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.

Authority: Public Law 104–13; 44 U.S.C. 3501–3521.

Title: Claim for One Sum Payment Government Life Insurance (VA Form 29–4125). Claim for Monthly Payments Government Life Insurance (VA Form 29–4125a).

OMB Control Number: 2900–0060. Type of Review: Revision of a currently approved collection.

Abstract: These forms are used by beneficiaries applying for proceeds of Government Life Insurance policies. The information requested on the forms is required by law, 38 U.S.C. Sections 1917 and 1952.

Affected Public: Individuals and households.

Estimated Annual Burden: 12,010 hours.

Estimated Average Burden per Respondent: 6 minutes.

Frequency of Response: On occasion. Estimated Number of Respondents: 120,100.

By direction of the Secretary:

Danny S. Green,

Interim VA Clearance Officer, Office of Quality, Performance and Risk, Department of Veterans Affairs.

[FR Doc. 2019-02238 Filed 2-13-19; 8:45 am]

BILLING CODE 8320-01-P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0016]

Agency Information Collection Activity Under OMB Review: Claim for Disability Insurance Benefits, Government Life Insurance

AGENCY: Veterans Benefits Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995, 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 it includes the actual data collection instrument.

DATES: Comments must be submitted on or before March 18, 2019.

ADDRESSES: Submit written comments on the collection of information through www.Regulations.gov, or to Office of Information and Regulatory Affairs, Office of Management and Budget, Attn: VA Desk Officer; 725 17th St NW, Washington, DC 20503 or sent through electronic mail to oira_submission@omb.eop.gov. Please refer to "OMB Control No. 2900–0016" in any correspondence.

FOR FURTHER INFORMATION CONTACT: Danny S. Green, Enterprise Records

Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue NW, Washington, DC 20420, (202) 421–1354 or email *Danny.Green2@va.gov*. Please refer to "OMB Control No. 2900–0016" in any correspondence.

SUPPLEMENTARY INFORMATION:

Authority: 44 U.S.C. 3501-21.

Title: Claim for Disability Insurance Benefits, Government Life Insurance (VA Form 29–357).

OMB Control Number: 2900–0016. Type of Review: Reinstatement.

Abstract: VA Forms 29–357 is used by the policyholder to claim disability insurance benefits on S–DVI, NSLI and USGLI policies. The information requested is authorized by law, 38 U.S.C. 1912, 1915, 1922, 1942 and 1948.

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 at 83 FR 12328 on June 8, 2018, page 26748.

Affected Public: Individuals or Households.

Estimated Annual Burden: 14,175. Estimated Average Burden per Respondent: 1 Hour and 45 minutes.

Frequency of Response: Once.
Estimated Number of Respondents: 8,100.

By direction of the Secretary:

Danny S. Green,

Interim VA Clearance Officer, Office of Quality, Performance and Risk, Department of Veterans Affairs.

[FR Doc. 2019–02232 Filed 2–13–19; 8:45 am]

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