

dimmability requirement. The purpose of this requirement is to prevent such scenarios, ensuring that drivers can indeed adjust the brightness of controls in different driving conditions.

VIII. NHTSA's Decision

In consideration of the foregoing, NHTSA has decided that DCNA has not met its burden of persuasion that the subject FMVSS No. 101 noncompliance is inconsequential to motor vehicle safety. Accordingly, DCNA's petition is hereby denied, and DCNA is consequently obligated to provide notification of a free remedy for that noncompliance under 49 U.S.C. 30118 and 30120.

Authority: 49 U.S.C. 30118(d), 30120(h); delegations of authority at 49 CFR 1.95(a) and 501.8(g).

Eileen Sullivan,

Associate Administrator for Enforcement.

[FR Doc. 2026-05029 Filed 3-13-26; 8:45 am]

BILLING CODE 4910-59-P

DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0029]

Agency Information Collection Activity Under OMB Review: Offer to Purchase and Contract of Sale, Credit Statement of Prospective Purchaser, Addendum To Offer To Purchase (Virginia)

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 and recommendations for the proposed information collection should be sent by April 15, 2026.

ADDRESSES: To submit comments and recommendations for the proposed information collection, please type the following link into your browser: www.reginfo.gov/public/do/PRAMain, select "Currently under Review—Open for Public Comments", then search the list for the information collection by

Title or "OMB Control No. 2900-XXXX."

FOR FURTHER INFORMATION CONTACT: Dorothy Glasgow, 202-461-1084, VAPRA@va.gov.

SUPPLEMENTARY INFORMATION:

Title: Offer to Purchase and Contract of Sale (VA Form 26-6705), Credit Statement of Prospective Purchaser (VA Form 26-6705b), Addendum to Offer to Purchase (Virginia) (VA Form 26-6705d).

OMB Control Number: 2900-0029. <https://www.reginfo.gov/public/do/PRASearch>.

Type of Review: Revision of a currently approved collection.

Abstract: Under the authority of 38 U.S.C. 3720(a)(5) and (6) the Department of Veterans Affairs (VA) acquires properties for sale to the general public utilizing a private Contractor. Without this collection, a determination of the best offer for a property and the highest net return/cash equivalent value HNR/CEV could not be made to determine the most financially advantageous purchase offer to VA (VA Form 26-6705); the creditworthiness of a prospective buyer could not be determined and the offer to purchase could not be accepted (VA Form 26-6705b or FNMA1003; and, proper acknowledgment of State law by the buyer at or prior to closing would not be made (VA Form 26-6705d)). VA has also added Nine (9) new forms that are used in connection with the sale of VA-acquired properties. Each form has a new estimated burden. The information collected through these forms is necessary to identify the property, document, buyer and seller acknowledgements, support financing and contract actions, and complete the real estate transactions.

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 91 FR 765, January 8, 2026.

Affected Public: Individuals or Households.

Estimated Annual Burden: 4,572 hours annually.

Estimated Average Burden per Respondent: 7.91 minutes.

Frequency of Response: One-time.

Estimated Number of Respondents: 38,040.

Authority: 44 U.S.C. 3501 *et seq.*

Dorothy Glasgow,

Acting VA PRA Clearance Officer, Office of Enterprise and Integration, Data Governance Analytics, Department of Veterans Affairs.

[FR Doc. 2026-05060 Filed 3-13-26; 8:45 am]

BILLING CODE 8320-01-P

DEPARTMENT OF VETERANS AFFAIRS

Veterans Rural Health Advisory Committee

AGENCY: Department of Veterans Affairs.
ACTION: Notice of intent to file.

SUMMARY: We are giving notice that the Secretary of Veterans Affairs intends to renew the Department of Veterans Affairs Veterans Rural Health Advisory Committee for a 2-year period. The Secretary has determined that the Committee is necessary and in the public interest.

FOR FURTHER INFORMATION CONTACT:

Jeffrey Moragne, Committee Management Office, Department of Veterans Affairs, Advisory Committee Management Office (00AC), 811 Vermont Avenue, 4th Floor NW, Washington, DC 20420; telephone (202) 714-1578; or email at Jeffrey.Moragne@va.gov.

SUPPLEMENTARY INFORMATION: Pursuant to the Federal Advisory Committee ACT, notice is hereby given that the Secretary of Veterans Affairs (VA) intends to renew the Veterans Rural Health Advisory Committee (Committee or VRHAC) for two (2) years from the filing date of the charter's renewal. The purpose of the Committee is to advise the Secretary of VA on rural health care issues affecting Veterans. The VHRAC examines programs and policies that impact the delivery of VA rural health care to Veterans and discusses ways to improve and enhance VA access to rural health care services for Veterans.

In addition, pursuant to 41 C.F.R. section 102-3.65, the Department of Veterans Affairs provides this written notice determination stating that the Committee is in the public interest and found to be in accordance with the Federal Advisory Community Act (FACA), the 2025 FACA Final Rule, and current to the U.S. General Services Administration, Committee Management Secretariat guidance. The following factors below provide an overview of the Committee's operations and public interest intent.

Annual Budget—The overall operating costs for the Committee is \$184,169. All members receive travel expenses and a per diem allowance in

accordance with the Federal Travel Regulation for any travel made in connection with their duties as members of the Committee. The expected costs are broken into:

(i) Federal personnel (based on full-time equivalent (FTE) usage basis) is .80 with other Federal internal costs being \$135,369.

(ii) Proposed payments to Non-Federal Members is \$3,218. Payments to Federal Members are \$7,081. The Committee is composed of not more than 12 appointed members and up to 3 ex-officio members.

(iii) Reimbursable costs equate to travel reimbursement for Non-Federal Members is \$11,230, for Federal Members is \$3,671 and for Federal Staff is \$23,600.

This Committee does not have any dollar value of grants expected for the fiscal year.

Membership Selection—The Committee's membership includes academic experts in rural health care delivery, state and federal government professionals who focus on rural health issues, Department of Veterans Affairs officials at the state level, and selected Veterans service organization leaders. VRHAC members range from patient care advocates to medical policy strategists. Additionally, the Committee works with the Department's Advisory Committee Management Office, the Committee Chair, and the Office of Rural Health (ORD) leadership to ensure the committee is balanced ethnically and geographically to include representation of all five minority groups mandated by law: African American, Hispanic/Latino, Asian American, Pacific Islander, and Native American, including American Indian, Alaska Native, and Native Hawaiian.

Existing Federal Advisory Committees—The following list are the 27 VA advisory committees includes 18 that are statute (with an asterisk *) and 9 non-statutory committees.

- (1) VA National Academic Affiliations Council
- * (2) Advisory Committee on Cemeteries and Memorials
- (3) Cooperative Studies Scientific Evaluation Committee
- * (4) Advisory Committee on Disability Compensation

- * (5) Veterans' Advisory Committee on Education
- * (6) Veterans' Advisory Committee on Environmental Hazards (Administratively Inactive)
- * (7) Advisory Committee on Former Prisoners of War
- * (8) Geriatrics and Gerontology Advisory Committee
- * (9) Research Advisory Committee on Gulf War Veterans' Illnesses
- (10) Health Systems Research Service Merit Review Board
- * (11) Advisory Committee on Homeless Veterans
- (12) Joint Biomedical Laboratory Research and Development and Clinical Science Research and Development Services Scientific Merit Review Board
- * (13) Advisory Committee on Minority Veterans
- (14) National Research Advisory Council
- * (15) Advisory Committee on U.S. Outlying Areas and Freely Associated States
- * (16) Advisory Committee on Prosthetics and Special Disabilities Programs
- * (17) Advisory Committee on the Readjustment of Veterans
- * (18) Veterans' Advisory Committee on Rehabilitation
- (19) Rehabilitation Research and Development Service Scientific Merit Review Board
- (20) Veterans' Rural Health Advisory Committee
- * (21) Special Medical Advisory Group
- * (22) Advisory Committee on Structural Safety of Department of Veterans Affairs Facilities
- * (23) Advisory Committee on Tribal and Indian Affairs
- (24) Veterans' Family, Caregiver, and Survivor Advisory Committee
- * (25) Veterans and Community Oversight and Engagement Board
- (26) Department of Veterans Affairs Voluntary Service National Advisory Committee
- * (27) Advisory Committee on Women Veterans

Justification—VRHAC continues to provide valuable external rural health stakeholder perspective regarding rural health care and the challenges of

accessing and delivering services in rural and highly rural areas. Stakeholder representation of Federal, state, regional, and local organizations is good; though proposed solutions to overcoming challenges specific to rural Veterans are often limited by implementation feasibility in the VA and the Veterans Health Administration.

Summary of Previous Committee Accomplishments—The Committee's standard operations entail conducting one local meeting in Washington, DC to receive updates from VA Senior Leaders, and one site visit to a VA facility with a high concentration of rural Veterans. Its meetings focus on evaluating the programs and initiatives of VHA's ORD and its VHA program office partners; and on recommending ways to improve. The Committee evaluates current VA rural health program activities and identifies existing barriers to rural health services. It recommends strategies to improve those services for Veterans to the Secretary of Veterans Affairs.

Why Committee is Essential—VRHAC provides advice and recommendations to the Secretary of Veterans Affairs on health care issues that affect Veterans residing in rural areas. The Committee meets at least twice annually to discuss programs and policies that impact the provision of VA health care to Veterans. This is obtained from its committee meetings and through the valuable external rural health stakeholder perspective regarding rural health care and the challenges of accessing and delivering services in rural and highly rural areas.

In conclusion, this Notice of Intent states that this renewing committee is in the public interest, essential to the conduct of agency business and that the information provided is not available through any other advisory committee or source within the Federal Government.

Dated: March 12, 2026.

LaTonya L. Small,

Federal Advisory Committee Management Officer.

[FR Doc. 2026-05111 Filed 3-13-26; 8:45 am]

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