

CURRENT Wage and Employment Information Authorization- Title II/XVI Web and Internet iClaim

1. WEB: WAGE AND EMPLOYMENT INFORMATION AUTHORIZATION - PROGRAMMATIC WAGE AUTHORIZATION - CURRENT AUTHORIZATION DETAILS

Wage Authorization

Name	Social Security Number (SSN)	Role
		Claimant

General Identification

- ☒ Person Information
- ☒ SSI Application
- ☒ Disability
- ☒ Multiple SSNs
- ☒ Residency & Presence in the U.S.
- ☐ Financial Permission
- ☐ Personal Information Authorization

Wage and Employment Information Authorization

Optional authorization allowing payroll data providers to release wage and employment information to SSA

* Indicates required information

Current Authorization Details [More Info](#)

SSDI	
Authorization status	Inactive
Response date	--
Attested date	--

SSI	
Authorization status	Inactive
Response date	--
Attested date	--

*Person available to provide response in person, over the phone, or through a signed paper form [More Info](#)

☐ Yes ☐ No

2. WEB: WAGE AND EMPLOYMENT INFORMATION AUTHORIZATION - PERSON AVAILABLE

* Person available to provide response in person, over the phone, or through a signed paper form [More Info](#)

☒ Yes ☐ No

* Relationship of person providing response

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* Name of person providing response

* First Middle * Last Suffix

* Address of person providing response

If you update this address, it will be used only for the purpose of printed notice and will not be saved

* Country

United States or U.S. Territory

* Street 1

Street 2

Street 3

Street 4

* City/Town

* State/Territory

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* ZIP Code

3. WEB: WAGE AND EMPLOYMENT INFORMATION AUTHORIZATION - FOREIGN ADDRESS

*** Address of person providing response**

If you update this address, it will be used only for the purpose of printed notice and will not be saved

*** Country**

Andorra 

*** Street 1**

Street 2

Street 3

Street 4

*** City/Town**

State/Province/Region

Postal Code

4. WEB: EXAMPLE 1 WAGE AND EMPLOYMENT INFORMATION AUTHORIZATION - INITIAL CLAIM - CONCURRENT

Authorization Response

*** Concurrent filing**

☒ Yes ☐ No

*** Authorization to obtain wage and employment information from payroll data providers for SSDI program**

☐ Yes ☒ No

*** SSDI response date**

08/01/2017

mm/dd/yyyy

*** Authorization to obtain wage and employment information from payroll data providers for SSI program**

☐ Yes ☒ No

*** SSI response date**

08/01/2017

mm/dd/yyyy

☐ *** Attested this response**

5. WEB: EXAMPLE 2 WAGE AND EMPLOYMENT INFORMATION AUTHORIZATION - INITIAL CLAIM - CONCURRENT

* Authorization to obtain wage and employment information from payroll data providers for SSDI program

☒ Yes	☐ No
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* SSDI response date

08/01/2017

mm/dd/yyyy

* Authorization to obtain wage and employment information from payroll data providers for SSI program

☒ Yes	☐ No
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* SSI response date

08/01/2017|

mm/dd/yyyy

☐ * Attested this response



The authorization scope and duration statement will print when OK is selected

5. WEB: WAGE AND EMPLOYMENT INFORMATION AUTHORIZATION - AUTHORIZATION STATUS ACTIVE

Person requests to revoke.

Authorization Response	
 When a person requests to revoke authorization, it will apply to both programs, SSI and SSDI. Revocation cannot be requested for one program alone.	
☒ Person requested to revoke authorization to obtain wage and employment information from payroll data providers. Revocation will apply to all claims under both programs, SSDI and SSI.	
* Revocation date mm/dd/yyyy * Relationship of person providing response --  * Name of person providing response * First Middle * Last Suffix * Address of person providing response If you update this address, it will be used only for the purpose of printed notice and will not be saved * Country United States or U.S. Territory  * Street 1 Street 2 * Street 3 Street 4 * City/Town State/Territory * ZIP Code --  ☐ * Attested this response <tr><td>  The authorization revocation statement will print when OK is selected </td></tr>	 The authorization revocation statement will print when OK is selected
 The authorization revocation statement will print when OK is selected	

6. INTERNET iCLAIM- EXAMPLE AUTHORIZATION TO OBTAIN WAGE AND EMPLOYMENT INFORMATION-CONCURRENT



Social Security

The Official Website of the U.S. Social Security Administration

Apply for Benefits

- 1 Provide Background Information
- 2 Provide Disability Information
- 3 Sign Medical Release
- 4 Confirmation

Authorization to Obtain Wage and Employment Information

To help us make a decision about your claim, we may need to obtain your wage and employment information. If you give us authorization, we may request that information from payroll data providers. Your authorization may also help us avoid paying you the wrong amount.

Your authorization will remain effective until one of the following occurs:

- We make a final adverse decision on the application for benefits and no other claims or appeals are pending;
- Your entitlement to benefits or eligibility for SSI payments ends and no other claims or appeals are pending; or
- You revoke your authorization in writing.



Before providing your responses below, please read [Authorization to Obtain Wage and Employment Information](#). By providing a "Yes" response, you will be electronically signing the authorization form. If you are helping someone else apply, then the person filing for benefits must read the form and make the selection.

Do you give us authorization to obtain your wage and employment information from payroll data providers for the Social Security Disability Insurance (SSDI) program?

☐ Yes ☐ No

Do you give us authorization to obtain your wage and employment information from payroll data providers for the Supplemental Security Income (SSI) program?

☐ Yes ☐ No

Accept & Continue

Save & Exit

7. INTERNET iCLAIM- INFORMATION ABOUT YOUR WAGE AND EMPLOYMENT AUTHORIZATION



Social Security

The Official Website of the U.S. Social Security Administration

Apply for Benefits

- 1 Provide Background Information
- 2 Provide Disability Information
- 3 Sign Medical Release
- 4 Confirmation



Please read the following statements before proceeding:

The authorization you gave us allows the Social Security Administration to obtain your wage and employment information from payroll data providers via an information exchange. For more information, please see the **Authorization Scope and Duration Statement** below.

Information About your Wage and Employment Information Authorization

This is your only opportunity to view and print the Authorization Scope and Duration Statement. We recommend you keep a copy for your records.



[Authorization Scope and Duration Statement](#)

Once you receive the confirmation page, you can print a receipt that covers the application questions and responses you previously reviewed and electronically signed. You can continue the online application process by selecting **"Next"** below.

Next

Authorization Scope and Duration Statement



We still need more information to process your application.

We recommend you print and save a copy of this page for your records. When you are ready to continue, close this window to continue to the next step of the online application process.

[Print this page](#)

AUTHORIZATION FOR THE SOCIAL SECURITY ADMINISTRATION (SSA) TO OBTAIN WAGE AND EMPLOYMENT INFORMATION FOR:

JANE PUBLIC RESIDING AT 14 SOME ST, BALTIMORE, MD, 21228

On September 8, 2018 you authorized us to get wage and employment information from payroll data providers used by your employer(s). The authorization you gave us is related to your Social Security Disability Insurance (SSDI) application or benefits. This document gives you information about your authorization.

We may use the information we receive from payroll data providers (as defined in section 1184 of the Social Security Act) to help us determine entitlement for SSDI benefits, continuation of SSDI benefits, and for the additional purposes described below. The authorization you gave us remains in effect until: (1) your application(s) is denied in a final decision and no other claims or appeals are pending; (2) your entitlement for SSDI benefits ends and no other claims or appeals are pending; (3) you revoke your authorization in writing.

By authorizing SSA to obtain wage and employment information:

- You or the client will not be subject to certain penalties under section 1129A of the Social Security Act if we are receiving your or the client's wage and employment information from a payroll data provider. If you later revoke your authorization, you or the client will no longer be entitled to this protection.
- You or the client are still responsible for making sure that your or the client's wages and employment information are reported accurately to us.
- You or the client may have to pay us back if we pay you or the client too much because the payroll data provider(s) gave us incorrect wage or employment information.
- If we get wage and employment information from payroll data providers based on this authorization, we may use the information for other purposes. For example, SSA may use your or the client's information to decide whether you or the client can get benefits under both the Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) programs, even if your authorization was given for only one of those programs. We explain more about how SSA may use and disclose your or the client's wage and employment information in the Privacy Act Statement below.

I, JANE PUBLIC, have authorized any payroll data providers to disclose any wage and employment information about me to the Social Security Administration.

I understand that anyone who knowingly lies or misrepresents the truth or arranges for someone to knowingly lie or misrepresent the truth is committing a crime which can be punished under Federal law, State law, or both. Everything in this document is true and correct to the best of my knowledge.

**PRIVACY ACT STATEMENT
COLLECTION AND USE OF INFORMATION ON YOUR AUTHORIZATION**

Sections 205(a), 225, 1184, and 1631(e) of the Social Security Act, as amended, allow us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information may prevent us from making an accurate and timely decision regarding your Social Security benefits.

We will use the information you provide to obtain information about you from payroll data providers. We will use the payroll data provider information to administer the Social Security Act, such as determining your eligibility for Social Security benefits. We may also share your information for the following purposes, called routine uses:

1. To contractors and other Federal agencies as necessary, for the purpose of assisting the Social Security Administration (SSA) in the efficient administration of its programs. We contemplate disclosing information under this routine use only in situations in which SSA may enter a contractual or similar agreement with a third party to assist in accomplishing an agency function.
2. To employers or former employers for correcting or reconstructing earnings records and for Social Security tax purposes only.

In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.

A list of additional routine uses is available in our Privacy Act System of Records Notice (SORN) 60-0089, entitled Claims Folders Systems and 60-0090, entitled Master Beneficiary Record. Additional information and a full listing of all our SORNs are available on our website at www.socialsecurity.gov/foia/bluebook.

[Close](#)
