New screen #1

Official Website of the U.S. Social Security Administration	
Apply for Benefits	
Benefits Application Terms of Service	
I understand that I am entering a U.S. Government System to file a benefit application with the Social Security Administration. I understand that I need to provide the Social Security Administration information to process the benefit application. I understand that failing to agree to the statements below will result in my inability to file a benefit application online, which may prevent the Social Security Administration from making an accurate and timely decision about eligibility for benefits.	n 1
I understand that:	
 the Social Security Administration vill validate the information I provide against the information in Social Security Administration's systems. 	
my activities may be monitored within this site.	
 any person who knowingly and willfully tries to obtain Social Security benefits falsely could be punished by a fine or imprisonment, or both. 	
 I am authorized to file a claim on my own behalf or on behalf of someone else with the Social Securit Administration. 	ty
Information about Social Security's Online Policies The privacy of our customers is always very important to us. We encourage you to read our Privacy Act Statement.	
□ I understand and agree to the above statements.	
Next Exit	
Privacy Policy Website Policies & Other Important Information About Us S	Site Map

We will present the TOS screen to any individual within the SSA website indicating he or she wants to file an online benefit application i.e. selects "Apply for benefits" or "Return to saved application."

New screen #1 with error Message

	Text Size 💌 Accessibility Help
Official Website of the U.S. Social Security Administration	
Apply for Benefits	
There is 1 error on the page. Please correct the error marked with a	
Error: Terms of Service Agreement	
Benefits Application Terms of Service	
I understand that I am entering a U.S. Government System to file a benefit application with the Social Security Administration. I understand that I need to provide the Social Security Administration information to process the benefit application. I understand that failing to agree to the statements below will result in my inability to file a benefit application online, which may prevent the Social Security Administration from making an accurate and timely decision about eligibility for benefits.	
 the Social Security Administration will validate the information I provide against the information in Social Security Administration's systems. 	
 my activities may be monitored within this site. any person who knowingly and willfully tries to obtain Social Security benefits falsely could be punished by a fine or imprisonment or both. 	
 I am authorized to file a claim on my own behalf or on behalf of someone else with the Social Security Administration. 	
Information about Social Security's Online Policies The privacy of our customers is always very important to us. We encourage you to read our Privacy Act Statement.	
You must agree to the Terms of Service to continue. I understand and agree to the above statements.	
Next Exit	_
Privacy Policy Website Policies & Other Important Information About Us Site	Мар

Individuals not selecting the checkbox to accept the TOS will receive a notification what he or she must accept the TOS to continue. Individuals also have the option to exit the screen if he or she does not want to proceed.

Plea We w of Sei	se Note: ill ask you to create or login to your <i>my</i> Social Security account when you start the ap vice if you need to create an account.	plication. You will receive an additional Terms
Apply C	Online for Retirement /Medicare Benefits Getting Ready Before you start your application, we recommend that you take a moment to prepare yourself by reviewing a few items:	Video Introduction Helpful hints for applying online More Information
	 Make sure you meet the requirements to apply online for Retirement. Gather all of the information you need to complete the application process. 	When to Start Receiving Retirement Benefits
	Apply & Complete After logging into your <i>my</i> Social Security account, applying for Retirement/Medicare may take between 10 to 30 minutes to complete depending on your situation. You can save your application as you go, so you can take a break at any time.	Your Rights to Representation
	Start a New Application or Return to Saved Application Process Follow Up	Your privacy is important. For details about our use of your information, w encourage you to read our Privacy Act Statement.
	Once you have submitted your application, a representative may contact you with updates or questions about your application. You may check the status of your online application by logging into <i>my</i> Social Security.	

Welcome screen for Retirement/Medicare online application.

- We added an informational banner at the top of the page to let individuals know about the new requirement to create or login to their "*my* Social Security" account. The banner also informs individuals that they may see an additional TOS if they need to create an account.
- Under the "Apply & Complete" section, we added a sentence to clarify that the time listed to file an online application starts after the individual creates or logs into their "*my* Social Security" account.
- Under the "Follow Up" section, we updated the section to reflect plain language.

Official Website of the U.S. Social Security Administration	Text Size 💽 Accessibility He
Apply for Benefits	
Please Note: We will ask you to create or login to your my Social Security account when you start the ap of Service if you need to create an account.	plication. You will receive an additional Terms
Apply Online for Disability Benefits	Video Introduction Helpful hints for applying online
Getting Ready Before you start your application, we recommend that you take a moment to prepare yourself by reviewing a few items: 1. Make sure you meet the requirements to apply online for Disability. 2. Gather all of the information you need to complete the application process.	More Information Information about Social Security Disability Programs
Apply & Complete Applying for disability is a multi-step process. After logging into your <i>my</i> Social Security account, applying for disability may take between one to two hours to complete depending on your situation. You can save your application as you go, so you can take a break at any time.	Your Right to Representation
Start a New Application or Return to Saved Application Process	Your privacy is important. For details about our use of your information, we encourage you to read our Privacy Act Statement.
Follow Up Once you have submitted your application, a representative may contact you with updates or questions about your application. You may check the status of your online application by logging into <i>my</i> Social Security.	
Privacy Policy Website Policies & Other Important Information About	t Us Sile Map

Welcome screen for Disability applicants – We made the same changes as described on the modified screen #2.

Official Website of the U.S. Social Security	ity Administration		
Please Note: We will ask you to create or login to your of Service if you need to create an account	my Social Security account when you start the app int.	olication. You will receiv	e an additional Terms
Apply Online for Disability Ber	efits	Vid	eo Introduction Helpful hints for applying online
Getting Ready Before you start your application, w prepare yourself by reviewing a few 1. Make sure you meet the requir 2. Gather all of the information you	we recommend that you take a moment to v items: ements to apply online for Disability. wu need to complete the application process.	More Information ab Disability Prog	on out Social Security rams
Apply & Complete Applying for disability is a multi-ste Security account, applying for disal complete depending on your situat so you can take a break at any time	p process. After logging into your <i>my</i> Social bility may take between one to two hours to ion. You can save your application as you go, a.	Your Right to F	Representation Other Languages
Start a New Application of Follow Up Once you have submitted your a with updates or questions about your online application by loggin	Information in Other Languages If you prefer to complete your application in a lat English, the online application will give you the of appointment to apply for benefits in your preferr online application is currently only available in E	nguage other than option to schedule an ed language. The nglish.	ant.

We added a link under "More Information" on both Retirement/Medicare and Disability screens to inform individuals they can schedule an appointment to file in his or her preferred language.

pply	for Benefits	
Apply	Online for Retirement /Medicare Benefits	Video Introduction
E E	 Getting Ready Before you start your application, we recommend that you take a moment to prepare yourself by reviewing a few items: 1. Make sure you meet the requirements to apply online for Retirement. 2. Gather all of the information you need to complete the application process. 	More Information When to Start Receiving Retirement Benefits
	Apply & Complete It may take between 10 to 30 minutes to complete depending on your situation. You can save your application as you go, so you can take a break at any time. Start a New Application or Return to Saved Application Process	Other Ways to Apply for Benefits Your Rights to Representation
2	Follow Up Once you have submitted your application, a representative may contact you with updates or questions about your application. You may check the status of your online application by logging into <i>my</i> Social Security.	Your privacy is important. For details about our use of your information, we encourage you to read our Privacy Act Statement.

Individuals who log into their "*my* Social Security" account prior to coming to iClaim will not see the informational banner requiring individuals to create or login to their accounts

The Is Completing This Application?	oply for Benefits	5	
Il us information about the person completing this application:	Vho Is Completing	g This Application?	
	I us information about t	he person completing this application:	
I am applying for someone else, who is not with me, and therefore cannot sign the application at this time.) I am applying for someor	e else, who is not with me, and therefore cannot sign the applica	tion at this time.

We removed the second option "I am helping someone who wants to apply for benefits and is with me" and relocated the "Internet Special Notice Option" to the "Information about Applicant" screen modified screen#11).

Screen #6 prior to changes

Social Security The Official Website of the U.S. Social Security Administration	
Apply for Benefits	
Who Is Completing This Application?	
Tell us information about the person completing this application: I am applying for myself. I am helping someone who wants to apply for benefits and is with me. I am helping someone who is not with me, and therefore cannot sign the application at this time. 	
Blind or visually impaired applicants can use the Internet Special Notices Option page to choose how to receive notices from Social Security.	
Please select one:	
OI am not blind or visually impaired.	
O I am blind of visually impaired. I have visited and made a selection in the internet Special Notice Options page.	
Next Previous	

Soc		rity ocial Security Administratio	n		
Apply for Be	enefits	,			
You have We will ass my Social	successfully created and a created and a count of the created and a count of the created and a creat	ated or logged into yo t with your application for als anytime you return to	ur my Social Security acco benefits. You will be required to your application for benefits.	ount. to use your	
Information A	bout Applican	t			
Your Name: Please provide th	e name as it appea	ars on your most recent S	Social Security card.		
First	Middle	Last	Suffix		
Social Security	Number (SSN):				
- ~					
Gender: OMale OF	emale				
Are you <u>blind o</u> ⊖Yes ⊖N	do you have low	<u>vision even with glass</u>	es or contacts?		
During the last 1 conditions that result in death? OYes ON	4 months, have y have lasted or are ? More Info	ou been unable to work expected to last at leas	t because of illnesses, injurie st 12 months or can be expec	2s, or cted to	

We will display this message to individuals who successfully created or logged into their "*my* Social Security" account.

Social Security Number (SSN): Determine the Middle Last Suffix Social Security Number (SSN): Determine The Middle Last Suffix Social Security Number (SSN): Determine The Middle Last Suffix Social Security Number (SSN): Determine The Middle Last Suffix Social Security Number (SSN): Determine The Middle Last Suffix Social Security Number (SSN): Determine The Middle Comparison of the State Sta			Text Size 💽 Accessibility H
Diffical Website of the U.S. Social Security Administration pipt for Benefits Image: Social Security Administration Please provide the information below so we can determine if you may continue with the application. Information About Applicant Your Name: Please provide the name as it appears on your most recent Social Security card. Please provide the name as it appears on your most recent Social Security card. First Middle Last Social Security Number (SSN): Gender: Male Female Are you blind or do you have low vision even with glasses or contacts? Yes Yes During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be	Soc	rial Security	
pply for Benefits You did not create or sign into your my Social Security account. Please provide the information below so we can determine if you may confinue with the application. Information About Applicant Your Name: Please provide the name as it appears on your most recent Social Security card. Please provide the name as it appears on your most recent Social Security card. First Middle Last Suffix Social Security Number (SSN): Date of Birth: Gender: Male Female Are you blind or do you have low vision even with glasses or contacts? Yes No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? Next Exit	USA Official	Website of the U.S. Social Security Administration	
pply for Benefits You did not create or sign into your my Social Security account. Please provide the information below so we can determine if you may continue with the application. Information About Applicant Your Name: Please provide the name as it appears on your most recent Social Security card. Please provide the name as it appears on your most recent Social Security card. First Middle Last Social Security Number (SSN):			
You did not create or sign into your my Social Security account. Please provide the information below so we can determine if you may continue with the application. Information About Applicant Your Yame: Please provide the name as it appears on your most recent Social Security card. First Middle Last Suffix Social Security Number (SSN):	pply for Be	enefits	
You did not create or sign into your my Social Security account. Please provide the information below so we can determine if you may continue with the application. Information About Applicant Your Name: Please provide the name as it appears on your most recent Social Security card.	Δ		
Information About Applicant Your Name: Please provide the name as it appears on your most recent Social Security card. First Middle Last Suffix Social Security Number (SSN):	You did not Please prov	create or sign into your <i>my</i> Social Security account.	ication
Information About Applicant Your Name: Please provide the name as it appears on your most recent Social Security card.	r iouse prot		
Your Name: Please provide the name as it appears on your most recent Social Security card. Image: Social Security Number (SSN): Social Security Number (SSN): Image: Social Sec	Information A	bout Applicant	
Please provide the name as it appears on your most recent Social Security card. First Middle Last Social Security Number (SSN): Date of Birth:	Your Name:		
First Middle Social Security Number (SSN): Date of Birth: - Of Birth: - Order of Birth: - Of Birth: - Order of Birth: - Other of Birth: - - Gender: Other of One of Dirth: - - - Other of One of	Please provide th	e name as it appears on your most recent Social Security card.	
Social Security Number (SSN): Date of Birth: - ✓ Gender: Male Female Are you blind or do you have low vision even with glasses or contacts? Yes No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? West Exit	First	Middle Last Suffix	
Social Security Number (SSN): Date of Birth: Gender: Male Female Are you blind or do you have low vision even with glasses or contacts? Yes No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? Yes No Next Exit			
Date of Birth:	Social Security I	Number (SSN)	
Date of Birth: - ▼ Gender:			
Date of Birth: - • Gender: • OMale • Female Are you blind or do you have low vision even with glasses or contacts? Yes • No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? • More Info • Yes • No Next			
Date of Birth: Gender: OMale Female Are you blind or do you have low vision even with glasses or contacts? OYes No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? No No No No No No			
Gender: Male Female Are you blind or do you have low vision even with glasses or contacts? Yes No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? More Info Yes No No	Date of Birth:		
Gender: Male Female Are you blind or do you have low vision even with glasses or contacts? Yes No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? More Info Yes No No	- ~		
Gender:			
Male Female Are you blind or do you have low vision even with glasses or contacts? Yes No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? @ More Info Yes No Next Exit	Gender:		
Are you blind or do you have low vision even with glasses or contacts? OYes ONo During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? Ore More Info OYes ONo Next Exit	OMale OF	male	
Are you blind or do you have low vision even with glasses or contacts? Yes No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? More Info Yes No Next Exit			
Yes No During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? Yes No Next Exit		do you have low vision even with glasses or contacts?	
During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? Orego More Info Yes No Next Exit	Are you blind or		
During the last 14 months, have you been unable to work because of illnesses, injuries, or conditions that have lasted or are expected to last at least 12 months or can be expected to result in death? Yes No No Next Exit		do you have low vision even with glasses or contacts?	
Conductors that have lasted of are expected to last at least 12 months of Can be expected to result in death? @ More Info OYes ONo	Are you <u>blind or</u> OYes ON	0	
OYes ONo Next Exit	Are you <u>blind or</u> Yes N During the last 1	4 months, have you been unable to work because of illnesses, injuries, or	
Next Exit	Are you <u>blind or</u> Yes N During the last 1 conditions that I result in death?	4 months, have you been unable to work because of illnesses, injuries, or lave lasted or are expected to last at least 12 months or can be expected to Origon More Info	······
	Are you blind or Yes N During the last 1 conditions that I result in death? Yes N	4 months, have you been unable to work because of illnesses, injuries, or lave lasted or are expected to last at least 12 months or can be expected to More Info	, ,
	Are you blind or Yes N During the last 1 conditions that I result in death? Yes N Next	4 months, have you been unable to work because of illnesses, injuries, or have lasted or are expected to last at least 12 months or can be expected to More Info	······

We will display this message to individuals who were not able to create or log into their "*my* Social Security" account.

Screen #9

Informatio	on About Applicant
Your Name: Please provide	he name as it appears on the most recent Social Security card.
First	Middle Last Suffix
Gender: ⊖Male ○Fer	nale
Are you blind o	or do you have low vision even with glasses or contacts?

Individuals who logged to their account prior to entering to the online application will not see the message at the top of the screen.

Modify Screen #10

Social Security Number (SSN): First Middle Last Suffix Social Security Number (SSN): First Middle contact Social Security Number (SSN): Social Security					iext Size 💌	Accessionly rich
Official Weskie of the U.S. Social Security Administration upply for Benefits Information About Applicant Your Name: Please provide the name as it appears on your most recent Social Security card. First Social Security Number (SSN): Image: Date of Birth: Image: Cender: Mide: Permale Stat's Definition of Blind and Low Vision We consider you to be blind field is 20 depres or less in your better eye for a period that lasted or is expected to last at least 12 months. Image: Not	USA	Social Security				
Apply for Benefits Information About Applicant Your Name: Please provide the name as it appears on your most recent Social Security card. First Middle Last Suffix Social Security Number (SSN): Date of Birth: Cender: Male Female Are your blind or do you have low vision even with glasses or contacts? Yes SA's Definition of Blind and Low Vision We consider you to be blind if your vision can't be corrected to better than 20/200 in period that lasted or is expected to last at least 12 months.	WISTRAC	Official Website of the U.S. Social Security Administration				
Information About Applicant Your Name: Please provide the name as it appears on your most recent Social Security card.	opply f	or Benefits				
Your Name: Please provide the name as it appears on your most recent Social Security card. First	Informa	ation About Applicant				
Please provide the name as it appears on your most recent Social Security card. First Middle Social Security Number (SSN):	Your Nan	ne:				
First Middle Last Suffix Social Security Number (SSN):	Please pr	ovide the name as it appears on your most recent Social Security card.				
Social Security Number (SSN): Date of Birth:	First	Middle Last Suffix				
Social security number (SSN): Date of Birth: - - Officient OMale Female Are you blind or do you have low vision even with glasses or contacts? OYes SSA's Definition of Blind and Low Vision We consider you to be blind if your vision can't be corrected to better than 20/200 In your better eye or if your visual field is 20 degrees or less in your better eye for a period that lasted or is expected to last at least 12 months. Next	0					
Date of Birth: ✓ ✓ ✓ Gender: Male Female Are you Are you blind or do you have low vision even with glasses or contacts? O'Yes SA's Definition of Blind and Low Vision We consider you to be blind if your vision can't be corrected to better than 20/200 in your better eye or if your visual field is 20 degrees or less in your better eye for a period that lasted or is expected to last at least 12 months. Yes No	SOCIAL SE	ecunty number (SSN):				
Date of Birth: Gender: Male Female Are you blind or do you have low vision even with glasses or contacts? Yes SSA's Definition of Blind and Low Vision We consider you to be blind if your vision can't be corrected to better than 20/200 X During treesult in condition is expected to last at least 12 months. Yes Yes No						
Gender: Male Female Are you blind or do you have low vision even with glasses or contacts? Yes SSA's Definition of Blind and Low Vision We consider you to be blind if your vision can't be corrected to better than 20/200 in your better eye or if your visual field is 20 degrees or less in your better eye for a period that lasted or is expected to last at least 12 months. Yes No						
Gender: OMale Female Are you blind or do you have low vision even with glasses or contacts? SSA's Definition of Blind and Low Vision O'Yes SSA's Definition of Blind and Low Vision X During trong	Date of E	Sirth:				
Gender: OFemale Are you blind or do you have low vision even with glasses or contacts? O'Yes SSA's Definition of Blind and Low Vision We consider you to be blind if your vision can't be corrected to better than 20/200 in your better eye or if your visual field is 20 degrees or less in your better eye for a period that lasted or is expected to last at least 12 months. O'Yes Next	Date of E	Sirth:				
Are you blind or do you have low vision even with glasses or contacts? OYes SSA's Definition of Blind and Low Vision During th condition of blind if your vision can't be corrected to better than 20/200 X In your better eve or if your visual field is 20 degrees or less in your better eve for a period that lasted or is expected to last at least 12 months. X OYes ONo	Date of E	Sirth:				
Are you blind or do you have low vision even with glasses or contacts? O'Yes O'Yes SSA's Definition of Blind and Low Vision We consider you to be blind if your vision can't be corrected to better than 20/200 in your better eye or if your visual field is 20 degrees or less in your better eye for a period that lasted or is expected to last at least 12 months. O'Yes Next	Date of E Gender: OMale	Sirth:				
OYes SSA's Definition of Blind and Low Vision × During tr Ssa's Definition of Blind and Low Vision can't be corrected to better than 20/200 × During tr in your better eye or if your visual field is 20 degrees or less in your better eye for a period that lasted or is expected to last at least 12 months. × OYes ONo No	Date of E Gender: OMale	Sirth:				
We consider you to be blind if your vision can't be corrected to better than 20/200 During thr in your better eye or if your visual field is 20 degrees or less in your better eye for a period that lasted or is expected to last at least 12 months. OYes ONo	Date of E Gender: Male	Sirth: Female blind or do you have low vision even with glasses or contacts?				
OYes ONo Next Exit	Date of E Gender: Male Are you	Sirth: Female blind or do you have low vision even with glasses or contacts? SSA's Definition of Blind and Low Vision	×	······		
Next Exit	Date of E Gender: OMale Are you Yes During tt conditior result in	Sirth:	× an 20/200 er eye for			
Next Exit	Date of E Gender: Male Are you Yes During th condition result in Yes	Sirth: ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ <td>an 20/200 er eye for</td> <td>······</td> <td></td> <td></td>	an 20/200 er eye for	······		
	Date of E Gender: OMale Are you Yes During th condition result in Yes	Sirth: Female blind or do you have low vision even with glasses or contacts? SSA's Definition of Blind and Low Vision We consider you to be blind if your vision can't be corrected to better that in your better eye or if your visual field is 20 degrees or less in your better a period that lasted or is expected to last at least 12 months. ONo	× an 20/200 er eye for]		

We added a hover functionality to the question "Are you blind or do you have low vision even with glasses or contacts?" to display the full definition of blind or low vision.

'our Name: lease provide the name as it appears on your most recent Social Security card.								
				~				
First	Middle	Last		Suffix				
Social Secu	Social Security Number (SSN):							
Date of Birt	ate of Birth:							
Gender: OMale	ender:)Male OFemale `							
Are you bli @Yes	nd or do you have low ⊖No	vision even with glas	sses or contac	its?				
Are you blin Yes Spe Blin choo	nd or do you have low No cial Notice Option Fo d or visually impaired use how to receive notic	vision even with glas or The Blind Or Visu applicants can use the es from Social Security	ally Impaired	ts? al Notice Option pa	ge to			
Are you blin Yes Spe Blin choo Have you vis Yes O	nd or do you have low No cial Notice Option Fo d or visually impaired se how to receive notic sited and made a selen No	vision even with glas or The Blind Or Visu applicants can use the es from Social Securit ction on the Internet	ally Impaired Internet Spec Special Notice	al Notice Option page?	ge to			
Are you blin Yes Spe Blin choo Have you vis Yes During the I conditions the I conditions the I	nd or do you have low No cial Notice Option Fo d or visually impaired se how to receive notic sited and made a selet No ast 14 months, have y that have lasted or are sth? <u>More Info</u>	vision even with glas or The Blind Or Visu applicants can use the es from Social Securit ction on the Internet s rou been unable to we	ally Impaired Internet Spec Special Notice ork because o rast 12 month	al Notice Option page? Option page? f illnesses, injuries s or can be expect	ge to , or ed to			

We relocated the "Internet Special Notice Option" from the "Who is Completing this Application?" screen and made it conditional to individuals answering "yes" to the "Are you blind or do you have low vision even with glasses or contacts?" question.



Informational screen for individuals who are unable to continue to file an online application because there is an issue with their information. We modified the format of the informational screen.

Text Size 💌 Ac				
Official Website of the U.S. Social Security Administration				
We're sorry				
We cannot process your request.				
have on file is different from the information you provided.				
Create a my Social Security Account You are required to create and sign in to a my Social Security account in order to file for benefits online. If you do not have an account, you can create one by returning to the Benefit Application and choosing to "Create An Account" when presented with the option.				
Contact Us If you live within the U.S., our territories or commonwealths, you may 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 a.m. to 7 p.m.				
Outside the United States We offer a variety of servicing options for those living abroad. For more information, visit Service Around the World.				
Evit				

Informational screen for individuals that does not have a "*my* Social Security" account. We modified the format of the informational screen and added information about requiring creating or signing into their account



Informational screen for individuals that have a "*my* Social Security" account but were not able to login (e.g. forgot password). We modified the format of the informational screen and added information about obtaining help with their "*my* Social Security" account

SIN SEC	Official Website of the U.S. Social Security Administration		T Accessionity I	
We'	We're sorry			
	 We cannot process your request. We are sorry for the inconvenience, but we cannot process your request online because some information have on file is different than the information you provided. If you live within the U.S., our territories or commonwealths, you may call our toll-free number, 1-800-772-1 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 a.m. to 7 p.m. Outside the United States We offer a variety of servicing options for those living abroad. For more information, visit Service Around the World. 	we 213.		
E	xit			

Informational screen for individuals who are unable to continue to file an online application because there is an issue with their information and we identified as banned from visiting the field office. We modified the format of the informational screen.

Official Website of the U.S. Social Security Administration	
We're sorry	
 We cannot process your request. We are sorry for the inconvenience, but we cannot process your request online because some information we have on file is different than the information you provided. If you live within the U.S., our territories or commonwealths, you may 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 a.m. to 7 p.m. Individuals with a my Social Security Account You are required to sign in to your account in order to file for benefits online. For assistance with your account, please call our toll-free number and say "Help Desk" after you hear the phrase "Briefly tell me why you are calling." Our Help Desk representatives can assist you until 12:00 midnight Eastern Time. Outside the United States We offer a variety of servicing options for those living abroad. For more information, visit Service Around the World 	
Exit	

Informational screen for individuals that have a "*my* Social Security" account but were not able to login (e.g. forgot password) and we identified as banned from visiting the Field Office (FO). We modified the format of the informational screen and added relevant information to "*my* Social Security" account.