

index on the OTS Internet Site at <http://www.ots.treas.gov>. In addition, interested persons may inspect comments at the Public Reading Room, 1700 G Street, NW., by appointment. To make an appointment, call (202) 906-5922, send an e-mail to [public.info@ots.treas.gov](mailto:public.info@ots.treas.gov), or send a facsimile transmission to (202) 906-7755.

**FOR FURTHER INFORMATION CONTACT:** You can request additional information about this proposed information collection from Josephine Battle on (202) 906-6870, Office of Thrift Supervision, 1700 G Street, NW., Washington, DC 20552.

**SUPPLEMENTARY INFORMATION:** OTS may not conduct or sponsor an information collection, and respondents are not required to respond to an information collection, unless the information collection displays a currently valid OMB control number. As part of the approval process, we invite comments on the following information collection.

Comments should address one or more of the following points:

a. Whether the proposed collection of information is necessary for the proper performance of the functions of OTS;

b. The accuracy of OTS's estimate of the burden of the proposed information collection;

c. Ways to enhance the quality, utility, and clarity of the information to be collected;

d. Ways to minimize the burden of the information collection on respondents, including through the use of information technology.

We will summarize the comments that we receive and include them in the OTS request for OMB approval. All comments will become a matter of public record. In this notice, OTS is soliciting comments concerning the following information collection.

*Title of Proposal:* General Reporting and Recordkeeping by Savings Associations and Savings and Loan Holding Companies.

*OMB Number:* 1550-0011.

*Form Number:* N/A.

*Description:* This information collection relates to reports and records required by the following regulations: 12 CFR 552.11 (books and records, federal stock associations), 12 CFR 545.96(c) (agency business records, federal stock associations), 12 CFR 544.8 (communications between members of a federal mutual savings association), 12 CFR 562.1 (regulatory reporting requirements, each savings association and its affiliates), 12 CFR 563.1 (chartering documents, each savings association), 12 CFR 563.47(e) (pension

plans, each savings association or service corporation), 12 CFR 572.6(b) (standard flood hazard determination form, each savings association), 12 CFR 562.4 (audit of savings association, savings and loan holding company, or affiliate), 12 CFR 563.76(c) (offers and sales of securities of a savings association or its affiliates in any office of the savings association), 12 CFR 584.1(f) (books and records of each savings and loan holding company), 12 CFR part 226 (Regulation Z, truth in lending), 12 CFR part 202 (Regulation B, Equal Credit Opportunity Act), 12 CFR part 205 (Regulation E, electronic fund transfers), and 12 CFR part 213 (Regulation M, consumer leasing).

Savings associations use the reports and records that the regulations require for internal management control purposes and examiners use them to determine whether savings associations are being operated safely, soundly, and in compliance with regulations. An absence of the reporting and record keeping requirements would not allow for prudent internal controls or for examiners to determine the accurate performance and condition of savings associations. Specifically, OTS examiners use the reports and record keeping requirements to determine whether the savings associations are being operated safely, soundly, and in compliance with regulations.

*Type of Review:* Extension of a currently approved collection.

*Affected Public:* Businesses or other for-profit.

*Estimated Number of Respondents:* 741.

*Estimated Frequency of Response:* On occasion and annually.

*Estimated Total Burden:* 3,623,349 hours.

Dated: March 17, 2011.

**Ira L. Mills,**

*Paperwork Clearance Officer, Office of Chief Counsel, Office of Thrift Supervision.*

[FR Doc. 2011-6753 Filed 3-22-11; 8:45 am]

**BILLING CODE 6720-01-P**

## DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900—New (DBQs—Group 2)]

### Proposed Information Collection (Disability Benefits Questionnaires—Group 2) Activity: Comment Request

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** The Veterans Benefits Administration (VBA), Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed new collection and allow 60 days for public comment in response to the notice. This notice solicits comments for information needed to obtain medical evidence to adjudicate a claim for disability benefits.

**DATES:** Written comments and recommendations on the proposed collection of information should be received on or before May 23, 2011.

**ADDRESSES:** Submit written comments on the collection of information through Federal Docket Management System (FDMS) at <http://www.Regulations.gov> or to Nancy J. Kessinger, Veterans Benefits Administration (20M33), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420 or e-mail to [nancy.kessinger@va.gov](mailto:nancy.kessinger@va.gov). Please refer to "OMB Control No. 2900—New (DBQs—Group 2)" in any correspondence. During the comment period, comments may be viewed online through FDMS.

**FOR FURTHER INFORMATION CONTACT:** Nancy J. Kessinger at (202) 461-9769 or FAX (202) 275-5947.

**SUPPLEMENTARY INFORMATION:** Under the PRA of 1995 (Pub. L. 104-13; 44 U.S.C. 3501-3521), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VBA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VBA's functions, including whether the information will have practical utility; (2) the accuracy of VBA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

**Titles**

- a. Arteries and Veins Conditions (Vascular Diseases including Varicose Veins) Disability Benefits Questionnaire, VA Form 21-0960A-2.
- b. Hypertension Disability Benefits Questionnaire, VA Form 21-0960A-3.
- c. Non-ischemic Heart Disease (including Arrhythmias and Surgery) Disability Benefits Questionnaire, VA Form 21-0960A-4.
- d. Diabetic Peripheral Neuropathy (Diabetic Sensory-Motor Peripheral Neuropathy) Disability Benefits Questionnaire, VA Form 21-0960C-4.
- e. Diabetes Mellitus Disability Benefits Questionnaire, VA Form 21-0960E-1.
- f. Scar/Disfigurement Disability Benefits Questionnaire, VA Form 21-0960F-1.
- g. Skin Diseases Disability Benefits Questionnaire, VA Form 21-0960F-2.
- h. Amputations Disability Benefits Questionnaire, VA Form 21-0960M-1.
- i. Ankle Conditions Disability Benefits Questionnaire, VA Form 21-0960M-2.
- j. Elbow and Forearm Conditions Disability Benefits Questionnaire, VA Form 21-0960M-4.
- k. Flatfoot (PES PLANUS) Disability Benefits Questionnaire, VA Form 21-0960M-5.
- l. Foot Miscellaneous (other than flatfoot/PES PLANUS), Disability Benefits Questionnaire, VA Form 21-0960M-6.
- m. Hand and Finger Conditions Disability Benefits Questionnaire, VA Form 21-0960M-7.
- n. Hip and Thigh Conditions Disability Benefits Questionnaire, VA Form 21-0960M-8.
- o. Knee and Lower Leg Conditions Disability Benefits Questionnaire, VA Form 21-0960M-9.
- p. Muscle Injuries Disability Benefits Questionnaire, VA Form 21-0960M-10.
- q. Shoulder and Arm Conditions Disability Benefits Questionnaire, VA Form 21-0960M-12.

- r. Temporomandibular Joint (TMJ) Conditions Disability Benefits Questionnaire, VA Form 21-0960M-15.
- s. Wrist Conditions Disability Benefits Questionnaire, VA Form 21-0960M-16.
- t. Eye Conditions Disability Benefits Questionnaire, VA Form 21-0960N-2.  
*OMB Control Number: 2900—New (DBQs—Group 2).*  
*Type of Review: New collection.*  
*Abstract: Data collected on VA Form 21-0960 series will be used to obtain information from claimants treating physician that is necessary to adjudicate a claim for disability benefits.*  
*Affected Public: Individuals or households.*

**Estimated Annual Burden**

- a. VA Form 21-0960A-2—10,000.
- b. VA Form 21-0960A-3—12,500.
- c. VA Form 21-0960A-4—10,000.
- d. VA Form 21-0960C-4—37,500.
- e. VA Form 21-0960E-1—18,750.
- f. VA Form 21-0960F-1—6,250.
- g. VA Form 21-0960F-2—6,250.
- h. VA Form 21-0960M-1—12,500.
- i. VA Form 21-0960M-2—15,000.
- j. VA Form 21-0960M-4—10,000.
- k. VA Form 21-0960M-5—12,500.
- l. VA Form 21-0960M-6—7,500.
- m. VA Form 21-0960M-7—15,000.
- n. VA Form 21-0960M-8—25,000.
- o. VA Form 21-0960M-9—25,000.
- p. VA Form 21-0960M-10—15,000.
- q. VA Form 21-0960M-12—25,000.
- r. VA Form 21-0960M-15—3,750.
- s. VA Form 21-0960M-16—20,000.
- t. VA Form 21-0960N-2—30,000.

**Estimated Average Burden per Respondent**

- a. VA Form 21-0960A-2—30 minutes.
- b. VA Form 21-0960A-3—15 minutes.
- c. VA Form 21-0960A-4—30 minutes.
- d. VA Form 21-0960C-4—30 minutes.
- e. VA Form 21-0960E-1—15 minutes.
- f. VA Form 21-0960F-1—15 minutes.
- g. VA Form 21-0960F-2—15 minutes.

- h. VA Form 21-0960M-1—30 minutes.
- i. VA Form 21-0960M-2—30 minutes.
- j. VA Form 21-0960M-4—30 minutes.
- k. VA Form 21-0960M-5—15 minutes.
- l. VA Form 21-0960M-6—15 minutes.
- m. VA Form 21-0960M-7—30 minutes.
- n. VA Form 21-0960M-8—30 minutes.
- o. VA Form 21-0960M-9—30 minutes.
- p. VA Form 21-0960M-10—30 minutes.
- q. VA Form 21-0960M-12—30 minutes.
- r. VA Form 21-0960M-15—15 minutes.
- s. VA Form 21-0960M-16—30 minutes.
- t. VA Form 21-0960N-2—45 minutes.  
*Frequency of Response: On occasion.*

**Estimated Number of Respondents**

- a. VA Form 21-0960A-2—20,000.
- b. VA Form 21-0960A-3—50,000.
- c. VA Form 21-0960A-4—20,000.
- d. VA Form 21-0960C-4—75,000.
- e. VA Form 21-0960E-1—75,000.
- f. VA Form 21-0960F-1—25,000.
- g. VA Form 21-0960F-2—25,000.
- h. VA Form 21-0960M-1—25,000.
- i. VA Form 21-0960M-2—30,000.
- j. VA Form 21-0960M-4—20,000.
- k. VA Form 21-0960M-5—50,000.
- l. VA Form 21-0960M-6—30,000.
- m. VA Form 21-0960M-7—30,000.
- n. VA Form 21-0960M-8—50,000.
- o. VA Form 21-0960M-9—50,000.
- p. VA Form 21-0960M-10—30,000.
- q. VA Form 21-0960M-12—50,000.
- r. VA Form 21-0960M-15—15,000.
- s. VA Form 21-0960M-16—40,000.
- t. VA Form 21-0960N-2—40,000.

By direction of the Secretary.

**Denise McLamb,**

*Program Analyst, Enterprise Records Service.*

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