify that my office did not exceed an average of five (5) days mailed registration renewal turnaround time during any given month of the state fiscal year, the turnaround times per month for the state fiscal year and the average for the year have been provided, and my office's average annual turnaround time was not more than: <i>(select one)</i>	
		<input type="checkbox"/> three (3) days. (1 pt.)	
		<input type="checkbox"/> two (2) days. (2 pts.)	
		<input type="checkbox"/> one (1) day. (3 pts.)	
<input type="checkbox"/>	G6	I certify that my office did not exceed an average of five (5) days title application turnaround time during any given month of the state fiscal year, the turnaround times per month for the state fiscal year and the average for the year have been provided, and my office's average annual turnaround time was not more than: <i>(select one)</i>	
		<input type="checkbox"/> three (3) days. (1 pt.)	
		<input type="checkbox"/> two (2) days. (2 pts.)	
		<input type="checkbox"/> one (1) day. (3 pts.)	
<input type="checkbox"/>	G8	I certify that my office has an established anti-fraud awareness campaign that includes employees, public outreach, law enforcement, and full and limited-service deputies. A copy of the campaign plan, along with examples of activities and outreach (i.e., meeting agenda, newspaper article, attendance log, etc.), have been provided. (1 pt.)	
<input type="checkbox"/>	G9	I certify that my office has provided evidence of hosting: <i>(select one)</i>	
		<input type="checkbox"/> one meeting with law enforcement during the state fiscal year. (1 pt.)	
		<input type="checkbox"/> two or more meetings with law enforcement during the state fiscal year. (2 pts.)	
<input type="checkbox"/>	G11	I certify that my office utilizes website analytic software to monitor and analyze customer behavior. Printouts from the analytic software (e.g., dashboard, reports, etc.) have been provided. (1 pt.)	
<input type="checkbox"/>	G12	I certify that I contribute to county collaboration. Speaker evaluation forms, evidence of conference planning, or evidence of serving as a facilitator at a conference have been provided. (1 pt.)	
<input type="checkbox"/>	G13	I certify that public outreach activities targeted to county residents related to motor vehicle services had positive statistical effects, as demonstrated by relevant statistical data measured before and after the engagement (e.g., reduction in phone calls, increase in social media followers, etc.). A report showing the positive statistical effect(s) has been provided. (1 pt.)	
<input type="checkbox"/>	G14	I certify that my office utilizes the analytical tools of its queuing system to monitor customer wait times and that the average wait time, during any given month of the state fiscal year, did not exceed 40 minutes, statistical reports demonstrating the average wait times per month for customers during the state fiscal year and the average for the year have been provided, and my office's average wait time was: <i>(select one)</i>	
		<input type="checkbox"/> 30 minutes or less. (1 pt.)	
		<input type="checkbox"/> 20 minutes or less. (2 pts.)	
		<input type="checkbox"/> 10 minutes or less. (3 pts.)	
<input type="checkbox"/>	G15	I certify that there is at least one employee on-site 100% of the time who can effectively communicate in the language that constitutes the largest non-English speaking population in the county or am providing evidence of access to on-demand, professional translation availability 100% of the time. (1 pt.)	
<input type="checkbox"/>	G16	I certify that the number of customers served during any <i>alternate</i> office hours (outside 8:00 AM to 5:00 PM) is tracked. Office hours schedules, showing alternate office hours and the corresponding number of customers served during alternate office hours, has been provided. (1 pt.)	
<input type="checkbox"/>	G17	I certify that my county offers alternate customer service locations and a picture of the alternate location, along with a description and observed office hours have been provided. (1 pt.)	

GOLD LEVEL (25 POINTS NEEDED – (AT LEAST 1 POINT FROM EACH OF THE 6 REQUIRED CRITERIA))

ELECTIVE (continued)

ELECTIVE (continued)			Pts.
<input type="checkbox"/>	G20	I certify that the required COGNOS Training Transcript report and summary spreadsheet have been provided, and: <i>(select one)</i>	
		<input type="checkbox"/> at least 80% of the county's RTS users have completed all available eLearning modules. (1 pt.)	
		<input type="checkbox"/> at least 90% of the county's RTS users have completed all available eLearning modules. (2 pts.)	
		<input type="checkbox"/> 100% of the county's RTS users have completed all available eLearning modules. (3 pts.)	
<input type="checkbox"/>	G21	I certify that IT security training has been provided to my employees, evidence of IT security training completion has been provided, and has been completed by: <i>(select one)</i>	
		<input type="checkbox"/> at least 90% of employees. (1 pt.)	
		<input type="checkbox"/> at least 95% of employees. (2 pts.)	
<input type="checkbox"/>	G22	I certify that my county's NMVTIS Error 910 rate is less than or equal to 5% of the total number of county-caused NMVTIS errors. A COGNOS report showing the total number of 910 Errors in a year and a spreadsheet illustrating the number of error transactions excluded from the calculation, due to no fault of the county, have been provided. (1 pt.)	
Total Gold Points			