its expected cost and burden; it includes the actual data collection instrument.

DATES: Comments must be submitted on or before March 1, 1999.

FOR FURTHER INFORMATION OR A COPY OF THE SUBMISSION CONTACT: Ron Taylor, Information Management Service (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420, (202) 273–8015 or FAX (202) 273–5981. Please refer to "OMB Control No. 2900–0148."

SUPPLEMENTARY INFORMATION:

Title and Form Numbers: Notice of Past Due Payment, VA Form 29–389e.

OMB Control Number: 2900–0148.

Type of Review: Reinstatement, without change, of a previously approved collection for which approval has expired.

Abstract: The form is used by veterans who have applied for National Service Life Insurance as a temporary measure to restore continuous protection until a final decision is made by VA to establish the insured's eligibility.

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 September 14, 1998 at page 49157.

Affected Public: Individuals or households.

Estimated Annual Burden: 484 hours.

Estimated Average Burden Per Respondent: 15 minutes.

Frequency of Response: On occasion.

Estimated Number of Respondents: 1,936.

Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, Allison Eydt, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395–4650. Please refer to "OMB Control No. 2900–0148" in any correspondence.

Dated: November 23, 1998.

By direction of the Secretary.

Genie McCully,

Program Analyst, Information Management Service.

[FR Doc. 99–2116 Filed 1–28–99; 8:45 am] BILLING CODE 8320–01–P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0188]

Agency Information Collection Activities Under OMB Review

AGENCY: Veterans Health Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C., 3501 *et seq.*), this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted 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 March 1, 1999.

FOR FURTHER INFORMATION OR A COPY OF THE SUBMISSION CONTACT: Ron Taylor, Information Management Service (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420, (202) 273–8015 or FAX (202) 273–5981. Please refer to "OMB Control No. 2900–0188."

SUPPLEMENTARY INFORMATION:

Title: Prescription, Authorization, Application, Procurement, Repair and Loan of Prosthetic Items.

Form Numbers

a. VA Form 10–2421, Prosthetic Authorization for Items or Service.

b. VA Form 10–2520, Prosthetic Service Card Invoice.

c. VA Form 10–2914, Prescription and Authorization for Eyeglasses.

d. Form Letter 10–90, Request to Submit Estimate.

e. Form Letter 10–426, Loan Followup Letter.

f. VA Form 10–1394, Loan Follow-up Letter.

g. VA Form 10–0103, Application for Assistance in Acquiring Home Improvement and Structural Alterations.

OMB Control Number: 2900-0188.

Type of Review: Reinstatement, with change, of a previously approved collection for which approval has expired.

Abstract

a. VA Form 10–2421 is used for the direct procurement of new prosthetic appliances and/or services and standardizes the direct procurement

authorization process. The form eliminates the need for separate purchase orders, expedites patient treatment and improves the delivery of prosthetic services. Without this form the delivery time for prosthetic appliances and services would be drastically increased.

b. VA Form 10–2520 is used by the commercial vendors, after completing repairs authorized for veterans, to request payment by VA. The use of the form standardizes repair/treatment invoices for prosthetic services rendered and standardizes the verification of these invoices. The veteran certifies that the repairs were necessary and satisfactory. This form is furnished to vendors upon request.

c. VA Form 10–2914 is used as a combination prescription, authorization and invoice. It allows veterans to purchase their eyeglasses directly. If the form is not used, the provisions of providing eyeglasses to eligible veterans may be delayed.

d. Form Letter 10–90 is issued to a contractor of the veteran's choice in order to solicit a price quote for a prosthetic device.

e. Form Letter 10–426 is used for the issuance of prosthetic devices that are loaned to eligible veterans. If the information is not collected or maintained, VA would have no information regarding equipment loaned to veterans; i.e., status, recovery, replacement and disposition.

f. VA Form 10–1394 is used to determine eligibility/entitlement and reimbursement of individual claims for automotive adaptive equipment.

g. VA Form 10–0103 is used to determine eligibility/entitlement and reimbursement of individual claims for home improvement and structural alterations.

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 December 31, 1997 at page 68359.

Affected Public: Business or other forprofit—Individuals or households.

Estimated Total Annual Burden: 37,079 hours.

- a. VA Form 10-2421-16,667 hours.
- b. VA Form 10-2520-3,334 hours.
- c. VA Form 10-2914-11,667 hours.
- d. Form Letter 10-90-1,875 hours.
- e. Form Letter 10-426-242 hours.
- f. VA Form 10-1394-2,711 hours.
- g. VA Form 10-0103-583 hours.

Estimated Average Burden Per Respondent

- a. VA Form 10-2421-4 minutes.
- b. VA Form 10-2520-5 minutes.
- c. VA Form 10–2914—4 minutes. d. Form Letter 10–90—5 minutes.
- e. Form Letter 10-426-1 minute.
- f. VA Form 10-1394-15 minutes.
- g. VA Form 10-0103-5 minutes.
- Frequency of Response: On occasion.

Estimated Number of Respondents: 519,844.

a. VA Form 10-2421-250,000. b. VA Form 10–2520—40,000. c. VA Form 10–2914—175,000. d. Form Letter 10–90—22,500. e. Form Letter 10-426-14,500. f. VA Form 10-1394-10,844. g. VA Form 10-0103-7,000. Send comments and recommendations concerning any

aspect of the information collection to VÅ's OMB Desk Officer, Allison Eydt, OMB Human Resources and Housing

Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395-4650. Please refer to "OMB Control No. 2900-0188" in any correspondence.

Dated: November 3, 1998.

By direction of the Secretary.

Donald L. Neilson,

Director, Information Management Service. [FR Doc. 99-2117 Filed 1-28-99; 8:45 am] BILLING CODE 8320-01-P