Internet Appeal

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If You Do Not Want To Use This Online Appeal Process

Other Ways to Request an Appeal or Complete a Disability Report

If you prefer not to complete a Request for Reconsideration or a Disability Report on the Internet, you can use any of the following ways:

- Call our toll-free number, 1-800-772-1213. Explain that you don't
 want to use the online appeal process but do want to appeal the
 decision made in your case. Representatives are available Monday
 through Friday from 7 AM to 7 PM. If you are deaf or hard of
 hearing, call our toll-free 'TTY' number, 1-800-325-0778.
- Contact your <u>local Social Security Office</u> and tell our representative that you want to appeal the decision made on your case.
- Refer to your denial notice to find out the kind of appeal you need to request. You can print the form you need from our <u>Forms Page</u>. In addition to the Request for Reconsideration form, you will need to print and complete a paper Appeal Disability Report (SSA-3441) and an Authorization to Disclose Information to SSA (SSA-827). After you print out and complete all three forms, you should mail or take them to your local Social Security Office. We will be able to take action more quickly if we receive all three forms at the same time.

NOTE: You must have Adobe Reader on your computer to read and print the forms. If you do not have a current version of Adobe Reader, use this link to get a free copy of Adobe Reader.

If you live outside the United States, see <u>Service Around the World</u>.

Close this window to return to the appeal process.

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Privacy Information

The Social Security Act (sections 205(a), 702, 1631(e)(1)(a) and (b), and 1869(b)(1) and (c), and Public Law 106-169 (Section 809(a)(1) of Sections 251(a)) and Section 1839(i) of the Act (P.L. 108-173) as appropriate) authorizes the collection of information on this form. We need the information to continue processing your claim. You do not have to give it, but if you do not you may not receive benefits under the Social Security Act. We may give out the information on this form without your written consent if we need to get more information to decide if you are eligible for benefits or if a Federal law requires us to do so. Specifically, we may provide information to another Federal, State, or local government agency which is deciding your eligibility for a government benefit or program; to the President or Congressman inquiring on your behalf; to an independent party who needs statistical information for a research paper or audit report on a Social Security program; or to the Department of Justice to represent the Federal Government in a court suit related to a program administered by the Social Security Administration. We explain, in the Federal Register, these and other reasons why we may use or give out information about you. If you would like more information, get in touch with any Social Security office, the Veterans Affairs Regional Office in Manila, or any U.S. Foreign Service post.

We may also use the information you give us when we match records by computer. Matching programs compare our records with those of other Federal, State, or local government agencies. Many agencies may use matching programs to find or prove that a person qualifies for benefits paid by the Federal government. The law allows us to do this even if you do not agree to it.

Explanations about these and other reasons why information about you may be used or given out are available in Social Security offices. If you want to learn more about this, contact any Social Security office, the Veterans Affairs Regional Office in Manila, or any U.S. Foreign Service post.

Close this window to return to the appeal process.

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Paperwork Reduction Act

This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. The OMB Control Number for the Internet Appeal Disability Report is 0960-0144. The expiration date for this OMB Control Number is 8/31/2009. We estimate that it will take you an average of 120 minutes to respond, but total time required will depend upon the number of questions you need to answer for the Internet Appeal Disability Report.

You may send comments on our time estimate above to: SSA, 6401 Security Blvd, Baltimore, MD 21235-6401. **Send only comments relating to our time estimate to this address, not the completed form.**

If You Have Questions

Call our toll-free number, 1-800-772-1213. If you are deaf or hard of hearing, call our toll-free 'TTY' number, 1-800-325-0778. Representatives are available Monday through Friday from 7 AM to 7 PM.

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Submitting Additional Evidence

If you have additional evidence to submit in support of your claim:

- If the evidence is medical information, we can request it from the source. Please include the name and address of the doctor, hospital or other source when you complete the Appeal Disability Report, which is Part 2 of the Internet Appeal process.
- If you have evidence in your possession that you wish to submit, please send it to Social Security with the other documents we will ask you to print at the end of Part 2. We will give you the address of your local office.

If you are not submitting additional evidence now but would like to do so later:

- Please submit your evidence to the hearing office within 10 days.
- You may submit it directly to the hearing office that is handling your case. Your local Social Security office can give you the address.
- If you received a "Notice of Federal Reviewing Official Decision" you
 must submit your evidence no fewer than five days before your hearing
 unless you have a good reason for not doing so.

Close this window to return to the appeal process.

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Your Right To Representation

You can handle your own Social Security appeal with free help from Social Security, or you can choose a lawyer, a friend or someone else to help you. Someone you appoint to help you is called your "representative". You cannot choose someone who has been suspended or disqualified from representing others before the Social Security Administration or who may not, by law, act as a representative. You may contact your local Social Security office for a list of legal referral and service organizations. We will work with your representative, just as we would work with you.

If you want to appoint someone as your representative, you or your representative must first complete Form SSA-1696 (Appointment of Representative) or send a written statement naming your representative. If your representative is not an attorney, he or she must sign the statement or SSA-1696 or state in writing that he or she accepts the appointment, before you send it to us.

Your representative cannot charge or collect a fee from you without first getting written approval from Social Security. However, your representative may accept money from you in advance as long as it is held in a trust or escrow account.

Both you and your representative are responsible for providing us with accurate information. It is illegal to furnish false information knowingly and willfully. If you do, you may face criminal prosecution.

You can get more information about having a representative by selecting the link <u>Your Right to Representation</u>.

If You Have Questions

Call our toll-free number, 1-800-772-1213. If you are deaf or hard of hearing, call our toll-free 'TTY' number, 1-800-325-0778. Representatives are available Monday through Friday from 7 AM to 7 PM.

Close this window to return to the appeal process.

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Who Is The Wage Earner?

The Wage Earner is a person who earns Social Security credits while working for wages or self-employment income. He or she is sometimes referred to as the "Number Holder" or "Worker."

If the Claim Number is not your own Social Security Number, then the Wage Earner is the spouse or parent on whose record you filed for disability. You should enter his or her name in the space provided.

You may continue without providing this information.

If You Have Questions

Call our toll-free number, 1-800-772-1213. If you are deaf or hard of hearing, call our toll-free 'TTY' number, 1-800-325-0778. Representatives are available Monday through Friday from 7 AM to 7 PM.

Close this window to return to the appeal process.

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About Your Notice and Claim Numbers

Your notice has information that can help you complete the appeal request.

This example is just to show you where to look. In order to continue, your notice title should be one of the following:

- Notice of Disapproved Claim
- Notice of Reconsideration
- Notice of Federal Reviewing Official Decision

SOCIAL SECURITY ADMINISTRATION Retirement, Survivors, and Disability Insurance This is Supplement Security Income your Notice of Reconsideration Notice This is your title. Date: [Month, Day, Year] claim number, Claim Number: 000-00-0000 A including any letter(s) at the [Your Name] [Your Address] end. You asked us to take another look at your claim for Social Security disability benefits. Someone who did not make the first decision reviewed your case, including any new facts we received, and found that the first decision was correct.

If You Have Questions

Call our toll-free number, 1-800-772-1213. If you are deaf or hard of hearing, call our toll-free 'TTY' number, 1-800-325-0778. Representatives are available Monday through Friday from 7 AM to 7 PM.

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Disability Report - Appeal

Name: John Public SSN: xxx-xx-1234



You Cannot Use the Internet to Complete Your Appeal Request

You do not meet one or more of the qualifications to file your request for appeal using the Internet. To request an appeal, you should contact Social Security immediately as explained below and tell them that you received this message.

To contact Social Security:

- Call our toll-free number, 1-800-772-1213. Explain that you are unable
 to use the online appeal process but do want to appeal the decision
 made in your case. If you are deaf or hard of hearing, call our toll-free
 "TTY" number, 1-800-325-0778. Representatives are available
 Monday through Friday from 7 AM to 7 PM.
- Visit <u>your local Social Security Office</u> and tell the representative that you want to appeal the decision made on your case.

Select the Exit button to leave this report. You will be taken to the Social Security home page.

Exit

How to Move Around This Report