

Instruction: This is a model letter. Adapt to fit your facts and circumstances.

		Return address:
		Name
	Date	Address Line 1
		Address Line 2
		City, State Zip Code
Name		
Company		
Address Line		
City, State Zip Code		

Dear

I have been retained to represent [CLIENT] in an appeal for disability benefits from the Social Security Administration. I enclose the following signed forms: Request for Hearing (including all copies), Appointment of Representative (file and OHA copies only) and Claimant's Statement When Request for Hearing Filed and the Issue is Disability.

Because I would like to use the "fee agreement process" for obtaining approval of my fee in this case, I enclosed the original contract signed by my client and me. Please note that my client has been provided with a copy of this contract.

Please sign and date the "acknowledgement of request for hearing" and return the representative's copy to me as soon as possible so that my records will show timely receipt of this Request for Hearing. You may send the claimant's copy directly to my client. If you need any other forms signed by my client, you may send them directly to my client.

Please send this letter along with my client's file to the Office of Hearings and Appeals.

NOTE TO OHS HEARING ASSISTANT:

1. Please notify me as soon as the file arrives at the Office of Harrings and Appeals so that I can copy it as soon as possible.
2. Please contact me prior to setting a date for hearing so that I may avoid conflicts in my schedule.

Sincerely,

{Name}