

OMB Screen package for
Lump Sum Death Payment (LSDP)
Using the online Universal Benefit
Application (UBA)

Terms & Policies Screen

Individuals interested in filing for SSA benefits, are guided through the SSA.gov pages to find information or their mySSA portal where they will be asked to authenticate their identity. Once the individual is authenticated, they will be presented with the Terms and Policy screen shown below.

This screen includes three different tabs i.e., Paper Reduction Act, Collection and use of Personal Information, and the Terms of service for individuals to review. The individual must check the box for “I understand and agree to the above statements” to continue.

An official website of the United States government [Here's how you know](#)

Social Security [Leave Application](#)

Terms & policies

All information is required, unless noted optional.

Paperwork Reduction Act

Collection and Use of Personal Information

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.

I understand that:

- 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.

I understand and agree to the above statements

Information about Social Security's Online Policies

We are committed to protecting individual privacy and securing the personal information made available to us when you visit our website, SSA.gov. Our [Internet Privacy Policy](#) explains our online information practices.

[Return to top](#)

[Next](#)

“How this works” screen

Once the individual accepts the Terms of Service, they are presented with the “How this works” screen, which informs individuals about the process and what’s required to complete the Lump Sum Benefit Payment application.

The screenshot shows the Social Security website interface. At the top left is the Social Security logo and the text 'Social Security'. At the top right is a link labeled 'Leave Application'. The main heading is 'How this works'. Below this, a paragraph explains that the application is for a Lump Sum Death payment of \$255, which must be filed within two years of the family member's death. There are three expandable sections: 'Information we'll ask you to provide', 'Who can apply online?', and 'Applying for monthly survivor benefits?'. Each section has a downward-pointing chevron icon. Below these sections is a section titled 'Complete the application' with a clock icon and the text '6 minutes to complete'. A note states 'Your answers won't be saved until you submit the completed application.' At the bottom of the screen is a blue button labeled 'Next'.

How this works

This is an application for the Lump Sum Death payment, which provides a one-time payment of \$255.

Applications must be filed within two years of the family member's death.

- Information we'll ask you to provide
- Who can apply online?
- Applying for monthly survivor benefits?


Complete the application

⌚ 6 minutes to complete

Your answers won't be saved until you submit the completed application.

Next

Below is the expanded view of each container in the How this works screen. Individuals selecting next on this screen are presented with subsequent questions to determine if they are eligible to file online.

 Social Security [Leave Application](#)

How this works

This is an application for the Lump Sum Death payment, which provides a one-time payment of \$255.

Applications must be filed within two years of the family member's death.

Information we'll ask you to provide ^

Basic information about yourself

- Social Security number

Information about the deceased

- Deceased's spouse's Social Security number and birthday
- Marriage information (dates, location, etc.)


Direct deposit for benefit payments

Routing and account number for your bank account.

Who can apply online? v

Applying for monthly survivor benefits? v

Complete the application

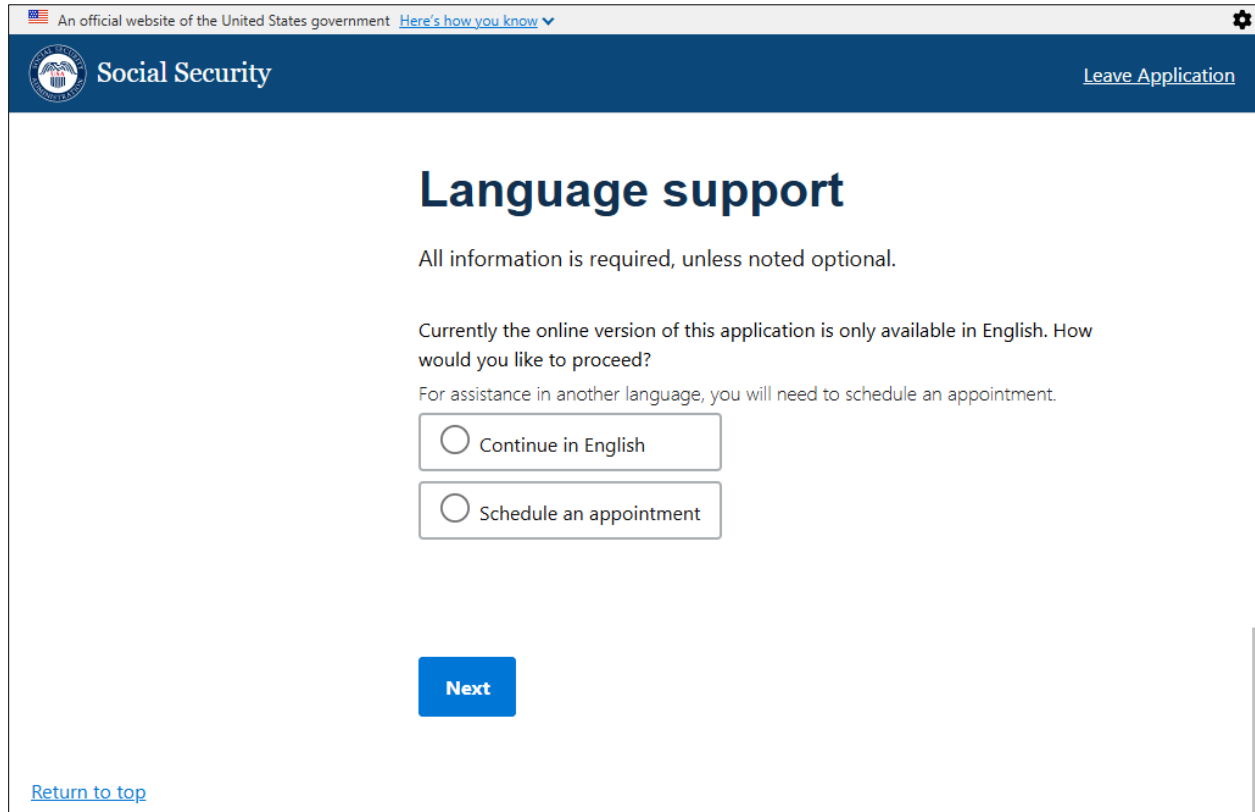
 6 minutes to complete

Your answers won't be saved until you submit the completed application.

[Next](#)

Language support Screen

Individuals selecting “next” on the “How this works” page, are presented with the language support page. This page provides the option to either continue online in English or schedule an appointment.



The screenshot shows the Social Security Administration's language support screen. At the top, there is a header with the Social Security logo and the text "Social Security". To the right of the logo, it says "An official website of the United States government" and "Here's how you know" with a dropdown arrow. Further right is a "Leave Application" link. The main content area has a large heading "Language support" followed by the text "All information is required, unless noted optional." Below this, it states "Currently the online version of this application is only available in English. How would you like to proceed?" and "For assistance in another language, you will need to schedule an appointment." There are two radio button options: "Continue in English" and "Schedule an appointment". A blue "Next" button is positioned below the options. At the bottom left, there is a "Return to top" link.

Injuries, illnesses, and conditions Screen

We present this page to determine if the individual may need to file for disability benefits. Individual answering “yes” is directed to the online disability application outside UBA with an option to schedule an appointment. Selecting No will allow the user to continue to file for LSDP online.

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Social Security [Leave Application](#)

Injuries, illnesses, and conditions

All information is required, unless noted optional.

Why do we ask this?
We are asking you about this information to help us determine if you may be eligible for additional benefits. Refer to [Benefit types | SSA](#) for more information.

Do you have any illnesses, injuries, or conditions that significantly limit your ability to work and have lasted or are expected to last at least 12 months or result in death?

Yes

No

[Next](#)

[Return to top](#)

Surviving spouse Screen

After answering the disability question, we ask individuals if they are the surviving spouse of the deceased. Selecting Yes will allow the user to continue online. Selecting No will require the user to schedule an appointment as the online LSDP version is only for the one-time LSDP payment.

The screenshot shows the 'Surviving Spouse' screen on the Social Security website. At the top, there is a navigation bar with the Social Security logo, the text 'Social Security', and a 'Leave Application' link. Below the navigation bar, the title 'Surviving Spouse' is displayed in a large, bold font. Underneath the title, a message states: 'All information is required, unless noted optional.' The main question is 'Are you the surviving spouse of the deceased?'. A link for 'What do we mean by surviving spouse?' is provided. Below the question are two radio button options: 'Yes' and 'No'. A blue 'Next' button is positioned below the options. At the bottom left, there is a 'Return to top' link.

Deceased SSN & date of birth Screen

We then ask for the deceased's Social Security Number and date of birth. If the responses provided do not match what we have on file, they will be instructed to schedule an appointment. If the individual meets the conditions to file online i.e., has answered all prior questions, then they can start the online application.

The screenshot shows the 'Deceased SSN & date of birth' screen on the Social Security website. At the top, there is a navigation bar with the Social Security logo, the text 'Social Security', and a 'Leave Application' link. Below the navigation bar, the title 'Deceased SSN & date of birth' is displayed in a large, bold font. Underneath the title, a message states: 'All information is required, unless noted optional.' The first question is 'What is the deceased's Social Security number?'. Below this question is a text input field with a placeholder '- - -'. The second question is 'What is the deceased's date of birth?'. Below this question are three input fields: 'Month' (a dropdown menu with '-Select-' selected), 'Day' (a text input field), and 'Year' (a text input field). A blue 'Start Application' button is positioned below the input fields. At the bottom left, there is a 'Return to top' link.

Deceased information Screen

Once the individual selects “start application”, we ask for more detailed information i.e., name, date of death, place of death to help us establish the information for the claim.

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Social Security [Leave Application](#)

Deceased information

All information is required, unless noted optional.

What is the deceased's name?

First

Middle *(optional)*

Last

Suffix *(optional)*

The deceased's Social Security number
***-**-0000 [Show](#)

The deceased's date of birth
01/01/1980

What is the deceased's date of death?

Month Day Year

Where was the deceased's place of death?

U.S. International

City/Town State/Territory

[Next](#)

[Return to top](#)

Your identity Screen

After the decease's information screen, we proceed to collect the information for the individual filing for the LSDP. Any information that the individual had already provided as part of the identity authentication thru mySSA account is automatically propagated in this screen. The individual's SSN and date of birth are shown as read-only.

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Your identity

All information is required, unless noted optional.

i **Information on file**
The information displayed below is gathered from what we have on file in your *my* Social Security account.

Your Name
Please provide the name as it appears on the most recent Social Security card

First

Middle (optional)

Last

Suffix (optional)


Your Social Security Number (SSN)
***-**-6789 [Show](#)



Your date of birth
03/12/1958

[Return to top](#)

Your address and Phone Number Screens

After the identity screen, we collect the individual's contact information such as address and phone number. This screen collects the individual's address which we can use to send the appropriate notifications.

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Your address

All information is required, unless noted optional.


What is your mailing address?



Street Apartment, suite, building, etc. (optional)

City/Town State/Territory ZIP code

[Next](#) [Previous](#)

[Return to top](#)

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Phone number

All information is required, unless noted optional.

What is your phone number?

[U.S.](#) [International](#)

10-digit number

[Next](#) [Previous](#)

[Return to top](#)

Marriage Screen

Once we collected the contact information, we present the marriage screen for the individual to provide the marriage type and dates.

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Marriage details

All information is required, unless noted optional.

When did you get married?
Enter the date as close as you can remember

Month Day Year

Where did your marriage take place?

U.S. International

City/Town State/Territory

What type of marriage did you have?
[More information](#)

[More information](#)

-Select-

Clergy/Public official

Other ceremonial

Common law

Living together Screen

Individuals must state whether they were living with the deceased at the time of death to be eligible for the LSDP payment. If they answer “Yes, they continue to the next page. If No, they must provide additional information to provide the reason of when the absence began, and what caused the absence.

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Social Security Leave Application

Living together

All information is required, unless noted optional.

Were you and [First] [Last] living together at the time of their death?

Yes

No

[Return to top](#)

[Next](#) [Previous](#)

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Social Security Leave Application

Living together

All information is required, unless noted optional.

Were you and [First] [Last] living together at the time of their death?

Yes

No

Who was away when [First] [Last] died?

Jean Smith

[First] [Last]

What date did this absence begin?

Month Day Year

-Select- [] []

What caused the absence?

-Select-

[Return to top](#)


[Next](#) [Previous](#)


What caused the absence?

- Select-
- Select-
- Business travel
- Confinement in a hospital or other institution
- Medical reasons, but not confined to an institution
- Marital difficulties
- Military service
- Residence in different countries
- Penal institution
- Other

Railroad Screen

The following screen collects whether the deceased work for the railroad for five years or longer, and whether they were receiving or eligible to receive a railroad pension or annuity. This information will help us to determine if there is a Railroad benefit involved and what agency has jurisdiction.

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 **Social Security** [Leave Application](#)

Railroad

All information is required, unless noted optional.

This will help us determine whether the Railroad Retirement Board has jurisdiction over your claim.

Did [First] [Last] work for the Railroad industry for five years or longer?

Yes

No

Was [First] [Last] receiving or eligible to receive a Railroad pension or annuity?

Yes

No

[Next](#) [Previous](#)

[Return to top](#)

Direct deposit Screen

We ask whether they own or co-own a bank account for direct deposit. Individual answering “Yes” can proceed to enter banking information. Individuals answering “No” are asked whether they wish to enroll in direct express. Individuals answering no are given an alert saying a bank account is required.


This screenshot shows the 'Direct deposit details' screen on the Social Security website. The header includes the Social Security logo and the text 'Social Security'. A navigation bar at the top right contains 'Leave Application'. The main heading is 'Direct deposit details', followed by the instruction 'All information is required, unless noted optional.' The question is 'Do you own or co-own a bank account you can use for direct deposit?'. Below the question is a link 'Learn more about direct deposit'. Two radio buttons are present: 'Yes' (unselected) and 'No' (selected). Below the radio buttons are 'Next' and 'Previous' buttons. A 'Return to top' link is at the bottom left. A red dashed line highlights the 'No' radio button and the 'Next' button.


This screenshot shows the 'Direct deposit details' screen on the Social Security website. The header includes the Social Security logo and the text 'Social Security'. A navigation bar at the top right contains 'Leave Application'. The main heading is 'Direct deposit details', followed by the instruction 'All information is required, unless noted optional.' The question is 'Do you own or co-own a bank account you can use for direct deposit?'. Below the question is a link 'Learn more about direct deposit'. Two radio buttons are present: 'Yes' (selected) and 'No' (unselected). Below the radio buttons is the 'Account information' section, which includes a warning: 'Warning: Providing incorrect information may result in a delayed payment.' Under 'Account Type', there are two radio buttons: 'Checking' (selected) and 'Savings' (unselected). Below this is a link 'How to find your routing and account number'. There are two input fields: 'Routing Number' and 'Account Number'. At the bottom are 'Next' and 'Previous' buttons. A 'Return to top' link is at the bottom left. A red dashed line highlights the 'Yes' radio button and the 'Next' button.

This is an alert box with a yellow background and a black border. It contains a warning icon (an exclamation mark inside a circle) followed by the heading 'Bank account required'. The text below reads: 'New rules require you to receive your payments electronically, unless you get an exemption from the Department of the Treasury. If you do not have a bank account to use for direct deposit, you can still complete this claim online. We will contact you later to discuss your options.' A red dashed arrow points from the 'No' radio button in the screenshot above to the 'No' radio button in this alert box.

Remarks Screen

We provide the individual with the option to enter additional information relevant to their application. The message is limited to 750 characters.

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 **Social Security** [Leave Application](#)

Overall remarks

Please provide any additional information you want to include about your entire application *(optional)*

For example: explain if you estimated any dates, places, or amounts

Characters remaining: 750

[Return to top](#)

[Next](#) [Previous](#)

Review & sign Screen

This page contains a summary of all the answers the individual provided in their application. They have the option to Edit the information by clicking the Edit button which allows them to make their changes on the page.

The page also contains the electronic signature agreement at the end of the page. Once the individual checks the box agreeing with their signature and click “Submit now” the application is automatically submitted to us.

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Social Security [Leave Application](#)

Review & sign

All information is required, unless noted optional.

Your previous answers

If you need to make any changes, click the "Edit" button of the section you want to change

✔ Your identity

[Edit](#)

Your name
Jean Smith

Your Social Security Number
***-**-6789

Date of birth
03/12/1958

✔ Your address

[Edit](#)

Mailing address
123 street, Town, SC, 00000

✔ Phone number

[Edit](#)

Phone number
(000) 000 - 0000

✔ Railroad

[Edit](#)

Did [Deceased Name] work for the Railroad industry for five years or longer?

-

Was [Deceased Name] receiving or eligible to receive a Railroad pension or annuity?

-

✔ Direct Deposit details

[Edit](#)

Do you own or co-own a bank account you can use for direct deposit?

-

✔ Remarks

[Edit](#)

Additional Information you want to include

Electronic signature agreement

Read and accept the following statements before submitting your application. If you are helping someone apply, then the person filing for benefits must read and accept this agreement.

- I agree to return any payments which are not due.
- I understand and agree that by selecting the check box and clicking "Submit Now" below, I am electronically signing my application and the additional forms included in this online submission.
- I also understand that my electronic signature means that I intend to apply for this one-time payment and have provided the Social Security Administration with accurate information.
- I declare under penalty of perjury that I have examined all the information on this application, and it is true and correct to the best of my knowledge.
- I understand that anyone who knowingly gives a false or misleading statement about a material fact in this electronic application, or causes someone else to do so, commits a crime and may be sent to prison or may face other penalties, or both.

By selecting the check box and clicking "Submit now" below, I am electronically signing my application.

I agree with the electronic signature agreement above

! You will no longer be able to change this information once you continue.
When you select "Submit now" below, you will be sending this completed information electronically to the Social Security Administration. Please make sure everything is correct.

[Submit now](#)

[Previous](#)

Next steps Screen

After submitting the application, we display the “Next Steps” screen informing individuals how to check the status of their application. This page also provides a link to open a receipt to print if desired.

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Social Security [Leave Application](#)

Next Steps

What you need to do next

✔ Thank you for applying for the following benefits:
Lump Sum Death Payment

You can check the status of your application online by signing in to or creating a my Social Security account. We will contact you with any updates or questions we may have about your information.

View & Print the following:

- [Your application receipt](#)

We recommend that you keep a copy for your records.

[Continue to mySSA](#)

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Social Security [Close](#)

Application Receipt

Your previous answers

If you need to make any changes, click the "Edit" button of the section you want to change

Your identity

Your name
Jean Smith

Your Social Security Number
***-**-6789

Date of birth
03/12/1958

Your address

Mailing address
123 street, Town, SC, 00000

Phone number

Phone number
(000) 000 - 0000

Deceased information

Deceased's name
[Print](#) [List](#)

The deceased's Social Security number
***-**-0000

The deceased's date of birth
01/01/1980

Deceased's date of death
01/01/2025