DEPARTMENT OF THE TREASURY

Submission for OMB Review; Comment Request

February 11, 2016.

The Department of the Treasury will submit the following information collection request to the Office of Management and Budget (OMB) for review and clearance in accordance with the Paperwork Reduction Act of 1995, Public Law 104–13, on or after the date of publication of this notice.

DATES: Comments should be received on or before March 18, 2016 to be assured of consideration.

ADDRESSES: Send comments regarding the burden estimate, or any other aspect of the information collection, including suggestions for reducing the burden, to (1) Office of Information and Regulatory Affairs, Office of Management and Budget, Attention: Desk Officer for Treasury, New Executive Office Building, Room 10235, Washington, DC 20503, or email at OIRA_Submission@OMB.EOP.gov and (2) Treasury PRA Clearance Officer, 1750 Pennsylvania Ave. NW., Suite 8117, Washington, DC 20220, or email at PRA@treasury.gov.

FOR FURTHER INFORMATION CONTACT:

Copies of the submissions may be obtained by emailing *PRA@treasury.gov*, calling (202) 622–1295, or viewing the entire information collection request at *www.reginfo.gov*.

Departmental Offices

OMB Control Number: 1505–0250. Type of Review: Reinstatement without change of a previously approved collection.

Title: Application and Reports for the Direct Component and the Centers of Excellence Research Grants Program of the Gulf RESTORE Program.

Abstract: Authorized under the Resources and Ecosystems Sustainability, Tourist Opportunities, and Revived Economies of the Gulf Coast States Act (RESTORE) (P.L. 112-141), the Department of the Treasury is implementing several provisions of the Act, more specifically the Direct Component and the Centers of Excellence Research Grants Program. These programs require Treasury to make grants from the Gulf Coast Restoration Trust Fund to five States and certain counties and parishes impacted by the Deepwater Horizon Oil Spill. The information collection will be used to identify eligible recipients; determine the appropriate amount of funding; ensure compliance with applicable laws; track grantee progress, and report on the effectiveness of the program.

Affected Public: State, local, or tribal governments.

Estimated Total Annual Burden Hours: 6.864.

Brenda Simms,

Treasury PRA Clearance Officer.
[FR Doc. 2016–03209 Filed 2–16–16; 8:45 am]
BILLING CODE 4810–25–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0781]

Proposed Information Collection (Disability Benefits Questionnaire (Group 4)) 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 revision of a currently approved collection, and allow 60 days for public comment in response to the notice.

The VA Form 21-0960 series will be used to gather necessary information from a claimant's treating physician regarding the results of medical examinations. VA will gather medical information related to the claimant that is necessary to adjudicate the claim for VA disability benefits. The Disability Benefit Questionnaire title will include the name of the specific disability for which it will gather information. VAF 21–0960C–3, Cranial Nerve Conditions Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any cranial nerve condition; VAF 21-0960C-6, Narcolepsy Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of narcolepsy; VAF 21-0960C-7, Fibromyalgia Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of fibromyalgia; VAF 21-0960C-11, Seizure Disorders (Epilepsy) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any seizure disorder including epilepsy; VAF 21-0960D-1, Oral and Dental Conditions Including Mouth, Lips and Tongue (Other than

Temporomandibular Joint Conditions) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any oral or dental conditions; VAF 21-0960E-2, Endocrine Diseases (Other Than Thyroid. Parathyroid. or Diabetes Mellitus) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any endocrine disease including cushings and acromegaly however, excluding diabetes; VAF 21-0960E-3, Thyroid & Parathyroid Conditions Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any thyroid or parathyroid condition; VAF 21-0960H-1, Hernias (Including Abdominal, Inguinal, and Femoral Hernias) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of abdominal, inguinal, or femoral hernias; VAF 21-0960I–2, HIV-Related Illness Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any HIV-related illness; VAF 21-0960I-3, Infectious Diseases Other Than HIV-Related Illness, Chronic Fatigue Syndrome, and Tuberculosis Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any infectious diseases; VAF 21-0960I-4, Systemic Lupus Erythematosus (SLE) and Other Autoimmune Diseases Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of lupus or other immune disorders; VAF 21-0960I-5, Nutritional Deficiencies Disability Benefits Ouestionnaire, will gather information related to the claimant's diagnosis of nutritional deficiencies; VAF 21-0960J-4, Urinary Tract (including Bladder & Urethra) Conditions (excluding Male Reproductive System) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any urinary tract or bladder condition: VAF 21-0960L-1, Respiratory Conditions (Other than Tuberculosis & Sleep Apnea) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any respiratory condition; VAF 21-0960N-3, Loss of Sense of Smell and/or Taste Disability Benefits Questionnaire, will gather information related to the claimant's loss of sense of smell and taste; VAF 21-0960N-4, Sinusitis/ Rhinitis and Other Conditions of the Nose, Throat, Larynx, and Pharynx Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of sinusitis/rhinitis

or other diseases of the nose, throat, larynx, or pharynx; VAF 21–0960Q–1, Chronic Fatigue Syndrome Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of chronic fatigue syndrome.

DATES: Written comments and recommendations on the proposed collection of information should be received on or before April 18, 2016.

ADDRESSES: Submit written comments on the collection of information through Federal Docket Management System (FDMS) at www.Regulations.gov or to Nancy J. Kessinger, Veterans Benefits Administration (20M33), Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420 or email to nancy.kessinger@va.gov. Please refer to "OMB Control No. 2900–0781" in any correspondence.

FOR FURTHER INFORMATION CONTACT:

Nancy J. Kessinger at (202) 632–8924 or FAX (202) 632–8925.

SUPPLEMENTARY INFORMATION: Under the PRA of 1995 (Pub. L. 104–13; 44 U.S.C. 3501–21), 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: Disability Benefits Questionnaires (Group 4). OMB Control Number: 2900–0781.

Type of Review: Revision of a currently approved collection.

Abstract: The VA Form 21–0960 series will be used to gather necessary information from a claimant's treating physician regarding the results of medical examinations. VA will gather medical information related to the claimant that is necessary to adjudicate the claim for VA disability benefits.

Affected Public: Individuals or households.

Estimated Annual Burden: 53,750.

Estimated Average Burden per Respondent

i. VAF 21-0960C-3-30 minutes ii. VAF 21-0960C-6-15 minutes iii. VAF 21-0960C-7-15 minutes iv. VAF 21-0960C-11-15 minutes v. VAF 21-0960D-1-15 minutes vi. VAF 21-0960E-2-15 minutes vii. VAF 21-0960E-3-15 minutes viii. VAF 21-0960H-1-15 minutes ix. VAF 21-0960I-2-15 minutes x. VAF 21-0960I-3-15 minutes xi. VAF 21-0960I-4-30 minutes xii. VAF 21-0960I-5-15 minutes xiii. VAF 21-0960J-4--15 minutes xiv. VAF 21-0960L-1-30 minutes xv. VAF 21-0960N-3-15 minutes xvi. VAF 21–0960N–4—30 minutes xvii. VAF 21-0960Q-1-15 minutes

Frequency of Response: One time. Estimated Number of Respondents: 160,000.

By direction of the Secretary.

Kathleen M. Manwell,

Program Analyst, VA Privacy Service, Office of Privacy and Records Management, Department of Veterans Affairs.

[FR Doc. 2016-03206 Filed 2-16-16; 8:45 am]

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DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0778]

Proposed Information Collection (Disability Benefits Questionnaire (Group 3)); 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 revision of a currently approved collection, and allow 60 days for public comment in response to the notice.

The VA Form 21–0960 series will be used to gather necessary information from a claimant's treating physician regarding the results of medical examinations. VA will gather medical information related to the claimant that is necessary to adjudicate the claim for VA disability benefits. The DBQ title will include the name of the specific disability for which it will gather

information. VAF 21-0960C-5, Central Nervous System and Neuromusculo **Diseases Disability Benefits** Questionnaire, will gather information related to the claimant's diagnosis of a central nervous system disease; VAF 21-0960C-8, Headaches (Including Migraine Headaches) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of headaches; VAF 21-0960C-9, Multiple Sclerosis (MS) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of multiple sclerosis; VAF 21-0960G-1, Esophageal Disorders (including GERD, Hiatal Hernia, and Other Esophageal Disorders) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any esophageal disorders; VAF 21-0960G-2, Gall Bladder and Pancreas **Conditions Disability Benefits** Questionnaire, will gather information related to the claimant's diagnosis of any gall bladder and pancreas condition; VAF 21-0960G-3, Intestinal Conditions (Other than Surgical or Infectious) Including Irritable Bowel Syndrome, Crohn's Disease, Ulcerative Colitis, and Diverticulitis Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any intestinal conditions unrelated to surgery or infection; VAF 21-0960G-4, Infectious Intestinal Disorders (including Bacterial and Parasitic Infections) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any infectious intestinal condition; VAF 21-0960G-5, Hepatitis, Cirrhosis and other Liver Conditions Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any liver condition; VAF 21–0960G–6. Peritoneal Adhesions Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of peritoneal adhesions; VAF 21-0960G-7, Stomach and Duodenum Conditions (Not Including GERD or Esophageal Disorders) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any stomach or duodenum conditions; VAF 21–0960G–8, Intestinal Surgery (Bowel Resection, Colostomy, Ileostomy) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any surgical intestinal condition; VAF 21-0960H-2, Rectum and Anus Conditions (Including Hemorrhoids) Disability Benefits Questionnaire, will gather information related to the claimant's diagnosis of any rectum or