Administration (VBA), 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; it includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before September 23, 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. 2900–0249" 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. 2900–0249" in any correspondence.

## SUPPLEMENTARY INFORMATION:

*Title:* Loan Service Report, VA Form 26–6808.

OMB Control Number: 2900–0249. Type of Review: Extension of a currently approved collection.

Abstract: VA personnel complete VA Form 26–6806 during personal contact with delinquent obligors. VA will use the information collected to determine whether a loan default is insoluble or whether the obligor has reasonable prospects for curing the default and maintaining the mortgage obligation in the future. The information will also be used to intercede with the holder of the loan to accept a specially arranged repayment plan or other forbearance aimed at assisting the obligor in retaining his or her home.

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 15, 2010, at page 33899.

Affected Public: Individuals or households.

Estimated Annual Burden: 4,167 hours.

Estimated Average Burden per Respondent: 25 minutes.

Frequency of Response: One-time. Estimated Number of Respondents: 10,000. Dated: August 18, 2010. By direction of the Secretary.

#### Denise McLamb,

 $Program\ Analyst, Enterprise\ Records\ Service.$  [FR Doc. 2010–20905 Filed 8–23–10; 8:45 am]

BILLING CODE 8320-01-P

## DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0539]

Proposed Information Collection (Application for Supplemental Service Disabled Veterans Insurance) 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 extension of a currently approved collection, and allow 60 days for public comment in response to the notice. This notice solicits comments for information needed to determine a claimant's eligibility for disability insurance.

**DATES:** Written comments and recommendations on the proposed collection of information should be received on or before October 25, 2010.

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 (20M35), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420 or e-mail

nancy.kessinger@va.gov. Please refer to "OMB Control No. 2900–0539" 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.

Title: Application for Supplemental Service Disabled Veterans Insurance (SRH), VA Form 29–0188 and 29–0189, and Application for Supplemental Service Disabled Veterans (RH) Life Insurance, VA Form 29–0190.

OMB Control Number: 2900–0539. Type of Review: Extension of a currently approved collection.

Abstract: VA Forms 29–0188, 29–0189 and 29–0190 are completed by veterans to apply for Supplemental Service Disabled Veterans Insurance. VA uses the information collected to establish veterans' eligibility for insurance coverage.

Affected Public: Individuals or households.

Estimated Annual Burden: 3,333 hours.

Estimated Average Burden per Respondent: 20 minutes.

Frequency of Response: On occasion.
Estimated Number of Respondents:
10,000.

Dated: August 18, 2010.

By direction of the Secretary:

## Denise McLamb,

 $Program\ Analyst, Enterprise\ Records\ Service. \\ [FR\ Doc.\ 2010-20906\ Filed\ 8-23-10;\ 8:45\ am]$ 

BILLING CODE 8320-01-P

# DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0011]

Proposed Information Collection (Application for Reinstatement (Insurance Lapsed More than 6 Months), and Application for Reinstatement (Non Medical— Comparative Health Statement)) Activity: Comment Request

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