

Connection for Post-Traumatic Stress Disorder (PTSD) Secondary to Personal Assault (VA Form 21-0781a).

*OMB Control Number:* 2900-0659.

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

*Abstract:* VA Forms 21-0781 and 21-0781a are used to gather specific information about in-service stressors, so VA can assist claimants in obtaining credible supporting evidence that the claimed stressors occurred. In-service stressors reported by veterans must be verifiable. VA cannot thoroughly research military records and other sources of information for credible supporting evidence unless the veteran provides VA with specific information about the in-service stressors. The forms request information that is necessary to conduct meaningful research of records.

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 81 FR 241 on December 15, 2016, pages 90922 and 90923.

*Affected Public:* Individuals or Households.

*Estimated Annual Burden:* 17,780.

*Estimated Average Burden per Respondent:* 70 minutes.

*Frequency of Response:* One time.

*Estimated Number of Respondents:* 15,240.

By direction of the Secretary.

**Cynthia Harvey-Pryor,**

*Department Clearance Officer, Office of Privacy and Records Management, Department of Veterans Affairs.*

[FR Doc. 2017-04429 Filed 3-6-17; 8:45 am]

**BILLING CODE 8320-01-P**

## DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0404]

### Agency Information Collection Activity: Application for Increased Compensation Based on Unemployability (VA Form 21-8940)

**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.

VA Form 21-8940 is used by veterans to apply for increased VA disability compensation based on the inability to secure or follow a substantially gainful occupation due to service connected disabilities. Without the information, entitlement to individual unemployability benefits could not be determined.

**DATES:** Written comments and recommendations on the proposed collection of information should be received on or before May 8, 2017.

**ADDRESSES:** Submit written comments on the collection of information through Federal Docket Management System (FDMS) at [www.Regulations.gov](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 email to [nancy.kessinger@va.gov](mailto:nancy.kessinger@va.gov). Please refer to "OMB Control No. 2900-0404" in any correspondence. During the comment period, comments may be viewed online through the FDMS.

**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:* Veteran's Application for Increased Compensation Based on Unemployability (VA Form 8940).

*OMB Control Number:* 2900-0404.

*Type of Review:* Extension of an approved collection.

*Abstract:* VA Form 21-8940 is used by veterans to apply for increased VA disability compensation based on the inability to secure or follow a substantially gainful occupation due to service connected disabilities. Without the information, entitlement to individual unemployability benefits could not be determined.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 18,000 hours.

*Estimated Average Burden per Respondent:* 45 minutes.

*Frequency of Response:* One time.

*Estimated Number of Respondents:* 24,000.

By direction of the Secretary.

**Cynthia Harvey-Pryor,**

*Department Clearance Officer, Office of Privacy and Records Management, Department of Veterans Affairs.*

[FR Doc. 2017-04346 Filed 3-6-17; 8:45 am]

**BILLING CODE 8320-01-P**

## DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0808]

### Agency Information Collection Activity Under OMB Review: (Back (Thoracolumbar Spine) Conditions Disability Benefits Questionnaire (VA Form 21-0960M-14)

**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 April 6, 2017.

**ADDRESSES:** Submit written comments on the collection of information through [www.Regulations.gov](http://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](mailto:oira_submission@omb.eop.gov). Please refer to "OMB

Control No. 2900–0808” in any correspondence.

**FOR FURTHER INFORMATION CONTACT:**

Cynthia Harvey-Pryor, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (202) 461–5870 or email [cynthia.harvey-pryor@va.gov](mailto:cynthia.harvey-pryor@va.gov). Please refer to “OMB Control No. 2900–0808” in any correspondence.

**SUPPLEMENTARY INFORMATION:**

*Title:* (Back (Thoracolumbar Spine) Conditions Disability Benefits Questionnaire (VA Form 21–0960M–14).

*OMB Control Number:* 2900–0808.

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

*Abstract:* VA Forms 21–0960M–14 is used to gather necessary information from a claimant’s treating physician regarding the results of medical examinations.

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 Vol. 81, No. 250, Thursday, December 29, 2016, page 96202.

*Affected Public:* Individuals or Households.

*Estimated Annual Burden:* 37,500.

*Estimated Average Burden per Respondent:* 45 minutes.

*Frequency of Response:* One time.

*Estimated Number of Respondents:* 50,000.

By direction of the Secretary.

**Cynthia Harvey-Pryor,**

*Department Clearance Officer, Office of Privacy and Records Management, Department of Veterans Affairs.*

[FR Doc. 2017–04423 Filed 3–6–17; 8:45 am]

**BILLING CODE 8320–01–P**

**DEPARTMENT OF VETERANS AFFAIRS**

[OMB Control No. 2900–0810]

**Agency Information Collection Activity Under OMB Review: (Foot Conditions Including Flatfoot (Pes Planus) Disability Benefits Questionnaire (VA Form 21–0960M–6))**

**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 April 6, 2017.

**ADDRESSES:** Submit written comments on the collection of information through [www.Regulations.gov](http://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](mailto:oira_submission@omb.eop.gov). Please refer to “OMB Control No. 2900–0810” in any correspondence.

**FOR FURTHER INFORMATION CONTACT:**

Cynthia Harvey-Pryor, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (202) 461–5870 or email [cynthia.harvey-pryor@va.gov](mailto:cynthia.harvey-pryor@va.gov). Please refer to “OMB Control No. 2900–0810” in any correspondence.

**SUPPLEMENTARY INFORMATION:**

*Title:* (Foot Conditions Including Flatfoot (Pes Planus) Disability Benefits Questionnaire (VA Form 21–0960M–6).

*OMB Control Number:* 2900–0810.

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

*Abstract:* VA Forms 21–0960M–6 is used to gather necessary information from a claimant’s treating physician regarding the results of medical examinations.

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 Vol. 81, No. 250, Thursday, December 29, 2016, pages 96201 and 96202.

*Affected Public:* Individuals or Households.

*Estimated Annual Burden:* 40,000.

*Estimated Average Burden per Respondent:* 30 minutes.

*Frequency of Response:* One time.

*Estimated Number of Respondents:* 80,000.

By direction of the Secretary:

**Cynthia Harvey-Pryor,**

*Department Clearance Officer, Office of Privacy and Records Management, Department of Veterans Affairs.*

[FR Doc. 2017–04424 Filed 3–6–17; 8:45 am]

**BILLING CODE 8320–01–P**

**DEPARTMENT OF VETERANS AFFAIRS**

[OMB Control No. 2900–0655]

**Agency Information Collection Activity Under OMB Review (Residency Verification Report—Veterans and Survivors (FL 21–914))**

**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. 3501–21), 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 April 6, 2017.

**ADDRESSES:** Submit written comments on the collection of information through [www.Regulations.gov](http://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](mailto:oira_submission@omb.eop.gov). Please refer to “OMB Control No. 2900–0655” in any correspondence.

**FOR FURTHER INFORMATION CONTACT:**

Cynthia Harvey-Pryor, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (202) 461–5870 or email [cynthia.harvey-pryor@va.gov](mailto:cynthia.harvey-pryor@va.gov). Please refer to “OMB Control No. 2900–0655” in any correspondence.

**SUPPLEMENTARY INFORMATION:**

*Title:* Residency Verification Report—Veterans and Survivors (FL 21–914).

*OMB Control Number:* 2900–0655.

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

*Abstract:* VA Form Letter 21–914 gathers the information necessary to