

**Supporting Statement for Form SSA-1696**  
**Appointment of Representative**  
**20 CFR 404.1707, 404.1720, 408.1101, 416.1507, and 416.1520**  
**OMB No. 0960-0527**

**A. Justification**

**1. Introduction/Authoring Laws and Regulations**

People claiming a right or benefit (recipients) under the *Social Security Act (Act)* must notify the Social Security Administration (SSA) in writing if they appoint an individual to represent them in dealings with SSA. In addition, regulations require the representative to sign the notice of appointment (i.e. Form SSA-1696, Appointment of Representative, or another equivalent in writing) if the representative is not an attorney. The statutory authority for requiring this information is in Sections 206 and 1631(d) of the *Act*. The implementing regulations are in 20 CFR 404.1707, and 416.1507 of the *Code of Federal Regulations*. Sections 206(a) and 1631(d)(2) of the *Act* provide that when the individual representing the claimant is an attorney or a non-attorney meeting the requirements in Section 206(e) of the *Act*, the Commissioner shall certify payment out of past-due benefits a fee equal to as much as 25 percent of past-due benefits. The implementing regulations are in 20 CFR 404.1720 and 416.1520.

**2. Description of Collection**

Recipients use Form SSA-1696 to appoint a representative to handle their claim before SSA. Recipients' representatives use the Form SSA-1696 to indicate whether they will charge a fee, and, if so, specify their eligibility for direct fee payment. The representatives also use Form SSA-1696 to indicate their disbarment or suspension from a court or bar in which they previously admitted to practice, or their disqualification from participating in or appearing before a Federal program or agency. SSA recognizes the recipient's representative as the individual named in a notice of appointment (or written statement), which the recipient signed and filed at an SSA office. The SSA-1696 (or written statement) documents the appointment of a representative. We also use this form to collect the business affiliation and EIN of the representatives. Our regulations also require that if the representative is a non-attorney, they must sign the form or equivalent written statement. In addition, respondents use the SSA-1696-SUP1 to revoke their appointment of a representative, and representatives use the SSA-1696-SUP2 to withdraw their acceptance of the appointment. SSA uses this information to document the revocation and withdrawal of a representative. Respondents are applicants for, or recipients of, Social Security disability benefits (SSDI); SSI payments; or anyone pursuing a benefit or invoking a right under SSA programs, who are notifying SSA they have appointed a person to represent them in their dealings with SSA, and their non-attorney representatives who need to sign the form.

**3. Use of Information Technology to Collect the Information**

The SSA-1696, SSA-1696-SUP1, and SSA-1696-SUP2 are available in fillable

PDF format to download, when needed, from [www.ssa.gov](http://www.ssa.gov). Respondents fill out the appropriate form, print it, and mail it to the agency with supporting documentation. We then store the form(s) in the respondent's electronic claims file. SSA did not create an electronic version of these forms under the agency's Government Paperwork Elimination Act (GPEA) plan due to the agency's limited resources. We currently have higher volume forms which we still need to convert to electronic versions under GPEA, which take precedence to these forms.

**4. Why We Cannot Use Duplicate Information**

The nature of the information we collect and the manner in which we collect it preclude duplication. SSA does not use another collection instrument to obtain similar data.

**5. Minimizing Burden on Small Business**

This information collection does not significantly affect small businesses or other small entities.

**6. Consequence of Not Collecting Information or Collecting It Less Frequently**

If SSA does not collect the information identifying each recipient's representative, SSA could not fulfill its obligations under the Act and regulations to recognize an attorney, or other qualified individual, a recipient named as a representative. In addition, we only require the information from the SSA-1696-SUP1 and SSA-1696-SUP2 when necessary. SSA must identify the representative for each claim or claimant; therefore, SSA cannot conduct this information collection less frequently. There are no technical or legal obstacles to burden reduction.

**7. Special Circumstances**

There are no special circumstances that would cause SSA to conduct this information collection in a manner inconsistent with 5 *CFR* 1320.5.

**8. Solicitation of Public Comment and Other Consultations with the Public**

The 60-day advance Federal Register Notice published on July 10, 2018, at 83 FR 31987, and we received the following public comments:

- *The commenter suggested minor language changes to the form, and plain language changes to the form for clarity.*
- *The commenter suggested we change the language asking claimants to look in their phone books to find field offices to language stating claimants can use the office locator on our website.*
- *The commenter suggested we add a new bullet to the form to inform non-attorney representatives that they need to sign the form under certain circumstances and that SSA always recommends they sign the form.*
- *The commenter made suggestions for clarifying our instructions for filling out and submitting the form.*
- *The commenter suggested that we should update the instructions to state*

- *that only the representative should complete Section 4 of the form.*
- *The commenter suggested we make separate forms for Revocation of a Representative's Appointment and Withdrawal of a Representative, rather than having additional sections on the form.*
- *The commenter suggested we separate the sections for Authorization for Disclosure and Principal Representative.*
- *The commenter suggested we add the words "Completed by Claimant, only if applicable" to our requests for Number Holder's information; Principal Representative; and Representative's Information in Section 4 of the form.*
- *The commenter made suggestions to help clarify language in our instructions for Sections 5 and 6.*
- *The commenter made suggestions to divide the bullet in Section 7 regarding fee waivers into two separate options.*
- *The commenter suggested additional language for the Revocation of the Appointment of a Representative and for the Representative's Withdrawal of Acceptance of an Appointment to state that in the case of a revocation, the representative may still request a reasonable fee for service; and to instruct the representative to send a copy of the withdrawal for to the claimant, or an explanation that SSA will do so.*
  - *SSA accepted all of the changes and made them. Because of these comments, we created Forms SSA-1696-SUP1, and SSA-1696-SUP2.*

The 30-day FRN published on February 15, 2019 at 84 FR 4597, and we received the following comments:

- *The commenter stated that the instructions for Form SSA-1696 were incomplete, and suggested we add language stating "Section 6 may be completed by either you or your representative."*
- *The commenter also reiterated their earlier position (stated above) that Section 4 should only be completed by the representative.*
- *The commenter also suggested we add language to explain how and where to submit the form.*
- *The commenter pointed out some typos for us to fix.*
- *The commenter reiterated that they suggest we add language to Section 3 stating the claimant should only complete when applicable.*
- *The commenter made the following suggestions for the SSA-1696-SUP1 (Revocation Form):*
  - *They suggested we remove language from SSA-1696-SUP1 (Revocation form) stating, "Providing misleading or false evidence on this form or your application, or withholding or delaying giving us evidence, could lead to possible criminal charges or administrative sanctions against you or your representative." The commenter believes this language is unnecessary and could cause fear for the claimant.*

- o *They suggested we include language instructing the claimant to send a copy of the form to the representative, or stating that SSA will do so.*
- *The commenter made the following suggestions for the SSA-1696-SUP2 (Withdrawal Form):*
  - o *They suggested we add in regulatory text to explain when a representative can or should withdraw as a representative.*
  - o *They suggested moving the language stating “I am withdrawing from this appointment” to the bottom of the form, closer to the signature.*
  - o *They suggested we add language instructing the representative to send a copy of the form to the claimant, or stating that SSA will do so.*
- SSA accepted all of the suggested revisions, and made them.

**9. Payment or Gifts to Respondents**

SSA does not provide payments or gifts to the respondents.

**10. Assurances of Confidentiality**

SSA protects and holds confidential the information it collects in accordance with 42 U.S.C. 1306, 20 CFR 401 and 402, 5 U.S.C. 552 (Freedom of Information Act), 5 U.S.C. 552a (Privacy Act of 1974), and OMB Circular No. A-130.

**11. Justification for Sensitive Questions**

The information collection does not contain any questions of a sensitive nature.

**12. Estimates of Public Reporting Burden**

We estimate approximately 1,054,000 respondents complete these forms annually, as per the following burden chart:

<b>Modality of Completion</b>	<b>Estimated Number of Respondents</b>	<b>Frequency of Response</b>	<b>Average Burden Per Response (minutes)</b>	<b>Estimated Total Annual Burden (hours)</b>
SSA-1696	800,000	1	12	160,000
SSA-1696-SUP1	21,000	1	5	1,750
SSA-1696-SUP2	233,000	1	5	19,417
<b>Totals</b>	<b>1,054,000</b>			<b>181,167</b>

The total burden for this ICR is **181,167** hours. We based this figure on current management information data, and it represents burden hours. We did not calculate a separate cost burden.

**13. Annual Cost to the Users (Other)**

This collection does not impose a known cost burden to the respondents.

**14. Annual Cost To Federal Government**

The annual cost to the Federal Government is approximately \$36,900. This estimate accounts for costs from the following areas: (1) designing, printing, and distributing the form; and (2) SSA employee (e.g., field office, 800 number, DDS staff) information collection and processing time. We recognize that recipients and their representatives increasingly download the form from our Internet site.

**15. Program Changes or Adjustments to the Information Collection Request**

The increase in the public reporting burden is due to including new questions regarding the business affiliation and EIN of the representatives, which we took from the SSA-1695 (0960-0730). Once we receive approval for these additional questions, we intend to discontinue the SSA-1695. We anticipate the addition of these questions will increase the average burden per response for the SSA-1696 by about three minutes, thus increasing the overall burden for the form. In addition, we also included two new supplemental forms, the SSA-1696-SUP1 and SSA-1696-SUP2, to standardize the revocation or withdrawal requests, which respondents can submit to us separately. These new forms also increase the overall burden for this collection. Please see the Addendum for further details.

**16. Plans for Publication Information Collection Results**

SSA will not publish the results of the information collection.

**17. Displaying the OMB Approval Expiration Date**

OMB granted SSA an exemption from the requirement to print the OMB expiration date on its program forms. SSA produces millions of public-use forms with life cycles exceeding those of an OMB approval. Since SSA does not periodically revise and reprint its public-use forms (e.g., on an annual basis), OMB granted this exemption so SSA would not have to destroy stocks of otherwise useable forms with expired OMB approval dates, avoiding Government waste.

**18. Exceptions to Certification Statement**

SSA is not requesting an exception to the certification requirements at 5 *CFR* 1320.9 and related provisions at 5 *CFR* 1320.8(b)(3).

**B. Collections of Information Employing Statistical Methods**

SSA does not use statistical methods for this information collection.