

Disallowance - Not A Spouse Under the Act

Social Security Administration
Retirement, Survivors and Disability Insurance
Notice of Disapproved Claim

[F1]
Claim Number: [F1]
[F2]
[F1]

[F1]
[F2]

Optional (SSAH74)

Dear [F1]

We have considered your application for spouse's benefits on [F1] Social Security record. You are not entitled to benefits now because you do not meet the marriage requirement.

Why We Can't Pay You

Mandatory Choice 1 of 3 (MAR031)

You can not get benefits because your marriage does not meet the requirements of the law. You can only qualify for benefits as a spouse if one of the following is true:

- Your marriage to [F1] is valid under State or Federal law, or
- Your marriage to [F2] is not valid, but you went through a marriage ceremony in good faith.

Mandatory Choice 2 of 3 (MAR032)

You can not get benefits because your marriage does not meet the requirements of the law. You can only qualify for benefits as a spouse if one of the following is true:

- Your marriage to [F1] is valid under the law of the State or country of residence, or
- Your marriage to [F2] is not valid, but you went through a marriage ceremony in good faith.

Mandatory Choice 3 of 3 (MAR033)

You can not get benefits because your marriage does not meet the requirements under Federal law for payment of Social Security [F1] benefits.

Other Social Security Benefits

[F1] not entitled to any other Social Security benefits based on the application [F2] filed. In the future, if [F3][F4] may be entitled to benefits, [F5] will need to apply again.

Do You Disagree With The Decision?

If you disagree with this decision, you have the right to appeal. We will review your case and consider any new facts you have. A person who did not make the first decision will decide [F1] case. We will correct any mistakes. We will review those parts of the decision which you believe are wrong and will look at any new facts you have. We may also review those parts which you believe are correct and may make them unfavorable or less favorable to [F2].

- You have 60 days to ask for an appeal.
- The 60 days start the day after you get this letter. We assume you got this letter 5 days after the date on it unless you show us that you did not get it within the 5-day period.
- You must have a good reason for waiting more than 60 days to ask for an appeal.
- You have to ask for an appeal in writing. We will ask you to sign a Form SSA-561-U2, called "Request for Reconsideration". Contact one of our offices if you want help.

Please read the enclosed pamphlet, "Your Right to Question the Decision Made on Your Social Security Claim". It contains more information about the appeal.

New Application

You have the right to file a new application at any time, but filing a new application is not the same thing as appealing this decision. If you disagree with this decision and you file a new application instead of appealing:

- you might lose some benefits, or not qualify for any benefits, and
- we could deny the new application using this decision, if the facts and issues are the same.

So, if you disagree with this decision, you should file an appeal within 60 days.

If You Want Help With Your Appeal

You can have a friend, representative or someone else help you. There are groups that can help you find a representative or give you free legal services if you qualify. There also are representatives who do not charge unless you win your appeal. Your local Social Security office has a list of groups that can help you with your appeal.

If you get someone to help you, you should let us know. If you hire someone, we must approve the fee before he or she can collect it. And if you hire a representative who is eligible for direct pay, we will withhold up to 25 percent of any past due benefits to pay toward the fee.

If You Have Any Questions

Mandatory Choice 1 of 2 (REF041)

For general information about Social Security we invite you to visit our website at www.socialsecurity.gov on the Internet. For general questions and specific questions about [F1] case, you may call us toll-free at 1-800-772-1213, or call your local Social Security office at [F2]. We can answer most questions over the phone. If you are deaf or hard of hearing, you may call our TTY/TDD number [F3]. If you do call or visit an office, please have this letter with you. It will help us answer your questions.

Mandatory Choice 2 of 2 (REF002)

We invite you to visit our website at www.socialsecurity.gov on the Internet to find general information about Social Security. If you have any specific questions, you should contact any Social Security office or the nearest United States Embassy or consulate. Or, if you live in the Philippines, you may contact the Veterans Administration Regional Office, Social Security Division, 1131 Roxas Boulevard, Manila.

You may also write the Social Security Administration, P.O. Box 17769, Baltimore, Maryland, 21235-7769, USA. Please be sure to include your claim number if you do write. However, if you visit an office, please take this letter. It will help the people there answer your questions. Medicare information is available on the Internet at www.medicare.gov.

[F1]
[F2]
[F3]

Optional (ENC096)

Enclosure(s):

Optional (ENC095)

[F1]