

Social Security Administration

Important Information

Dear

We are writing to tell you that we were unable to process the Form SSA-1699, Request for Appointed Representative's Direct Payment Information, that you submitted. We could not process the form(s) because information was missing and/or we could not read some of the information you provided.

If you provided a telephone number, we did try to contact you at least once before returning the form(s) to you. We have marked the form(s) to indicate the information we need. Please provide the information and return the form(s) in the enclosed envelope as soon as possible. We do not withhold from past-due benefits to pay the fee we approve unless we have recorded the information by the time we effectuate a favorable decision, if any.

If you prefer, you may provide the information for the Form SSA-1699, Request for Appointed Representative's Direct Payment Information, by registering online at www.socialsecurity.gov/representation/.

If You Have Any Questions

For general information about the Claimant Representative Registration process, visit our *Representing Claimants* website at www.socialsecurity.gov/representation/. If you have questions about reporting income or Form 1099-MISC, please contact the Internal Revenue Service.

For specific questions about completing the form, you may call us toll-free at 1-800-772-1213 or call your local Social Security office at (*Field Office Phone Number*). If you call or visit our office, please bring this letter with you and ask for (*Claims Representative Name*).

Enclosure(s):