DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0046]

Agency Information Collection (Statement of Heirs for Payment of Credits Due Estate of Deceased Veteran) Activities Under OMB Review

AGENCY: Veterans Benefits

Administration, Department of Veterans Affairs

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–3521), this notice announces that the Veterans Benefits Administration, Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and includes the actual data collection instrument.

DATES: Comments must be submitted on or before September 30, 2010.

ADDRESSES: Submit written comments on the collection of information through http://www.Regulations.gov or to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395–7316. Please refer to "OMB Control No. 2900–0046" in any correspondence.

FOR FURTHER INFORMATION CONTACT:

Denise McLamb, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 461– 7485, fax (202) 273–0443 or e-mail denise.mclamb@va.gov. Please refer to "OMB Control No. 2900–0046."

SUPPLEMENTARY INFORMATION:

Title: Statement of Heirs for Payment of Credits Due Estate of Deceased Veteran, VA Form Letter 29–596.

OMB Control Number: 2900–0046.

Type of Review: Extension of a currently approved collection.

Abstract: VA Form 29–596 is use by an administrator, executor, or next of kin to support a claim for money in the form of unearned or unapplied insurance premiums due to a deceased veteran's estate.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on June 24, 2010, at page 36154.

24, 2010, at page 36154.

Affected Public: Individuals or households.

Estimated Annual Burden: 78 hours. Estimated Average Burden per Respondent: 15 minutes.

Frequency of Response: On occasion.
Estimated Number of Respondents:
312

Dated: August 26, 2010. By direction of the Secretary.

Denise McLamb,

 $\label{eq:condition} Program\ Analyst, Enterprise\ Records\ Service. \\ [FR\ Doc.\ 2010-21632\ Filed\ 8-30-10;\ 8:45\ am]$

BILLING CODE 8320-01-P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0066]

Agency Information Collection (Request to Employer for Employment Information in Connection With Claim for Disability Benefits) Activities Under OMB Review

AGENCY: Veterans Benefits Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–3521), this notice announces that the Veterans Benefits Administration, Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and includes the actual data collection instrument.

DATES: Comments must be submitted on or before September 30, 2010.

ADDRESSES: Submit written comments on the collection of information through http://www.Regulations.gov or to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395–7316. Please refer to "OMB Control No. 2900–0066" in any correspondence.

FOR FURTHER INFORMATION CONTACT:

Denise McLamb, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 461– 7485, fax (202) 273–0443 or e-mail denise.mclamb@va.gov. Please refer to "OMB Control No. 2900–0066."

SUPPLEMENTARY INFORMATION:

Title: Request to Employer for Employment Information in Connection with Claim for Disability Benefits, VA Form Letter 29–459.

OMB Control Number: 2900–0066. Type of Review: Extension of a currently approved collection.

Abstract: VA Form Letter 29–459 is used to request employment information from an employer in connection with a claim for disability benefits. VA uses the information to establish the insured's eligibility for disability insurance benefits.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on June 24, 2010, at pages 36154–36155.

Affected Public: Individuals or households.

Estimated Annual Burden: 862 hours. Estimated Average Burden per Respondent: 10 minutes.

Frequency of Response: On occasion. Estimated Number of Respondents: 5,167.

Dated: August 26, 2010. By direction of the Secretary.

Denise McLamb,

 $Program\ Analyst, Enterprise\ Records\ Service.$ [FR Doc. 2010–21634 Filed 8–30–10; 8:45 am]

BILLING CODE 8320-01-P